



Monthly Dependent Premium Rates

2018

9 Month (20 Pay) - Active Employees Only

Plan – PPO (Medical and Dental Coverage)	
Employee	Paid by NCSD
Spouse	\$901.20
Child/Children	\$374.40
Family (Spouse+Children)	\$1,275.60

Plan – HRA (Medical and Dental Coverage)	
Employee	Paid by NCSD
Spouse	\$944.40
Child/Children	\$300.00
Family (Spouse+Children)	\$1,244.40

Vision (Must be enrolled in Medical and Dental coverage with NCSD)	
Employee	Paid by NCSD
Family (1or more dependents)	\$14.40

Dental/Vision (Medical Excluded)	
Spouse	\$49.34
Children	\$56.57
Family (Spouse +Children)	\$96.17

- You may elect Dental/Vision coverage for dependents without adding them to your medical coverage.
- For new enrollments, log into the iVisions Web Portal - <https://ivisions.nye.k12.nv.us/ivisions/> or also available on the District Website under the blue staff panel, click iVision, then click *Benefits/Benefits Enrollment*. If you need your password reset please call Rachel Owens at (775) 727-7743 ext. 234 or Vikki Purden at (775) 727-7743 ext. 264.
- In the event you have a qualifying life event and need to make changes to your health plan, or have any questions please contact Vikki Purden at (775) 727-7743 ext. 264.

General Information

<p>Capitol Administrators Third Party Claims Administrator 1-800-331-5301 www.capitoladm.com Register for Benefit & Claims info. or to request ID cards.</p>	<p><u>Kroger Prescription Plans-Pharmacy</u> <u>Postal Prescription Services-Mail Order</u> www.kpp-rx.com –pharmacy- 1-800-482-1285 www.ppsrx.com –mail order- 1-800-552-6694</p>
<p><u>Medical PPO Doctors –</u></p>	<p><u>Dental PPO Doctors -</u> <u>Diversified Dental Services</u> www.ddsppo.com</p>
<p><u>Vision Coverage &</u> <u>PPO Doctors - VSP</u> www.vsp.com</p>	<p><u>Summary of Benefits & Coverage</u> Outlines Medical & Dental Coverage www.nye.k12.nv.us <i>Front Page under Staff Panel</i></p>