2019 Classified Retiree Rates 45.00% District Contribution

Effective October 1, 2019 - September 30, 2020

All rates include medical, prescription, vision and the indicated dental plan

		Moda Medical Basic Rates		Moda Medical Select Rates	
Includes Medical, Rx, Vision, &	Kaiser Permanente	(currently enrolled in a Connexus PPO Plan)		(currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4	Moda Plan 3	Moda Plan 4
Delta Dental Plan 5	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$443.49	\$511.75	\$481.48	\$506.34	\$467.13
Retiree + Spouse/◊Domestic Partner	\$1,178.35	\$1,303.74	\$1,237.16	\$1,291.86	\$1,205.58
Retiree + Children	\$1,021.43	\$1,133.20	\$1,075.69	\$1,122.91	\$1,048.41
Retiree + Family	\$1,760.98	\$1,929.80	\$1,835.98	\$1,913.06	\$1,791.48

		Moda Medical Basic Rates		Moda Medical Select Rates	
Includes Medical, Rx, Vision, &	Kaiser Permanente	(currently enrolled in a Connexus PPO Plan)		(currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4	Moda Plan 3	Moda Plan 4
Delta Dental Plan 6 *No Orthodontia*	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$428.71	\$496.97	\$466.70	\$491.56	\$452.35
Retiree + Spouse/◊Domestic Partner	\$1,149.03	\$1,274.42	\$1,207.84	\$1,262.54	\$1,176.26
Retiree + Children	\$980.38	\$1,092.15	\$1,034.64	\$1,081.86	\$1,007.36
Retiree + Family	\$1,704.31	\$1,873.13	\$1,779.31	\$1,856.39	\$1,734.81

		Moda Medical Basic Rates		Moda Medical Select Rates	
Includes Medical, Rx, Vision, &	Kaiser Permanente	(currently enrolled in a Connexus PPO Plan)		(currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4	Moda Plan 3	Moda Plan 4
Willamette Dental	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$432.21	\$500.47	\$470.20	\$495.06	\$455.85
Retiree + Spouse/◊Domestic Partner	\$1,156.01	\$1,281.40	\$1,214.82	\$1,269.52	\$1,183.24
Retiree + Children	\$992.08	\$1,103.85	\$1,046.34	\$1,093.56	\$1,019.06
Retiree + Family	\$1,719.66	\$1,888.48	\$1,794.66	\$1,871.74	\$1,750.16

		Moda Medical Basic Rates		Moda Medical Select Rates	
Includes Medical, Rx, Vision, &	Kaiser Permanente	(currently enrolled in a Connexus PPO Plan)		(currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4	Moda Plan 3	Moda Plan 4
*NO Dental	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$384.82	\$453.08	\$422.81	\$447.67	\$408.46
Retiree + Spouse/◊Domestic Partner	\$1,062.13	\$1,187.52	\$1,120.94	\$1,175.64	\$1,089.36
Retiree + Children	\$892.18	\$1,003.95	\$946.44	\$993.66	\$919.16
Retiree + Family	\$1,569.57	\$1,738.39	\$1,644.57	\$1,721.65	\$1,600.07

Members who enroll a domestic partner and/or child(ren) of a domestic partner in insurance are subject to an imputed income tax on their monthly paycheck. Ensure you understand the tax implecations before enrolling a domestic partner, or a child(ren) of a domestic partner prior to enrollment. Additional information can be found on the 4J Benefits website or by calling 4J Benefits at 541-790-7670.

*Retirees who waive dental insurance are not eligible to enroll in a dental plan in the future.