

2019 Classified Retiree Rates

46.75% District Contribution

Effective October 1, 2019 - September 30, 2020

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

Includes Medical, Rx, Vision, & Delta Dental Plan 5	Kaiser Permanente	Moda Medical Basic Rates (currently enrolled in a Connexus PPO Plan)		Moda Medical Select Rates (currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$436.49	\$504.75	\$474.48	\$499.34	\$460.13
Retiree + Spouse/∅Domestic Partner	\$1,171.35	\$1,296.74	\$1,230.16	\$1,284.86	\$1,198.58
Retiree + Children	\$1,014.43	\$1,126.20	\$1,068.69	\$1,115.91	\$1,041.41
Retiree + Family	\$1,753.98	\$1,922.80	\$1,828.98	\$1,906.06	\$1,784.48

Includes Medical, Rx, Vision, & Delta Dental Plan 6 *No Orthodontia*	Kaiser Permanente	Moda Medical Basic Rates (currently enrolled in a Connexus PPO Plan)		Moda Medical Select Rates (currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$421.71	\$489.97	\$459.70	\$484.56	\$445.35
Retiree + Spouse/∅Domestic Partner	\$1,142.03	\$1,267.42	\$1,200.84	\$1,255.54	\$1,169.26
Retiree + Children	\$973.38	\$1,085.15	\$1,027.64	\$1,074.86	\$1,000.36
Retiree + Family	\$1,697.31	\$1,866.13	\$1,772.31	\$1,849.39	\$1,727.81

Includes Medical, Rx, Vision, & Willamette Dental	Kaiser Permanente	Moda Medical Basic Rates (currently enrolled in a Connexus PPO Plan)		Moda Medical Select Rates (currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$425.21	\$493.47	\$463.20	\$488.06	\$448.85
Retiree + Spouse/∅Domestic Partner	\$1,149.01	\$1,274.40	\$1,207.82	\$1,262.52	\$1,176.24
Retiree + Children	\$985.08	\$1,096.85	\$1,039.34	\$1,086.56	\$1,012.06
Retiree + Family	\$1,712.66	\$1,881.48	\$1,787.66	\$1,864.74	\$1,743.16

Includes Medical, Rx, Vision, & *NO Dental	Kaiser Permanente	Moda Medical Basic Rates (currently enrolled in a Connexus PPO Plan)		Moda Medical Select Rates (currently enrolled in a Synergy CCM Plan)	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$377.82	\$446.08	\$415.81	\$440.67	\$401.46
Retiree + Spouse/∅Domestic Partner	\$1,055.13	\$1,180.52	\$1,113.94	\$1,168.64	\$1,082.36
Retiree + Children	\$885.18	\$996.95	\$939.44	\$986.66	\$912.16
Retiree + Family	\$1,562.57	\$1,731.39	\$1,637.57	\$1,714.65	\$1,593.07

∅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 implications 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.**