## 2019 Classified Retiree Rates 56.25% 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	\$398.49	\$466.75	\$436.48	\$461.34	\$422.13
Retiree + Spouse/ODomestic Partner	\$1,133.35	\$1,258.74	\$1,192.16	\$1,246.86	\$1,160.58
Retiree + Children	\$976.43	\$1,088.20	\$1,030.69	\$1,077.91	\$1,003.41
Retiree + Family	\$1,715.98	\$1,884.80	\$1,790.98	\$1,868.06	\$1,746.48

		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	\$383.71	\$451.97	\$421.70	\$446.56	\$407.35
Retiree + Spouse/ODomestic Partner	\$1,104.03	\$1,229.42	\$1,162.84	\$1,217.54	\$1,131.26
Retiree + Children	\$935.38	\$1,047.15	\$989.64	\$1,036.86	\$962.36
Retiree + Family	\$1,659.31	\$1,828.13	\$1,734.31	\$1,811.39	\$1,689.81

		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	\$387.21	\$455.47	\$425.20	\$450.06	\$410.85
Retiree + Spouse/◊Domestic Partner	\$1,111.01	\$1,236.40	\$1,169.82	\$1,224.52	\$1,138.24
Retiree + Children	\$947.08	\$1,058.85	\$1,001.34	\$1,048.56	\$974.06
Retiree + Family	\$1,674.66	\$1,843.48	\$1,749.66	\$1,826.74	\$1,705.16

		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	\$339.82	\$408.08	\$377.81	\$402.67	\$363.46
Retiree + Spouse/ODomestic Partner	\$1,017.13	\$1,142.52	\$1,075.94	\$1,130.64	\$1,044.36
Retiree + Children	\$847.18	\$958.95	\$901.44	\$948.66	\$874.16
Retiree + Family	\$1,524.57	\$1,693.39	\$1,599.57	\$1,676.65	\$1,555.07

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.