

2019 Classified Retiree Rates

80.00% 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	\$303.49	\$371.75	\$341.48	\$366.34
Retiree + Spouse/∅Domestic Partner	\$1,038.35	\$1,163.74	\$1,097.16	\$1,151.86	\$1,065.58
Retiree + Children	\$881.43	\$993.20	\$935.69	\$982.91	\$908.41
Retiree + Family	\$1,620.98	\$1,789.80	\$1,695.98	\$1,773.06	\$1,651.48

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	\$288.71	\$356.97	\$326.70	\$351.56
Retiree + Spouse/∅Domestic Partner	\$1,009.03	\$1,134.42	\$1,067.84	\$1,122.54	\$1,036.26
Retiree + Children	\$840.38	\$952.15	\$894.64	\$941.86	\$867.36
Retiree + Family	\$1,564.31	\$1,733.13	\$1,639.31	\$1,716.39	\$1,594.81

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	\$292.21	\$360.47	\$330.20	\$355.06
Retiree + Spouse/∅Domestic Partner	\$1,016.01	\$1,141.40	\$1,074.82	\$1,129.52	\$1,043.24
Retiree + Children	\$852.08	\$963.85	\$906.34	\$953.56	\$879.06
Retiree + Family	\$1,579.66	\$1,748.48	\$1,654.66	\$1,731.74	\$1,610.16

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	\$244.82	\$313.08	\$282.81	\$307.67
Retiree + Spouse/∅Domestic Partner	\$922.13	\$1,047.52	\$980.94	\$1,035.64	\$949.36
Retiree + Children	\$752.18	\$863.95	\$806.44	\$853.66	\$779.16
Retiree + Family	\$1,429.57	\$1,598.39	\$1,504.57	\$1,581.65	\$1,460.07

∅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.