2019 Classified Retiree Rates 81.82% District Contribution

Effective October 1, 2019 - September 30, 2020

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

	N N		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	\$296.21	\$364.47	\$334.20	\$359.06	\$319.85	
Retiree + Spouse/Oomestic Partner	\$1,031.07	\$1,156.46	\$1,089.88	\$1,144.58	\$1,058.30	
Retiree + Children	\$874.15	\$985.92	\$928.41	\$975.63	\$901.13	
Retiree + Family	\$1,613.70	\$1,782.52	\$1,688.70	\$1,765.78	\$1,644.20	

		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	\$281.43	\$349.69	\$319.42	\$344.28	\$305.07
Retiree + Spouse/ODomestic Partner	\$1,001.75	\$1,127.14	\$1,060.56	\$1,115.26	\$1,028.98
Retiree + Children	\$833.10	\$944.87	\$887.36	\$934.58	\$860.08
Retiree + Family	\$1,557.03	\$1,725.85	\$1,632.03	\$1,709.11	\$1,587.53

		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	\$284.93	\$353.19	\$322.92	\$347.78	\$308.57
Retiree + Spouse/Oomestic Partner	\$1,008.73	\$1,134.12	\$1,067.54	\$1,122.24	\$1,035.96
Retiree + Children	\$844.80	\$956.57	\$899.06	\$946.28	\$871.78
Retiree + Family	\$1,572.38	\$1,741.20	\$1,647.38	\$1,724.46	\$1,602.88

		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	\$237.54	\$305.80	\$275.53	\$300.39	\$261.18
Retiree + Spouse/Oomestic Partner	\$914.85	\$1,040.24	\$973.66	\$1,028.36	\$942.08
Retiree + Children	\$744.90	\$856.67	\$799.16	\$846.38	\$771.88
Retiree + Family	\$1,422.29	\$1,591.11	\$1,497.29	\$1,574.37	\$1,452.79

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.