## 2019 Classified Retiree Rates 83.72% 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	\$288.61	\$356.87	\$326.60	\$351.46	\$312.25
Retiree + Spouse/◊Domestic Partner	\$1,023.47	\$1,148.86	\$1,082.28	\$1,136.98	\$1,050.70
Retiree + Children	\$866.55	\$978.32	\$920.81	\$968.03	\$893.53
Retiree + Family	\$1,606.10	\$1,774.92	\$1,681.10	\$1,758.18	\$1,636.60

		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	\$273.83	\$342.09	\$311.82	\$336.68	\$297.47
Retiree + Spouse/ODomestic Partner	\$994.15	\$1,119.54	\$1,052.96	\$1,107.66	\$1,021.38
Retiree + Children	\$825.50	\$937.27	\$879.76	\$926.98	\$852.48
Retiree + Family	\$1,549.43	\$1,718.25	\$1,624.43	\$1,701.51	\$1,579.93

		Moda Medical Basic Rates		Moda Medical Select Rates	
Includes Medical, Rx, Vision, &	Kaiser Permanente	(currently enrolled in a Connexus PPO Plan)		enrolled in a Connexus PPO Plan) (currently enrolled in a Synergy CCN	
	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	\$277.33	\$345.59	\$315.32	\$340.18	\$300.97
Retiree + Spouse/◊Domestic Partner	\$1,001.13	\$1,126.52	\$1,059.94	\$1,114.64	\$1,028.36
Retiree + Children	\$837.20	\$948.97	\$891.46	\$938.68	\$864.18
Retiree + Family	\$1,564.78	\$1,733.60	\$1,639.78	\$1,716.86	\$1,595.28

		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	\$229.94	\$298.20	\$267.93	\$292.79	\$253.58
Retiree + Spouse/◊Domestic Partner	\$907.25	\$1,032.64	\$966.06	\$1,020.76	\$934.48
Retiree + Children	\$737.30	\$849.07	\$791.56	\$838.78	\$764.28
Retiree + Family	\$1,414.69	\$1,583.51	\$1,489.69	\$1,566.77	\$1,445.19

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.