2019 Classified Retiree Rates 85.71% 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	\$280.65	\$348.91	\$318.64	\$343.50	\$304.29
Retiree + Spouse/ODomestic Partner	\$1,015.51	\$1,140.90	\$1,074.32	\$1,129.02	\$1,042.74
Retiree + Children	\$858.59	\$970.36	\$912.85	\$960.07	\$885.57
Retiree + Family	\$1,598.14	\$1,766.96	\$1,673.14	\$1,750.22	\$1,628.64

		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	\$265.87	\$334.13	\$303.86	\$328.72	\$289.51
Retiree + Spouse/ODomestic Partner	\$986.19	\$1,111.58	\$1,045.00	\$1,099.70	\$1,013.42
Retiree + Children	\$817.54	\$929.31	\$871.80	\$919.02	\$844.52
Retiree + Family	\$1,541.47	\$1,710.29	\$1,616.47	\$1,693.55	\$1,571.97

		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	\$269.37	\$337.63	\$307.36	\$332.22	\$293.01
Retiree + Spouse/Oomestic Partner	\$993.17	\$1,118.56	\$1,051.98	\$1,106.68	\$1,020.40
Retiree + Children	\$829.24	\$941.01	\$883.50	\$930.72	\$856.22
Retiree + Family	\$1,556.82	\$1,725.64	\$1,631.82	\$1,708.90	\$1,587.32

		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	\$221.98	\$290.24	\$259.97	\$284.83	\$245.62
Retiree + Spouse/Oomestic Partner	\$899.29	\$1,024.68	\$958.10	\$1,012.80	\$926.52
Retiree + Children	\$729.34	\$841.11	\$783.60	\$830.82	\$756.32
Retiree + Family	\$1,406.73	\$1,575.55	\$1,481.73	\$1,558.81	\$1,437.23

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.