

2019 Classified Retiree Rates

Self Pay

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	\$623.49	\$691.75	\$661.48	\$686.34
Retiree + Spouse/∅Domestic Partner	\$1,358.35	\$1,483.74	\$1,417.16	\$1,471.86	\$1,385.58
Retiree + Children	\$1,201.43	\$1,313.20	\$1,255.69	\$1,302.91	\$1,228.41
Retiree + Family	\$1,940.98	\$2,109.80	\$2,015.98	\$2,093.06	\$1,971.48

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	\$608.71	\$676.97	\$646.70	\$671.56
Retiree + Spouse/∅Domestic Partner	\$1,329.03	\$1,454.42	\$1,387.84	\$1,442.54	\$1,356.26
Retiree + Children	\$1,160.38	\$1,272.15	\$1,214.64	\$1,261.86	\$1,187.36
Retiree + Family	\$1,884.31	\$2,053.13	\$1,959.31	\$2,036.39	\$1,914.81

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	\$612.21	\$680.47	\$650.20	\$675.06
Retiree + Spouse/∅Domestic Partner	\$1,336.01	\$1,461.40	\$1,394.82	\$1,449.52	\$1,363.24
Retiree + Children	\$1,172.08	\$1,283.85	\$1,226.34	\$1,273.56	\$1,199.06
Retiree + Family	\$1,899.66	\$2,068.48	\$1,974.66	\$2,051.74	\$1,930.16

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	\$564.82	\$633.08	\$602.81	\$627.67
Retiree + Spouse/∅Domestic Partner	\$1,242.13	\$1,367.52	\$1,300.94	\$1,355.64	\$1,269.36
Retiree + Children	\$1,072.18	\$1,183.95	\$1,126.44	\$1,173.66	\$1,099.16
Retiree + Family	\$1,749.57	\$1,918.39	\$1,824.57	\$1,901.65	\$1,780.07

∅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.**