2020 Classified Retiree Rates 53.73% District Contribution

Effective October 1, 2020 - September 30, 2021

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

Includes Medical, Rx, Vision, & Delta Dental Plan 5	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4
	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$412.25	\$490.98	\$459.99
Retiree + Spouse/◊Domestic Partner	\$1,127.49	\$1,299.96	\$1,231.79
Retiree + Children	\$975.44	\$1,125.12	\$1,066.24
Retiree + Family	\$1,695.37	\$1,938.71	\$1,842.63

Includes Medical, Rx, Vision, &	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4
Delta Dental Plan 6 *No Orthodontia*	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$397.49	\$476.22	\$445.23
Retiree + Spouse/◊Domestic Partner	\$1,098.20	\$1,270.67	\$1,202.50
Retiree + Children	\$934.45	\$1,084.13	\$1,025.25
Retiree + Family	\$1,638.80	\$1,882.14	\$1,786.06

Includes Medical, Rx, Vision, &	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4
Willamette Dental	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$402.67	\$481.40	\$450.41
Retiree + Spouse/◊Domestic Partner	\$1,108.53	\$1,281.00	\$1,212.83
Retiree + Children	\$949.69	\$1,099.37	\$1,040.49
Retiree + Family	\$1,659.46	\$1,902.80	\$1,806.72

Includes Medical, Rx, Vision, &	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2	Moda Plan 3	Moda Plan 4
*NO Dental	\$800 deductible	\$1200/\$1300 deductible	\$1600/\$1700 deductible
Retiree Only	\$353.67	\$432.40	\$401.41
Retiree + Spouse/◊Domestic Partner	\$1,011.45	\$1,183.92	\$1,115.75
Retiree + Children	\$846.39	\$996.07	\$937.19
Retiree + Family	\$1,504.27	\$1,747.61	\$1,651.53

OMembers 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.