2020 Classified Retiree Rates Self Pay

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	\$627.17	\$705.90	\$674.91
Retiree + Spouse/◊Domestic Partner	\$1,342.41	\$1,514.88	\$1,446.71
Retiree + Children	\$1,190.36	\$1,340.04	\$1,281.16
Retiree + Family	\$1,910.29	\$2,153.63	\$2,057.55

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	\$612.41	\$691.14	\$660.15
Retiree + Spouse/◊Domestic Partner	\$1,313.12	\$1,485.59	\$1,417.42
Retiree + Children	\$1,149.37	\$1,299.05	\$1,240.17
Retiree + Family	\$1,853.72	\$2,097.06	\$2,000.98

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	\$617.59	\$696.32	\$665.33
Retiree + Spouse/ODomestic Partner	\$1,323.45	\$1,495.92	\$1,427.75
Retiree + Children	\$1,164.61	\$1,314.29	\$1,255.41
Retiree + Family	\$1,874.38	\$2,117.72	\$2,021.64

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	\$568.59	\$647.32	\$616.33
Retiree + Spouse/◊Domestic Partner	\$1,226.37	\$1,398.84	\$1,330.67
Retiree + Children	\$1,061.31	\$1,210.99	\$1,152.11
Retiree + Family	\$1,719.19	\$1,962.53	\$1,866.45

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.