

## 2021 Classified Retiree Rates

### 52.94% District Contribution

Effective October 1, 2021 - September 30, 2022

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 2A \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
	Retiree Only	\$408.45	\$503.76
Retiree + Spouse/◇Domestic Partner	\$1,115.68	\$1,324.63	\$1,255.04
Retiree + Children	\$965.39	\$1,146.56	\$1,086.45
Retiree + Family	\$1,677.26	\$1,971.97	\$1,873.91

Includes Medical, Rx, Vision, & Delta Dental Plan 6 *No Orthodontia*	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2A \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
	Retiree Only	\$393.84	\$489.15
Retiree + Spouse/◇Domestic Partner	\$1,086.65	\$1,295.60	\$1,226.01
Retiree + Children	\$924.78	\$1,105.95	\$1,045.84
Retiree + Family	\$1,621.20	\$1,915.91	\$1,817.85

Includes Medical, Rx, Vision, & Willamette Dental	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2A \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
	Retiree Only	\$397.01	\$492.32
Retiree + Spouse/◇Domestic Partner	\$1,093.89	\$1,302.84	\$1,233.25
Retiree + Children	\$936.79	\$1,117.96	\$1,057.85
Retiree + Family	\$1,636.81	\$1,931.52	\$1,833.46

Includes Medical, Rx, Vision, & *NO Dental	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2A \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
	Retiree Only	\$350.41	\$445.72
Retiree + Spouse/◇Domestic Partner	\$1,000.69	\$1,209.64	\$1,140.05
Retiree + Children	\$837.52	\$1,018.69	\$958.58
Retiree + Family	\$1,487.90	\$1,782.61	\$1,684.55

◇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.**