

2021 Classified Retiree Rates

100% 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	\$220.21	\$315.52	\$283.89
Retiree + Spouse/◇Domestic Partner	\$927.44	\$1,136.39	\$1,066.80
Retiree + Children	\$777.15	\$958.32	\$898.21
Retiree + Family	\$1,489.02	\$1,783.73	\$1,685.67

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	\$205.60	\$300.91	\$269.28
Retiree + Spouse/◇Domestic Partner	\$898.41	\$1,107.36	\$1,037.77
Retiree + Children	\$736.54	\$917.71	\$857.60
Retiree + Family	\$1,432.96	\$1,727.67	\$1,629.61

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	\$208.77	\$304.08	\$272.45
Retiree + Spouse/◇Domestic Partner	\$905.65	\$1,114.60	\$1,045.01
Retiree + Children	\$748.55	\$929.72	\$869.61
Retiree + Family	\$1,448.57	\$1,743.28	\$1,645.22

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	\$162.17	\$257.48	\$225.85
Retiree + Spouse/◇Domestic Partner	\$812.45	\$1,021.40	\$951.81
Retiree + Children	\$649.28	\$830.45	\$770.34
Retiree + Family	\$1,299.66	\$1,594.37	\$1,496.31

◇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.**