

## 2018 Classified Rates

### 7.00-8.00 Hours/Day - 12-Check Employees

Effective October 1, 2018 - September 30, 2019

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

7.00 - 8.00 Hours/Day	Delta Dental Plan 5	Kaiser Permanente	Moda - Connexus PPO		Moda - Synergy CCM	
		Kaiser Permanente HMO Plan 2	Connexus PPO Cedar	Connexus PPO Dogwood	Synergy CCM Cedar	Synergy CCM Dogwood
	Includes Medical, Rx, Vision, & Delta Dental Plan 5	\$800 deductible	\$1,200 deductible	\$1,600 deductible	\$1,200 deductible	\$1,600 deductible
	Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Employee + Spouse/∅Domestic Partner	\$64.34	\$151.29	\$76.76	\$105.59	\$58.58
	Employee + Children	\$58.48	\$99.95	\$64.08	\$60.49	\$58.48
	Employee + Family	\$212.07	\$418.90	\$228.39	\$354.52	\$202.77

7.00 - 8.00 Hours/Day	Delta Dental Plan 6	Kaiser Permanente	Moda - Connexus PPO		Moda - Synergy CCM	
		Kaiser Permanente HMO Plan 2	Connexus PPO Cedar	Connexus PPO Dogwood	Synergy CCM Cedar	Synergy CCM Dogwood
	Includes Medical, Rx, Vision, & Delta Dental Plan 6	\$800 deductible	\$1,200 deductible	\$1,600 deductible	\$1,200 deductible	\$1,600 deductible
	Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Employee + Spouse/∅Domestic Partner	\$35.19	\$122.14	\$47.61	\$76.44	\$29.43
	Employee + Children	\$17.68	\$59.15	\$23.28	\$19.69	\$17.68
	Employee + Family	\$155.75	\$362.58	\$172.07	\$298.20	\$146.45

7.00 - 8.00 Hours/Day	Willamette Dental	Kaiser Permanente	Moda - Connexus PPO		Moda - Synergy CCM	
		Kaiser Permanente HMO Plan 2	Connexus PPO Cedar	Connexus PPO Dogwood	Synergy CCM Cedar	Synergy CCM Dogwood
	Includes Medical, Rx, Vision, & Willamette Dental	\$800 deductible	\$1,200 deductible	\$1,600 deductible	\$1,200 deductible	\$1,600 deductible
	Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Employee + Spouse/∅Domestic Partner	\$39.02	\$125.97	\$51.44	\$80.27	\$33.26
	Employee + Children	\$25.98	\$67.45	\$31.58	\$27.99	\$25.98
	Employee + Family	\$166.01	\$372.84	\$182.33	\$308.46	\$156.71

7.00 - 8.00 Hours/Day	*Waive Dental	Kaiser Permanente	Moda - Connexus PPO		Moda - Synergy CCM	
		Kaiser Permanente HMO Plan 2	Connexus PPO Cedar	Connexus PPO Dogwood	Synergy CCM Cedar	Synergy CCM Dogwood
	Includes Medical, Rx & Vision	\$800 deductible	\$1,200 deductible	\$1,600 deductible	\$1,200 deductible	\$1,600 deductible
	Employee Only	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Employee + Spouse/∅Domestic Partner	\$18.81	\$105.76	\$31.23	\$60.06	\$13.05
	Employee + Children	\$0.00	\$41.47	\$5.60	\$2.01	\$0.00
	Employee + Family	\$91.81	\$298.64	\$108.13	\$234.26	\$82.51

\*You have the option to waive dental coverage and thereby reduce your out-of-pocket insurance cost. You may only waive dental coverage during annual enrollment or upon initial eligibility. You will not be able to re-enroll in dental coverage for the remainder of the year unless you lose eligibility for other group dental coverage and provide proof of the loss within 31 days.

∅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.

**Members and their qualified dependents who do not enroll in a dental plan when initially eligible and elect to enroll during a future open enrollment will be subject to "waiting period" restrictions - meaning, for the first 12 months, the dental coverage will only allow preventative services and no orthodontia. The 12-month waiting period does not apply for members who enroll in OEBC dental coverage due to loss of other OEBC coverage.**