

2020 Classified Retiree Rates

81.82% 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 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$299.89	\$378.62	\$347.63
Retiree + Spouse/∅Domestic Partner	\$1,015.13	\$1,187.60	\$1,119.43
Retiree + Children	\$863.08	\$1,012.76	\$953.88
Retiree + Family	\$1,583.01	\$1,826.35	\$1,730.27

Includes Medical, Rx, Vision, & Delta Dental Plan 6 *No Orthodontia*	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$285.13	\$363.86	\$332.87
Retiree + Spouse/∅Domestic Partner	\$985.84	\$1,158.31	\$1,090.14
Retiree + Children	\$822.09	\$971.77	\$912.89
Retiree + Family	\$1,526.44	\$1,769.78	\$1,673.70

Includes Medical, Rx, Vision, & Willamette Dental	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$290.31	\$369.04	\$338.05
Retiree + Spouse/∅Domestic Partner	\$996.17	\$1,168.64	\$1,100.47
Retiree + Children	\$837.33	\$987.01	\$928.13
Retiree + Family	\$1,547.10	\$1,790.44	\$1,694.36

Includes Medical, Rx, Vision, & *NO Dental	Kaiser Permanente	Moda Medical	
	Kaiser Permanente HMO Plan 2 \$800 deductible	Moda Plan 3 \$1200/\$1300 deductible	Moda Plan 4 \$1600/\$1700 deductible
Retiree Only	\$241.31	\$320.04	\$289.05
Retiree + Spouse/∅Domestic Partner	\$899.09	\$1,071.56	\$1,003.39
Retiree + Children	\$734.03	\$883.71	\$824.83
Retiree + Family	\$1,391.91	\$1,635.25	\$1,539.17

∅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.**