

## 2021 Classified Retiree Rates

### 49.32% 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	\$422.93	\$518.24
Retiree + Spouse/◇Domestic Partner	\$1,130.16	\$1,339.11	\$1,269.52
Retiree + Children	\$979.87	\$1,161.04	\$1,100.93
Retiree + Family	\$1,691.74	\$1,986.45	\$1,888.39

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	\$408.32	\$503.63
Retiree + Spouse/◇Domestic Partner	\$1,101.13	\$1,310.08	\$1,240.49
Retiree + Children	\$939.26	\$1,120.43	\$1,060.32
Retiree + Family	\$1,635.68	\$1,930.39	\$1,832.33

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	\$411.49	\$506.80
Retiree + Spouse/◇Domestic Partner	\$1,108.37	\$1,317.32	\$1,247.73
Retiree + Children	\$951.27	\$1,132.44	\$1,072.33
Retiree + Family	\$1,651.29	\$1,946.00	\$1,847.94

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	\$364.89	\$460.20
Retiree + Spouse/◇Domestic Partner	\$1,015.17	\$1,224.12	\$1,154.53
Retiree + Children	\$852.00	\$1,033.17	\$973.06
Retiree + Family	\$1,502.38	\$1,797.09	\$1,699.03

◇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.**