

2024-25 Self-Pay Early Retiree (SPER) Monthly Insurance Rates

10/01/2024 through 09/30/2025

PLAN OPTIONS	Retiree Only	Retiree & Spouse/ Domestic Partner	Retiree and Children	Retiree and Family
MEDICAL				
Moda Medical Plan 1	\$793.33	\$1,745.32	\$1,507.36	\$2,459.39
Moda Medical Plan 2	\$735.94	\$1,619.06	\$1,398.31	\$2,281.45
Moda Medical Plan 3	\$690.43	\$1,518.96	\$1,311.87	\$2,140.41
Moda Medical Plan 4	\$651.94	\$1,434.27	\$1,238.70	\$2,021.05
Moda Medical Plan 5	\$602.23	\$1,324.91	\$1,144.26	\$1,866.96
Moda Medical Plan 6	\$614.29	\$1,351.45	\$1,167.19	\$1,904.35
Moda Medical Plan 7	\$573.32	\$1,261.30	\$1,089.34	\$1,777.33
Kaiser Medical Plan 1	\$721.66	\$1,587.65	\$1,371.16	\$2,237.15
Kaiser Medical Plan 2A	\$595.37	\$1,310.65	\$1,131.15	\$1,846.54
Kaiser Medical Plan 2B	\$576.47	\$1,269.05	\$1,095.24	\$1,787.92
Kaiser Medical Plan 3 (HSA eligible)	\$439.75	\$968.02	\$835.18	\$1,363.49
DENTAL				
Moda Delta Dental Plan 1	\$67.54	\$133.80	\$148.78	\$220.33
Moda Delta Dental Plan 5	\$59.66	\$118.17	\$131.41	\$194.60
Moda Delta Dental Plan 6 (no ortho)	\$45.54	\$90.16	\$91.51	\$139.81
Moda Exclusive PPO INCENTIVE Delta dental	\$58.55	\$115.98	\$128.97	\$190.99
Moda Exclusive PPO Delta dental	\$39.46	\$78.15	\$86.91	\$128.72
Kaiser Dental	\$73.48	\$161.68	\$139.63	\$227.81
Willamette Dental	\$46.99	\$93.99	\$100.11	\$150.18
VISION				
Moda Vision Opal	\$21.83	\$47.99	\$41.40	\$67.60
Moda Vision Pearl	\$17.81	\$39.24	\$33.87	\$55.26
Moda Vision Quartz	\$12.58	\$27.71	\$23.91	\$38.99
VSP Choice Plus Plan	\$14.15	\$31.14	\$26.90	\$43.87
VSP Choice Plan	\$6.89	\$15.14	\$13.08	\$21.33
Kaiser Vision (Only avail. with Kaiser Med)	\$8.49	\$18.67	\$16.12	\$26.31

NOTE:

1. Self-Pay Early Retirees are eligible to continue medical, dental, vision and optional life (if enrolled in these prior to retirement).