



**Non-Represented & SEIU Retiree
Monthly Costs for 10/1/21 to 9/30/22**



**2021 -
2022**

Health Savings Account (HSA)*

Moda Plan 6 and Kaiser Plan 3 are HSA compatible. You may be eligible, but not required, to open an HSA to take advantage of the tax savings. You can open an HSA at an institution of your choice. There are restrictions to an HSA. For more information, please visit :IRS.gov and search for PUB 969.

Licensed Administrator Retirees - District Subsidized Rates

| Medical and Vision | Dental (Note: Delta Dental=Moda/ODS) | Retiree Only | Spouse Only | Retiree+ Child(ren) | Retiree+ Spouse | Family |
|---|---|---------------------|--------------------|----------------------------|------------------------|---------------|
| Moda Medical Plan 6 & VSP Vision *HSA compatible | Delta Dental Plan 6 No Ortho | 65 | 341 | 625 | 438 | 1,045 |
| | Delta Dental Plan 5 w/ Ortho | 80 | 356 | 666 | 505 | 1,101 |
| | Kaiser Dental Plan 8 w/ Ortho | 95 | 371 | 677 | 551 | 1,138 |
| Moda Medical Plan 2 & VSP Vision | Delta Dental Plan 6 No Ortho | 60 | 390 | 712 | 554 | 1,219 |
| | Delta Dental Plan 5 w/ Ortho | 75 | 405 | 753 | 584 | 1,275 |
| | Kaiser Dental Plan 8 w/ Ortho | 90 | 420 | 764 | 630 | 1,312 |
| Moda Medical Plan 1 & VSP Vision | Delta Dental Plan 6 No Ortho | 85 | 427 | 782 | 614 | 1,338 |
| | Delta Dental Plan 5 w/ Ortho | 100 | 442 | 823 | 643 | 1,394 |
| | Kaiser Dental Plan 8 w/ Ortho | 115 | 457 | 834 | 689 | 1,431 |
| Kaiser Medical Plan 3 & VSP Vision *HSA compatible | Delta Dental Plan 6 No Ortho | 10 | 316 | 542 | 331 | 827 |
| | Delta Dental Plan 5 w/ Ortho | 25 | 331 | 583 | 361 | 884 |
| | Kaiser Dental Plan 8 w/ Ortho | 40 | 346 | 594 | 406 | 921 |
| Kaiser Medical Plan 1 & VSP Vision | Delta Dental Plan 6 No Ortho | 55 | 375 | 685 | 522 | 1,164 |
| | Delta Dental Plan 5 w/ Ortho | 70 | 390 | 726 | 551 | 1,220 |
| | Kaiser Dental Plan 8 w/ Ortho | 85 | 405 | 737 | 597 | 1,257 |

Non-Represented & SEIU Self-Pay Retiree Rates

OEBB Self-Pay Rates can be located on the OEBB website:

<https://www.oregon.gov/oha/OEBB/Plans/COBRA-Medical-Rx-Dental-and-Vision-Rates-2021-22.pdf>

For Self-Pay questions contact OEBB Member Services 1-888-469-6322 or e-mail OEBB.Benefits@state.or.us