



**Non-Represented Retirees
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.

Non-Represented Retirees - District Paid (formerly Full-Time Employees*)

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 Self-Pay Rates

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

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

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