

PEBB-Eligible Retiree Benefit Information

2010 Retiree Medical Plan Monthly Premium Rates					
	Retiree	Retiree & Spouse/ Partner	Retiree & Children	Retiree & Family	Child(ren) Only ⁵
StatewidePlan ¹	\$895.70	\$1,200.11	\$1,029.99	\$1,226.98	\$461.30
Kaiser Permanente ²	838.48	1,123.56	964.27	1,148.72	427.61
Providence Choice ¹	774.73	1,038.11	890.94	1,061.36	403.81
Statewide Plan Retiree ³	713.21	955.62	820.15	977.04	367.15
Kaiser Permanente Retiree ⁴	709.82	951.16	816.28	972.45	362.00
Providence Choice Retiree ³	613.45	822.01	705.47	840.42	312.85

¹ Routine vision services through VSP.

² Kaiser Permanente routine vision services.

³ No vision benefit.

⁴ Vision exam only.

⁵ Child(ren) Only coverage is available only to COBRA & Retiree participants.

2010 Retiree Dental Plan Monthly Premium Rates					
	Retiree	Retiree & Spouse/ Partner	Retiree & Children	Retiree & Family	Child(ren) Only ¹
Kaiser Permanente	\$72.64	\$97.33	\$83.54	\$99.52	\$37.77
ODS Preferred	71.61	95.96	82.35	98.11	37.24
ODS Traditional	77.52	103.89	89.15	106.21	40.31
Willamette Dental Group	75.53	101.21	86.86	103.47	39.28
Kaiser Permanente Retiree	54.15	72.55	62.27	74.18	28.16
ODS Retiree	55.78	74.75	64.16	76.43	29.01

¹ Child(ren) Only coverage is available only to COBRA & Retiree participants.

RESOURCES

BenefitHelp Solutions (administrator)

BHS Web: benefithelp.com/pebb/pebb

Questions? bhs_pebb@benefithelp.com

(503) 219-3679, (888)398-8057, fax (888)249-5058

PEBB

PEBB's Web: oregon.gov/das/pebb

Dental Plans

Kaiser Permanente my.kp.org/nw/pebb

ODS odscompanies.com/pebb

Willamette Dental willamettedental.com

Medical Plans

PEBB's Statewide Plan:

providence.org/healthplans/pebb

Kaiser Permanente my.kp.org/nw/pebb

Providence Choice

providence.org/healthplans/pebb/choice.aspx

VSP (Vision Service Plan) vsp.com

Optional Plans

Standard Insurance standard.com

UnumProvident unumprovident.com/enroll/pebb

ASIFlex (FSAs) orpebb.asiflex.com