PUBLIC EMPLOYEES' PEBB BENEFIT BOARD

2016 Retiree Health Care Coverage Rates

Oregon Health Authority

2016 Retiree Medical Plan Monthly Premium Rates					
	Retiree	Retiree & Spouse/Partner	Retiree & Children	Retiree & Family	Child(ren) Only
AllCare PEBB	$916.86	$1,228.54	$1,054.39	$1,256.08	$467.59
Kaiser	1,104.28	1,479.72	1,269.93	1,512.85	563.15
Kaiser Deductible	1,015.31	1,360.50	1,167.62	1,390.99	517.78
ModaSummit, Synergy	982.07	1,315.98	1,129.39	1,345.45	500.85
PEBB Statewide	1,095.32	1,467.59	1,259.54	1,500.43	553.36
Providence Choice	948.98	1,271.61	1,091.32	1,300.07	483.97
AllCare PEBB Part-Time	733.98	983.49	844.10	1,005.53	374.33
Kaiser Part-time	934.82	1,252.66	1,075.05	1,280.70	476.74
Kaiser Deductible Part-Time	882.93	1,183.11	1,015.37	1,209.59	450.28
Moda Summit, Synergy Part-Time	795.78	1,066.35	915.16	1,090.22	405.85
PEBB Statewide Part-Time	889.79	1,192.20	1,023.22	1,218.93	458.06
Providence Choice Part-Time	769.04	1,030.48	884.41	1,053.55	392.20

2016 Retiree Dental Plan Premium Rates					
	Retiree	Retiree & Spouse/ Partner	Retiree & Children	Retiree & Family	Child(ren) Only[7]
Kaiser Permanente	$92.08	$123.39	$105.90	$126.15	$47.88
ODS (Moda) Premiere	85.70	114.87	98.59	117.44	44.57
ODS (Moda) PPO	79.18	106.10	91.04	108.49	41.19
Willamette Dental Group	75.48	101.14	86.79	103.40	39.25
ODS (Moda) Part-time	61.68	82.65	70.94	84.50	32.08
Kaiser Permanente Part-Time	68.60	91.91	78.87	93.99	35.67

2016 Retiree Optional Vision Plan Monthly Premium Rates					
VSP	$14.12	$18.89	$16.23	$19.35	$14.12