

2025 Retiree Dental and Vision Rates

Tier	SAIF Dental Premium Rates	Retiree Dental + Vision Base Rates	Retiree Dental + Vision Buy- Up Rates
Delta Dental			
Retiree only	\$55.73	\$62.96	\$69.08
Retiree + spouse or domestic partner	\$110.29	\$123.71	\$135.98
Retiree + child(ren)	\$114.76	\$129.01	\$142.18
Retiree + family (includes spouse or domestic partner)	\$174.92	\$197.12	\$218.13
Kaiser DHMO Dental			
Retiree only	\$106.65	\$113.88	\$120.00
Retiree + spouse or domestic partner	\$211.12	\$224.54	\$236.81
Retiree + child(ren)	\$219.69	\$233.94	\$247.11
Retiree + family (includes spouse or domestic partner)	\$334.83	\$357.03	\$378.04
Kaiser PPO Dental			
Retiree only	\$53.66	\$60.89	\$67.01
Retiree + spouse or domestic partner	\$107.32	\$120.74	\$133.01
Retiree + child(ren)	\$96.64	\$110.89	\$124.06
Retiree + family (includes spouse or domestic partner)	\$160.98	\$183.18	\$204.19
Willamette Dental			
Retiree only	\$46.20	\$53.43	\$59.55
Retiree + spouse or domestic partner	\$91.45	\$104.87	\$117.14
Retiree + child(ren)	\$95.10	\$109.35	\$122.52
Retiree + family (includes spouse or domestic partner)	\$145.00	\$167.20	\$188.21
VSP Vision Base	SAIF VSP Premium Rates	Retiree VSP Premium Rates	
Retiree only	\$7.23	\$7.23	
Retiree + spouse or domestic partner	\$13.42	\$13.42	
Retiree + child(ren)	\$14.25	\$14.25	
Retiree + family (includes spouse or domestic partner)	\$22.20	\$22.20	
This is for information only. The vision monthly premium rates are included in the rates above.			
VSP Vision Buy-Up	SAIF VSP Premium Rates	Retiree VSP Premium Rates	
Retiree only	\$13.35	\$13.35	
Retiree + spouse or domestic partner	\$25.69	\$25.69	
Retiree + child(ren)	\$27.42	\$27.42	
Retiree + family (includes spouse or domestic partner)	\$43.21	\$43.21	

Note: Dental and vision benefits are not unbundled. When dental is selected, the COBRA participant and their enrolled dependents will be automatically enrolled in the Vision Service Plan (VSP).