



**Retirees  
Medical & Dental Insurance Rates  
July 1, 2024 - June 30, 2025**

**Medical**  

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Monthly Premium

**City of Gresham Core Plan**

One Person	939.80
One +1 Dep.	1,967.82
One +2 Dep.	2,641.68

**Kaiser HMO Plan**

One Person	833.80
One +1 Dep.	1,713.32
One +2 Dep.	2,321.64

**Dental**  

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Monthly Premium

**City of Gresham Base Dental Plan (Moda)**

One Person	61.94
One +1 Dep.	127.88
One +2 Dep.	211.12

**Kaiser DMO Plan**

One Person	75.24
One +1 Dep.	146.72
One +2 Dep.	248.34

**Willamette Dental Group**

One Person	66.64
One +1 Dep.	113.50
One +2 Dep.	220.10