



**Retirees  
Medical & Dental Insurance  
Rates July 1, 2025 - June 30, 2026**

**Medical**  

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Monthly Premium

**City of Gresham Core Plan**

One Person	995.48
One +1 Dep.	2,085.18
One +2 Dep.	2,799.48

**Kaiser HMO Plan**

One Person	883.04
One +1 Dep.	1,815.20
One +2 Dep.	2,459.98

**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	76.60
One +1 Dep.	130.40
One +2 Dep.	252.90