



## HARRISON TRUST

A FAMILY HEALTH PLAN

WWW.HARRISONBENEFITS.ORG

### 2025 Medicare Plan Rate Comparison

Harrison Trust

January 1, 2025 through December 31, 2025

MEDICAL/RX PLAN	PARTICIPANT PAYMENT PER PERSON (\$135 Subsidy)	PARTICIPANT PAYMENT PER PERSON (Full Pay)
Kaiser Sr. Advantage	\$232.23	\$367.23
PacificSource Essentials Rx 14	\$0	\$106
Providence Align	\$296.38	\$431.38
Providence Discover HMO + Rx	\$128.66	\$263.66
Regence Bridge Plan F – Oregon (closed to new enrollment)	TBD	TBD
Regence Bridge Plan G – Oregon	TBD	TBD
Regence Bridge Plan F – Clark County (closed to new enrollment)	TBD	TBD
Regence Bridge Plan G – Clark County	TBD	TBD

<b>Regence Companion Plan F – Oregon</b> (closed to new enrollment)	TBD	TBD
<b>Regence Companion Plan F – Washington</b> (closed to new enrollment)	TBD	TBD
<b>Regence MedAdvantage – Classic</b>	\$37	\$172
<b>Regence MedAdvantage – Enhanced</b>	\$127	\$262
<b>UnitedHealthcare – Oregon</b>	\$474.66	\$609.66
<b>UnitedHealthcare – Washington</b>	\$461.49	\$596.49

DENTAL PLAN	PARTICIPANT PAYMENT (Per Person)
<b>Kaiser Dental</b>	\$43.40
<b>Willamette Dental</b>	\$41.00

**Please note:** You must be enrolled in a Harrison Trust Medicare Plan in order to enroll in the Harrison Trust Kaiser Dental Plan or Willamette Dental Plan. You do not need to be enrolled in Kaiser Medical in order to enroll in Kaiser Dental.