

Plan Year 2021-2022

Licensed COBRA

Health Insurance

Pacific Source Pathfinder Voyager 100 + Vision	
Employee Only	\$1,043.67
Employee and Spouse	\$2,191.95
Employee and Child(ren)	\$1,982.99
Employee and Family	\$2,922.29

Pacific Source Pathfinder 200 - NO LONGER OFFERED	
Employee Only	\$0.00
Employee and Spouse	\$0.00
Employee and Child(ren)	\$0.00
Employee and Family	\$0.00

Pacific Source Pathfinder 300 + Vision	
Employee Only	\$952.32
Employee and Spouse	\$2,000.12
Employee and Child(ren)	\$1,809.44
Employee and Family	\$2,666.52

Pacific Source Pathfinder 1600 HDHP + Vision	
Employee Only	\$603.83
Employee and Spouse	\$1,268.24
Employee and Child(ren)	\$1,147.26
Employee and Family	\$1,690.71

Kaiser EPO (HMO) + Vision	
Employee Only	\$666.52
Employee and Spouse	\$1,333.04
Employee and Child(ren)	\$1,199.73
Employee and Family	\$1,999.55

Dental Insurance

Ameritas Dental	
Employee Only	\$65.89
Employee + 1	\$128.28
Employee + 2 or more	\$202.45

Willamette Dental	
Employee Only	\$60.84
Employee + 1	\$121.58
Employee + 2 or more	\$182.38

Vision Only Insurance

Ameritas Vision	
Employee Only	\$7.14
Employee + Spouse	\$13.42
Employee + 2 or more	\$18.28

***Vision insurance is included in all Medical plans**

Professional Benefit Services is COBRA/Retiree Administration for West Linn Wilsonville School District

If you have any questions, please contact: Professional Benefit Services

1193 Royvonne Ave SE #22, Salem, OR 97302

Phone: (503) - 371 -7622

Fax: (503) - 364 - 6901

Email: info@profben.com