

Plan Year 2021-2022

Licensed Retiree

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 | \$998.80 |
| Employee and Spouse | \$1,997.61 |
| Employee and Child(ren) | \$1,797.84 |
| Employee and Family | \$2,996.41 |

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

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