Plan Year 2022-2023

Licensed Retiree

Health Insurance

Pacific Source Navigator Voyager 1	100 + Vision
Self Only	\$1,181.29
Self and Spouse	\$2,480.98
Self and Child(ren)	\$2,244.47
Self and Family	\$3,307.62
Pacific Source Navigator 300 + Vision	
Self Only	\$1,077.90
Self and Spouse	\$2,263.85
Self and Child(ren)	\$2,048.03
Self and Family	\$3,018.13
Pacific Source Navigator 1600 HDF	IP + Vision
Self Only	\$683.45
Self and Spouse	\$1,435.47
Self and Child(ren)	\$1,298.53
Self and Family	\$1,913.64
Kaiser EPO (HMO) + Vision	
~	\$978.22
Self Only	\$978.22
Self Only Self and Spouse	\$978.22 \$1,956.44
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Self and Spouse	\$1,956.44

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Dental Insurance

Ameritas Dental	
Self Only	\$65.89
Self + 1	\$128.28
Self $+ 2$ or more	\$202.45
Willamette Dental	
Self Only	\$60.84
Self Only Self + 1	\$60.84 \$121.58
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Vision Only Insurance

\$7.14
\$13.42
\$18.28

*Vision insurance is included in all Medical plan:

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