

Plan Year 2024-2025

Classified COBRA

Health Insurance

Pacific Source Navigator 100	
Self Only	\$1,095.39
Self and Spouse	\$2,300.33
Self and Child(ren)	\$2,081.22
Self and Family	\$3,067.07
Pacific Source Navigator 1600	
Self Only	\$789.59
Self and Spouse	\$1,658.19
Self and Child(ren)	\$1,500.25
Self and Family	\$2,210.90
Pacific Source Navigator Voyager 100	
Self Only	\$750.06
Self and Spouse	\$1,575.12
Self and Child(ren)	\$1,425.08
Self and Family	\$2,100.12
Pacific Source Navigator 1600 HDHP	
Self Only	\$679.19
Self and Spouse	\$1,426.30
Self and Child(ren)	\$1,290.43
Self and Family	\$1,901.71
Kaiser EPO (HMO) + Vision	
Self Only	\$692.21
Self and Spouse	\$1,384.42
Self and Child(ren)	\$1,245.98
Self and Family	\$2,076.63

Dental Insurance

Ameritas Dental	
Self Only	\$60.71
Self + 1	\$117.99
Self + 2 or more	\$186.90
Willamette Dental	
Self Only	\$60.84
Self + 1	\$121.58
Self + 2 or more	\$182.38
Kaiser Dental	
Self Only	\$89.63
Self + 1	\$179.24
Self + 2 or more	\$250.93

Vision Insurance

Ameritas Vision	
Self Only	\$7.02
Self + Spouse	\$13.34
Self + Child	\$14.04
Full Family	\$20.60

*Vision Insurance is included in Kaiser 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

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