

2021 City of Springfield Insurance Rates

COBRA Plan

| Monthly Medical, Wellness Center & Vision Insurance: | | | |
|---|---------------|-------------|----------------|
| | Single | Two | Three + |
| <i>PacificSource Health</i> | \$ 607.29 | \$ 1,335.16 | \$ 1,819.84 |
| <i>Rates include 2% administrative fee</i> | | | |

| Monthly Dental Insurance: | | | |
|--|---------------|------------|----------------|
| | Single | Two | Three + |
| <i>MODA/Delta Dental</i> | \$ 66.30 | \$ 106.14 | \$ 175.05 |
| <i>MODA/Delta Dental Plus</i> | \$ 79.70 | \$ 127.58 | \$ 210.43 |
| <i>Willamette Dental</i> | \$ 60.34 | \$ 99.25 | \$ 163.98 |
| <i>Rates include 2% administrative fee</i> | | | |

| Monthly City of Springfield Wellness Center: | | | |
|---|---------------|------------|----------------|
| | Single | Two | Three + |
| <i>Cascade Health</i> | \$ 37.28 | \$ 74.57 | \$ 111.85 |
| <i>Rates include 2% administrative fee</i> | | | |