

MONTHLY RATE SHEET EFFECTIVE SEPTEMBER 1, 2025

PPO - COBRA RATES

CLERICAL/SECRETARIAL	RETIRED CLERICAL/SECRETARIAL
CUSTODIAN/MAINTENANCE	RETIRED CUSTODIAN/MAINTENANCE
INSTRUCTIONAL ASSISTANTS	RETIRED INSTRUCTIONAL ASSISTANTS

Rates	Plan	Single		Two Party		Family	
View plans and select	Medical W/Vision	\$	895.19	\$	1,790.38	\$	2,058.94
preferences through NavigateHCR's secure portal,	Prescription	\$	253.30	\$	470.60	\$	541.19
Compass	Dental	\$	37.10	\$	75.56	\$	119.20
1	Totals	\$	1,185.59	\$	2,336.54	\$	2,719.33

SEPA-Clerks/Sec, SEPR-Clerks/Sec, Retired, CUPA-Custodian/Maintenance, CUPR-Retired, TAPA-Instructional Assistants, TAPR-Retired

Please note that the Federal 2% COBRA administration fee is NOT loaded in the above rates. When you enroll on Compass, you will see the Federal 2% fee referred to as a Service Fee. Please reach out to the NavigateHCR Care Team with any questions.

Participants may select enrollment in any or all plan types.

Enrollment & Payment Instructions

Effective July 1, 2023, NavigateHCR is Bethlehem Area School District's third-party administrator of COBRA continuation of coverage administration. To initiate coverage please complete the Bethlehem Area School District's Benefits Enrollment Form and return it to the Benefits Office at least 30 days prior to coverage beginning. Enrollment information will be provided to NavigateHCR and uploaded into the Compass secure portal. NavigateHCR will contact enrollees once all information is entered in the portal.

Completed Benefits Enrollment Forms and questions related to the form, should be directed to the Benefits Office. The telephone number is (610) 861-0500, extension 60210, the address is:

Bethlehem Area School District Benefits Office 1516 Sycamore Street Bethlehem, Pennsylvania 18017-6099

basdbenefits@basdschools.org

For COBRA related information please visit the BASD Benefits Website

basd.mybenefitsinfo.com

The rates illustrated above are for COBRA participants and eligible retirees. All COBRA payments will be processed by NavigateHCR. In order to maintain current coverage or acquire new coverage, payments must be remitted monthly and are due by the 25th of each month. Please contact NavigateHCR for account access and to establish payment preferences within the Compass portal:

NavigateHCR Contact Information: Phone: 855-742-7427 Opt. 2 Fax: 858-400-4492 Email: CareTeam@NavigateHCR.com Address: 16885 Via Del Campo Court San Diego, CA 92127

Please note, rates are subject to change annually.

Rates Effective SEPTEMBER 1, 2025