



## **MONTHLY RATE SHEET EFFECTIVE SEPTEMBER 1, 2024**

### **PPO – COBRA RATES**

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

| <b>Rates</b>   | <b>Plan</b>   | <b>Single</b>      | <b>Two Party</b>   | <b>Family</b>      |
|--|---------------|--------------------|--------------------|--------------------|
| View plans and select preferences through NavigateHCR's secure portal, Compass | Medical       | \$ 845.32          | \$ 1,690.64        | \$ 1,944.24        |
|  | Prescription  | \$ 195.81          | \$ 391.62          | \$ 450.36          |
|  | Dental        | \$ 37.10           | \$ 75.56           | \$ 119.20          |
|  | <b>Totals</b> | <b>\$ 1,078.23</b> | <b>\$ 2,157.82</b> | <b>\$ 2,513.80</b> |

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

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.**

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