

2018-19 COBRA Rates
Management, Confidential & Board
Anthem Blue Cross

HMO20	\$20 DOV \$5/\$25/\$40 RX Monthly
Single	\$662.82
Two-party	\$1,325.64
Family	\$1,955.32
HMO30	\$30 DOV \$10/\$30/\$60 RX Monthly
Single	\$618.88
Two-party	\$1,237.76
Family	\$1,825.70
HMO40 "Narrow Network"	\$40 DOV \$500/\$1000 Ded \$10/\$30/\$60 RX Monthly
Single	\$560.91
Two-party	\$1,121.82
Family	\$1,654.68
HSA	\$1500/\$3000 Ded then 90/70% \$10/\$30 RX after deductible Monthly
Single	\$769.07
Two-party	\$1,538.14
Family	\$2,268.76

Kaiser

Kaiser Hi HMO	\$20 DOV \$10 RX
Single	\$684.29
Family	\$1,368.58
Kaiser Low HMO	\$20 DOV \$500/\$1000 ded then 20% coinsurance \$10/30 RX
Single	\$561.35
Family	\$1,122.71

Dental

	Monthly
Delta Dental PPO-Incentive	S: \$61.68, 2-pty: \$123.36, F: \$181.96
Delta Dental PPO	S: \$50.72, 2-pty: \$101.44, F: \$149.62
Anthem Dental	S: \$44.81, 2-pty: \$89.62, F: \$132.19
DeltaCare HMO	Single, 2-pty or Family: \$53.15*

*Delta HMO is a composite rate (same cost for all tiers)

Vision

	Monthly
VSP	S:\$6.06, 2-Pty: \$12.12, F: \$17.88
MES	S: \$4.71, 2-Pty: \$9.42; F: \$13.89