

COBRA

MONTHLY RATES 01/01/2021 - 12/31/2021

PLAN NAME	1 PARTY	2 PARTY	FAMILY
Anthem Select HMO	\$8 16.56	\$1,633.12	\$2,123.06
Anthem Traditional HMO	\$1,244.73	\$2,489.45	\$3,236.29
Blue Shield HMO	\$957.74	\$1,915.48	\$2,490.13
Blue Shield TRIO	\$737.01	\$1,474.02	\$1,916.23
Health Net Smart Care	\$942.85	\$1,885.69	\$2,451.41
Kaiser	\$776.85	\$1,553.70	\$2,019.81
United Health Care	\$770.72	\$1,541.44	\$2,003.88
Western Health Advantage	\$772.16	\$1,544.32	\$2,007.62
PERS Choice	\$866.21	\$1,732.43	\$2,252.16
PERS Care	\$1,134.11	\$2,268.21	\$2,948.68
PERS Select	\$537.94	\$1,075.88	\$1,398.63
Delta Dental	1 PARTY	2 PARTY	FAMILY
Basic	\$31.05	\$58.67	\$117.80
Enhanced Level I	\$37.78	\$71.48	\$147.38
Enhanced Level II	\$46.77	\$88.25	\$172.41
Delta Care	1 PARTY	2 PARTY	FAMILY
Basic	\$19.23	\$31.70	\$46.89
Enhanced	\$25.54	\$42.16	\$62.34
VSP (Vision Service Plan)	1 PARTY	2 PARTY	FAMILY
	\$7.24	\$7.24	\$7.24
VSP Premier	\$11.43	\$22.86	\$36.81