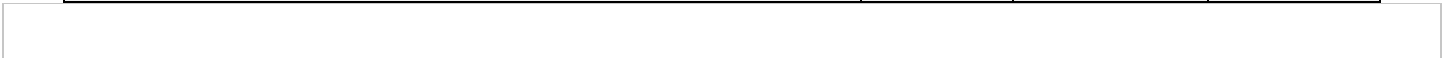


2024 COBRA Rates for Health, Dental and Vision Plans

| Health Plan Name | Single (1) | Two-Party (2) | Family (3+) |
|---|---------------|------------------|----------------|
| Anthem Blue Cross Select HMO | \$944.08 | \$1,888.16 | \$2,454.61 |
| Anthem Blue Cross Traditional HMO | \$1,221.90 | \$2,443.80 | \$3,176.93 |
| Anthem Blue Cross EPO (Del Norte County) | \$1,240.19 | \$2,480.37 | \$3,224.49 |
| Blue Shield Access+ | \$910.34 | \$1,820.68 | \$2,366.88 |
| Blue Shield Access+ EPO (Restricted to certain counties) | \$910.34 | \$1,820.68 | \$2,366.88 |
| Blue Shield TRIO (Restricted to certain counties) | \$826.44 | \$1,652.89 | \$2,148.75 |
| Health Net Salud y Mas | \$670.10 | \$1,340.20 | \$1,742.26 |
| Kaiser (CA) | \$983.43 | \$1,966.87 | \$2,556.93 |
| Kaiser Permanente Out-of-State | \$1,338.70 | \$2,677.40 | \$3,480.62 |
| PERS Platinum (PERS Care and PERS Choice) | \$1,240.19 | \$2,480.37 | \$3,224.49 |
| PERS Gold (PERS Select) | \$876.50 | \$1,752.99 | \$2,278.89 |
| PORAC | \$870.06 | \$1,742.16 | \$2,264.40 |
| Sharp (San Diego County) | \$849.90 | \$1,699.81 | \$2,209.75 |
| UnitedHealthcare Alliance HMO | \$900.64 | \$1,801.28 | \$2,341.67 |
| UnitedHealthcare Harmony HMO | \$778.97 | \$1,557.95 | \$2,025.33 |
| Western Health Advantage (Bay Area, Sacramento, and other Northern regions) | \$823.37 | \$1,646.75 | \$2,140.78 |



| Delta Dental PPO Indemnity Plan | Party Designation | Monthly Premium |
|--|--------------------------|------------------------|
| Basic | Single (1) | \$31.06 |
| | Two-Party (2) | \$58.67 |
| | Family (3+) | \$117.80 |
| Enhanced Level I | Single (1) | \$37.78 |
| | Two-Party (2) | \$71.48 |
| | Family (3+) | \$147.38 |
| Enhanced Level II | Single (1) | \$46.77 |
| | Two-Party (2) | \$88.25 |
| | Family (3+) | \$172.41 |

| Delta Care USA Prepaid HMO Plan | Party Designation | Monthly Premium |
|--|--------------------------|------------------------|
| Basic | Single (1) | \$19.23 |
| | Two-Party (2) | \$31.70 |
| | Family (3+) | \$46.89 |
| Enhanced | Single (1) | \$25.54 |
| | Two-Party (2) | \$42.16 |
| | Family (3+) | \$62.34 |

| Plan Name | Single (1) | Two-Party (2) | Family (3+) |
|----------------------|-------------------|----------------------|--------------------|
| VSP Actives | \$7.09 | \$7.09 | \$7.09 |
| VSP Actives Premier | \$11.20 | \$22.40 | \$36.07 |
| VSP Retirees | \$5.20 | \$9.49 | \$10.17 |
| VSP Retirees Premier | \$15.09 | \$28.18 | \$30.23 |