

2023 COBRA PREMIUM RATES

Plan Choices	2022 Monthly Rates			2023 Monthly Rates		
	\$25 Co-Pay	\$40 Co-Pay	ABHP	\$25 Co-Pay	\$40 Co-Pay	ABHP
<u>Kaiser HMO</u>						
Single Employee	\$ 780.82	\$ 769.90	\$ 635.78	\$ 774.08	\$ 763.26	\$ 631.80
Employee + 1 dependent	\$ 1,559.64	\$ 1,537.80	\$ 1,269.54	\$ 1,546.16	\$ 1,524.52	\$ 1,261.58
Employee + 2 or more dep.	\$ 2,073.66	\$ 2,044.62	\$ 1,687.84	\$ 2,055.74	\$ 2,026.96	\$ 1,677.26
Domestic Partner	\$ 778.82	\$ 767.90	\$ 633.76	\$ 772.08	\$ 761.26	\$ 629.78
<u>Western Health Advantage</u>						
Single Employee	\$ 776.85	\$ 760.92	\$ 563.26	\$ 811.33	\$ 795.27	\$ 549.27
Employee + 1 dependent	\$ 1,553.66	\$ 1,521.80	\$ 1,126.49	\$ 1,622.60	\$ 1,590.49	\$ 1,098.50
Employee + 2 or more dep.	\$ 2,066.40	\$ 2,024.03	\$ 1,498.26	\$ 2,158.10	\$ 2,115.40	\$ 1,461.03
Domestic Partner	\$ 776.81	\$ 760.88	\$ 563.22	\$ 811.27	\$ 795.21	\$ 549.23
<u>Sutter Health Plus</u>						
Single Employee	\$ 787.13	\$ 758.27	\$ 643.93	\$ 830.08	\$ 799.48	\$ 680.54
Employee + 1 dependent	\$ 1,574.47	\$ 1,516.74	\$ 1,287.85	\$ 1,660.56	\$ 1,599.36	\$ 1,361.09
Employee + 2 or more dep.	\$ 2,095.28	\$ 2,018.58	\$ 1,712.89	\$ 2,211.26	\$ 2,129.96	\$ 1,810.30
Domestic Partner	\$ 787.34	\$ 758.47	\$ 643.93	\$ 830.48	\$ 799.88	\$ 680.54
<u>Delta Dental DPO</u>						
Single Employee	\$ 63.30			\$ 63.30		
Employee + 1 dependent	\$ 120.22			\$ 120.22		
Employee + 2 or more dep.	\$ 160.06			\$ 160.06		
Domestic Partner	\$ 56.92			\$ 56.92		
<u>DeltaCare Dental PMI</u>						
Single Employee	\$ 28.42			\$ 28.42		
Employee + 1 dependent	\$ 53.98			\$ 53.98		
Employee + 2 or more dep.	\$ 71.85			\$ 71.85		
Domestic Partner	\$ 25.56			\$ 25.56		
Plan Choices	Basic	Enhanced		Basic	Enhanced	
<u>VSP-Vision Services Plan</u>						
Single Employee	\$ 8.61	\$ 13.28		\$ 8.61	\$ 13.28	
Employee + 1 dependent	\$ 12.38	\$ 19.05		\$ 12.38	\$ 19.05	
Employee + 2 or more dep.	\$ 22.15	\$ 34.11		\$ 22.15	\$ 34.11	
Domestic Partner	\$ 3.77	\$ 5.51		\$ 3.77	\$ 5.51	