

2023 COBRA Participants Monthly Health Premiums

ALL REGIONS				
	BCBST NETWORK S	CIGNA LOCALPLUS	BCBST NETWORK P	CIGNA OPEN ACCESS
PREMIER PPO				
Employee Only/Single	\$774.18	\$774.18	\$840.48	\$840.48
Employee + Child(ren)	\$1,160.76	\$1,160.76	\$1,227.06	\$1,227.06
Employee + Spouse	\$1,702.38	\$1,702.38	\$1,834.98	\$1,834.98
Employee + Spouse + Child(ren)	\$2,011.44	\$2,011.44	\$2,144.04	\$2,144.04
STANDARD PPO				
Employee Only/Single	\$719.10	\$719.10	\$785.40	\$785.40
Employee + Child(ren)	\$1,078.14	\$1,078.14	\$1,144.44	\$1,144.44
Employee + Spouse	\$1,582.02	\$1,582.02	\$1,714.62	\$1,714.62
Employee + Spouse + Child(ren)	\$1,868.64	\$1,868.64	\$2,001.24	\$2,001.24
CDHP/HSA				
Employee Only/Single	\$688.50	\$688.50	\$754.80	\$754.80
Employee + Child(ren)	\$1,032.24	\$1,032.24	\$1,098.54	\$1,098.54
Employee + Spouse	\$1,514.70	\$1,514.70	\$1,647.30	\$1,647.30
Employee + Spouse + Child(ren)	\$1,789.08	\$1,789.08	\$1,921.68	\$1,921.68

*COBRA participants enrolled in the CDHP/HSA do not receive a state contribution to their HSA.