

# 2023 COBRA MEDICAL AND DENTAL RATES

<b>LE, FM</b>			
<b>2023 COBRA MEDICAL RATES</b>			
Coverage	MONTHLY PREMIUMS		
	BCBS PPO Option 5	Simply Blue (High Deductible)	HMO Blue Care Network
Single	\$1,283.81	\$865.05	\$955.22
Two Person	\$3,081.13	\$2,076.17	\$2,292.55
3 to 4	\$3,851.42	\$2,595.23	\$2,865.68
5 or more	\$4,429.14	\$2,984.52	\$3,295.53

<b>AP, AC, AH, CA, PS, CP, PE/PT</b>			
<b>2023 COBRA MEDICAL RATES</b>			
Coverage	MONTHLY PREMIUMS		
	BCBS PPO Option 5	Simply Blue (High Deductible)	HMO Blue Care Network
Single	\$790.28	\$738.06	\$408.72
Two Person	\$1,896.66	\$1,771.38	\$980.94
3 to 4	\$2,370.84	\$2,214.25	\$1,226.17
5 or more	\$2,726.46	\$2,546.39	\$1,410.11

<b>2023 COBRA DENTAL RATES</b>			
Coverage	MONTHLY PREMIUMS		
	AP, AC, AH, CA, PS, CP, PE/PT	FA, LE	CP, PS
Single	\$46.63	\$44.09	\$36.04
Two Person	\$84.80	\$78.92	\$66.07
3 or more	\$146.97	\$135.35	\$122.84

Premium payments are due on the first of each month and are payable directly to our vendor: HSA Bank

For questions regarding payment, please contact HAS Bank COBRA Division at 833-509-1542