

## 2024 Monthly COBRA Premium Rates



| Health Net CanopyCare HMO                                 |                          |
|---|--------------------------|
| Employee Only   | \$814.49                 |
| Employee +1   | \$1,625.95               |
| Employee +2 or More                                       | \$2,299.44               |
| Kaiser Permanente HMO                                     |                          |
| Employee Only   | \$852.37                 |
| Employee +1   | \$1,701.71               |
| Employee +2 or More                                       | \$2,406.64               |
| Blue Shield of California Trio HMO                        |                          |
| Employee Only   | \$902.38                 |
| Employee +1   | \$1,801.73               |
| Employee +2 or More                                       | \$2,548.70               |
| Blue Shield of California Access+ HM                      | 10                       |
| Employee Only   | \$1,091.77               |
| Employee +1   | \$2,180.49               |
| Employee +2 or More                                       | \$3,084.16               |
|   |                          |
| Blue Shield of California PPO                             |                          |
| Blue Shield of California PPO Employee Only               | \$1,488.54               |
|   | \$1,488.54<br>\$2,888.34 |
| Employee Only   |                          |
| Employee Only Employee +1                                 | \$2,888.34               |
| Employee Only Employee +1 Employee +2 or More             | \$2,888.34               |
| Employee Only Employee +1 Employee +2 or More VSP Premier | \$2,888.34<br>\$4,081.81 |

For City College of San Francisco (CCSF) COBRA dental rates, visit **CCSF's** website at **ccsf.edu** or call the **CCSF Benefits Unit** at **(415) 452-7733**.