

**WASHOE COUNTY SCHOOL DISTRICT
RISK MANAGEMENT OFFICE**

2023 - COBRA Rates

PPO Plan	Beneficiary Medical	Beneficiary Dental	Beneficiary GAP	Beneficiary Vision	Dep/Add Medical	Dependent Dental	Dependent GAP	Beneficiary Premium	Dep/Add Premium	Sub-Total Premium	Admin Fee	Total Premium
Beneficiary Only	\$694.40	\$62.32	\$14.80	\$13.46	\$0.00	\$0.00	\$0.00	\$784.98	\$0.00	\$784.98	\$15.70	\$800.68
Ben + Spouse	\$694.40	\$62.32	\$14.80	\$13.46	\$413.78	\$30.07	\$12.10	\$784.98	\$455.95	\$1,240.93	\$24.82	\$1,265.75
Ben + 1 Child	\$694.40	\$62.32	\$14.80	\$13.46	\$253.17	\$21.22	\$9.60	\$784.98	\$283.99	\$1,068.97	\$21.38	\$1,090.35
Ben + 2 Children	\$694.40	\$62.32	\$14.80	\$13.46	\$495.57	\$40.45	\$9.60	\$784.98	\$545.62	\$1,330.60	\$26.61	\$1,357.21
Ben + Family	\$694.40	\$62.32	\$14.80	\$13.46	\$651.19	\$50.30	\$21.70	\$784.98	\$723.19	\$1,508.17	\$30.16	\$1,538.33
QHDHP Plan	Beneficiary Medical	Beneficiary Dental	Beneficiary GAP	Beneficiary Vision	Dep/Add Medical	Dependent Dental	Dependent GAP	Beneficiary Premium	Dep/Add Premium	Sub-Total Premium	Admin Fee	Total Premium
Beneficiary Only	\$536.22	\$62.32	\$0.00	\$13.46	\$0.00	\$0.00	\$0.00	\$612.00	\$0.00	\$612.00	\$12.24	\$624.24
Ben + Spouse	\$536.22	\$62.32	\$0.00	\$13.46	\$202.10	\$30.07	\$0.00	\$612.00	\$232.17	\$844.17	\$16.88	\$861.05
Ben + 1 Child	\$536.22	\$62.32	\$0.00	\$13.46	\$68.52	\$21.22	\$0.00	\$612.00	\$89.74	\$701.74	\$14.03	\$715.77
Ben + 2 Children	\$536.22	\$62.32	\$0.00	\$13.46	\$269.05	\$40.45	\$0.00	\$612.00	\$309.50	\$921.50	\$18.43	\$939.93
Ben + Family	\$536.22	\$62.32	\$0.00	\$13.46	\$398.26	\$50.30	\$0.00	\$612.00	\$448.56	\$1,060.56	\$21.21	\$1,081.77