

**State and Higher Education**

**2017 Monthly Premiums for COBRA Participants**

<b>ALL REGIONS</b>			
	<b>BCBST</b>	<b>CIGNA LOCALPLUS</b>	<b>CIGNA OPEN ACCESS</b>
<b>PARTNERSHIP PROMISE PPO</b>			
Employee Only/Single	\$719.10	\$719.10	\$759.90
Employee + Child(ren)	\$1,078.14	\$1,078.14	\$1,118.94
Employee + Spouse	\$1,509.60	\$1,509.60	\$1,591.20
Employee + Spouse + Child(ren)	\$1,868.64	\$1,868.64	\$1,950.24
<b>NO PARTNERSHIP PROMISE PPO</b>			
Employee Only/Single	\$770.10	\$770.10	\$810.90
Employee + Child(ren)	\$1,129.14	\$1,129.14	\$1,169.94
Employee + Spouse	\$1,611.60	\$1,611.60	\$1,693.20
Employee + Spouse + Child(ren)	\$1,970.64	\$1,970.64	\$2,052.24
<b>STANDARD PPO</b>			
Employee Only/Single	\$716.04	\$716.04	\$756.84
Employee + Child(ren)	\$1,075.08	\$1,075.08	\$1,115.88
Employee + Spouse	\$1,504.50	\$1,504.50	\$1,586.10
Employee + Spouse + Child(ren)	\$1,862.52	\$1,862.52	\$1,944.12
<b>HEALTHSAVINGS CDHP (PROMISE OR NO PROMISE)</b>			
Employee Only/Single	\$669.12	\$669.12	\$709.92
Employee + Child(ren)	\$1,003.68	\$1,003.68	\$1,044.48
Employee + Spouse	\$1,404.54	\$1,404.54	\$1,486.14
Employee + Spouse + Child(ren)	\$1,739.10	\$1,739.10	\$1,820.70

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