

CITY OF CHICAGO
PHSA (Formerly known as COBRA) RATES
EFFECTIVE JANUARY 1, 2016

TYPE OF PLAN	LEVEL OF COVERAGE		
	SINGLE EE	EE PLUS ONE	EE PLUS TWO OR MORE
PPO			
BLUE CROSS BLUE SHIELD PPO	\$676.71	\$1,206.30	\$1,670.58
HMO			
BLUE ADVANTAGE HMO	\$531.46	\$1,071.41	\$1,568.33
BCBS DENTAL HMO	\$14.08	\$26.06	\$36.62
BCBS DENTAL PPO	\$20.06	\$37.82	\$50.12
VISION ONLY	\$3.05	\$6.10	\$9.15