

# PHSA (Formerly known as COBRA) RATES

EFFECTIVE JANUARY 1, 2012

TYPE OF PLAN	LEVEL OF COVERAGE		
	SINGLE EE	EE PLUS ONE	EE PLUS TWO OR MORE
<b>PPO</b>			
BLUE CROSS BLUE SHIELD PPO WITH VISION	\$604.22	\$1,079.05	\$1,513.50
BLUE CROSS BLUE SHIELD SEASONAL PPO	\$199.41	\$388.51	\$635.75
<b>HMO</b>			
BLUE ADVANTAGE HMO WITH VISION	\$403.33	\$813.02	\$1,190.45
COMPBENEFITS DENTAL HMO	\$14.21	\$32.81	\$32.81
COMPBENEFITS DENTAL PPO	\$13.79	\$26.91	\$46.92
VISION ONLY	\$3.07	\$6.14	\$9.21