



Kern County Human Resources
2018 Health Plan COBRA Rates
 Effective January 1, 2018

COBRA Monthly Rates

ACTIVE PLANS

MEDICAL

	Single	Two-Party	Family
Kern Legacy Select/Rx	\$ 229.30	\$ 436.31	\$ 641.68
Kern Legacy Health Plan Network Plus/Rx	\$ 382.16	\$ 727.17	\$ 1,069.47
County of Kern EPO plan/Rx	\$ 457.70	\$ 857.98	\$ 1,239.87
Kaiser Permanente/Rx	\$ 487.10	\$ 930.35	\$ 1,320.03
County of Kern POS plan/Rx	\$ 889.71	\$ 1,606.46	\$ 2,315.01

DENTAL

Liberty Independence PPO dental	\$ 42.87	\$ 74.01	\$ 105.16
Liberty Cobalt Plus DHMO dental	\$ 23.44	\$ 46.41	\$ 70.31

VISION

Vision Service Plan (VSP)	\$ 6.32	\$ 9.75	\$ 13.14
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EXTRA HELP/TEMPORARY PLANS

Kern Legacy Select/Rx	\$ 229.30	\$ 436.31	\$ 641.68
Kern Legacy Health Plan Network Plus/Rx	\$ 382.16	\$ 727.17	\$ 1,069.47
Kaiser Permanente Deductible Plan/Rx	\$ 308.45	\$ 589.13	\$ 835.88
Kaiser Permanente Traditional Plan/Rx	\$ 531.12	\$ 1,014.45	\$ 1,439.34

RETIREE PLANS

MEDICAL

Kern Legacy Health Plan Network Plus/Rx	\$ 804.78	\$ 1,554.48	\$ 2,401.08
County of Kern EPO plan/Rx	\$ 877.20	\$ 1,689.12	\$ 2,692.80
Kaiser Permanente/Rx	\$ 950.15	\$ 1,900.30	\$ 2,689.28
County of Kern POS plan/Rx	\$ 1,521.84	\$ 2,801.94	\$ 4,083.06

DENTAL

LIBERTY Dental CA40-R plan	\$ 20.40	\$ 34.68	\$ 51.00
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The Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA) provides that certain former employees, retirees, spouses, former spouses and dependent children have the right to temporary continuation of health coverage at the group rate if coverage is lost due to specified reasons.

COBRA Administrator:

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