

# PHSA (Formerly known as COBRA) RATES

EFFECTIVE JANUARY 1, 2015

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	\$627.87	\$1,124.23	\$1,554.34
<b>HMO</b>			
BLUE ADVANTAGE HMO WITH VISION	\$482.71	\$973.08	\$1,424.61
BCBS DENTAL HMO	\$14.08	\$26.06	\$36.62
BCBS DENTAL PPO	\$19.92	\$37.56	\$49.79
VISION ONLY	\$3.05	\$6.10	\$9.15