



## COBRA – Plan Year 2018 Rates

|                           | Statewide PPO                                   | Standard HMO Plan                            | Alternate HMO Plan                           |
|---------------------------|---|--|--|
|                           | PPO Consumer Driven High Deductible Health Plan | Hometown Health Plan & Health Plan of Nevada | Hometown Health Plan & Health Plan of Nevada |
| <b>State Employee</b>     |   |  |  |
| Participant               | 611.28  | 842.17                                       | 809.10                                       |
| Participant + Spouse/DP   | 1,109.13  | 1,635.16                                     | 1,563.87                                     |
| Participant + Child(ren)  | 809.03  | 1,217.55                                     | 1,162.23                                     |
| Participant + Family      | 1,306.65  | 2,015.64                                     | 1,917.00                                     |
| <b>State Retiree</b>      |   |  |  |
| Participant               | 593.42  | 818.81                                       | 786.96                                       |
| Participant + Spouse/DP   | 1,088.72  | 1,616.89                                     | 1,513.49                                     |
| Participant + Child(ren)  | 787.25  | 1,199.29                                     | 1,136.18                                     |
| Participant + Family      | 1,283.99  | 1,997.37                                     | 1,885.09                                     |
| Spouse/DP Only            | 593.42  | 818.81                                       | 786.96                                       |
| Spouse/DP + Child(ren)    | 787.25  | 1,199.29                                     | 1,136.18                                     |
| <b>Non-State Employee</b> |   |  |  |
| Participant               | 1,141.15  | 904.21                                       | 845.88                                       |
| Participant + Spouse/DP   | 2,171.75  | 1,769.43                                     | 1,652.77                                     |
| Participant + Child(ren)  | 2,034.22  | 1,349.36                                     | 1,256.15                                     |
| Participant + Family      | 3,064.82  | 2,214.58                                     | 2,063.04                                     |
| <b>Non-State Retiree</b>  |   |  |  |
| Participant               | 1,122.88  | 885.94                                       | 832.60                                       |
| Participant + Spouse/DP   | 2,153.49  | 1,751.17                                     | 1,623.27                                     |
| Participant + Child(ren)  | 2,015.95  | 1,331.09                                     | 1,243.84                                     |
| Participant + Family      | 3,046.56  | 2,196.32                                     | 2,034.50                                     |
| Spouse/DP Only            | 1,122.88  | 885.94                                       | 832.60                                       |
| Spouse/DP + Child(ren)    | 2,015.95  | 1,331.09                                     | 1,243.84                                     |

- COBRA participants do not qualify for life insurance and long term disability benefits
- Participants on COBRA do not receive a subsidy