



Plan Year 2019 Rates  
July 1, 2018 – June 30, 2019

Plan Year 2019 COBRA Rates		
Monthly Rates	Consumer Driven Health Plan PPO	PEBP Premier Plan & Health Plan of Nevada
<b>State Employee</b>		
Employee	590.84	831.21
Employee + Spouse/DP	1,088.51	1,612.83
Employee + Child(ren)	793.74	1,218.95
Employee + Family	1,291.41	2,000.58
<b>State Retiree</b>		
Retiree	573.51	814.09
Retiree + Spouse/DP	1,071.18	1,595.72
Retiree + Child(ren)	776.41	1,201.84
Retiree + Family	1,274.08	1,983.46
Spouse/DP Only	573.51	814.09
Spouse/DP + Child(ren)	776.41	1,201.84
<b>Non-State Employee</b>		
Employee	1,217.88	797.82
Employee + Spouse/DP	2,342.62	1,546.07
Employee + Child(ren)	1,962.75	1,198.20
Employee + Family	3,087.48	1,946.45
<b>Non-State Retiree</b>		
Retiree	1,200.55	780.71
Retiree + Spouse/DP	2,325.29	1,528.95
Retiree + Child(ren)	1,945.42	1,181.09
Retiree + Family	3,070.15	1,929.33
Spouse/DP Only	1,200.55	780.71
Spouse/DP + Child(ren)	1,945.42	1,181.09

-- COBRA participants do not qualify for Life Insurance and Long Term Disability.

-- Participants on COBRA do not receive a subsidy.