

# HEALTH PLAN CONTRIBUTION RATES

## COBRA

Effective July 1, 2026

<b>ALL (EXCLUDING SA UNIT):</b>			
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
<b>Blue Shield PPO ABHP High (\$2000)</b>	\$1,227.00	\$2,214.00	\$3,074.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$5.08	\$10.13	\$16.32
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$25.91	\$46.82	\$65.11
<b>Total</b>	<b>\$1,321.43</b>	<b>\$2,387.84</b>	<b>\$3,320.80</b>
<b>Blue Shield PPO ABHP Low (\$1700)</b>	\$1,364.00	\$2,459.00	\$3,417.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$5.08	\$10.13	\$16.32
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$28.65	\$51.72	\$71.97
<b>Total</b>	<b>\$1,461.17</b>	<b>\$2,637.74</b>	<b>\$3,670.66</b>
<b>Blue Shield PPO Standard (\$200)</b>	\$1,778.00	\$3,203.00	\$4,452.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$5.08	\$10.13	\$16.32
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$36.93	\$66.60	\$92.67
<b>Total</b>	<b>\$1,883.45</b>	<b>\$3,396.62</b>	<b>\$4,726.36</b>
<b>Kaiser HMO</b>	\$1,192.00	\$2,361.00	\$3,326.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$5.08	\$10.13	\$16.32
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$25.21	\$49.76	\$70.15
<b>Total</b>	<b>\$1,285.73</b>	<b>\$2,537.78</b>	<b>\$3,577.84</b>
<b>Kaiser HMO ABHP (\$1700)</b>	\$983.00	\$1,934.00	\$2,722.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$5.08	\$10.13	\$16.32
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$21.03	\$41.22	\$58.07
<b>Total</b>	<b>\$1,072.55</b>	<b>\$2,102.24</b>	<b>\$2,961.76</b>

<b>SA UNIT ONLY:</b>			
	<u>EE ONLY</u>	<u>EE+1</u>	<u>FAMILY</u>
<b>Blue Shield PPO ABHP High (\$2000)</b>	\$1,227.00	\$2,214.00	\$3,074.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$4.30	\$8.58	\$13.81
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$25.89	\$46.79	\$65.06
<b>Total</b>	<b>\$1,320.63</b>	<b>\$2,386.26</b>	<b>\$3,318.24</b>
<b>Blue Shield PPO ABHP Low (\$1700)</b>	\$1,364.00	\$2,459.00	\$3,417.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$4.30	\$8.58	\$13.81
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$28.63	\$51.69	\$71.92
<b>Total</b>	<b>\$1,460.37</b>	<b>\$2,636.16</b>	<b>\$3,668.10</b>
<b>Blue Shield PPO Standard (\$200)</b>	\$1,778.00	\$3,203.00	\$4,452.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$4.30	\$8.58	\$13.81
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$36.91	\$66.57	\$92.62
<b>Total</b>	<b>\$1,882.65</b>	<b>\$3,395.04</b>	<b>\$4,723.80</b>
<b>Kaiser HMO</b>	\$1,192.00	\$2,361.00	\$3,326.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$4.30	\$8.58	\$13.81
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$25.19	\$49.73	\$70.10
<b>Total</b>	<b>\$1,284.93</b>	<b>\$2,536.20</b>	<b>\$3,575.28</b>
<b>Kaiser HMO ABHP (\$1700)</b>	\$983.00	\$1,934.00	\$2,722.00
Delta Dental PPO+Premier	\$49.88	\$89.77	\$124.69
VSP Choice	\$4.30	\$8.58	\$13.81
EDC Admin Fee	\$13.56	\$27.12	\$40.68
2% COBRA Admin Fee	\$21.01	\$41.19	\$58.02
<b>Total</b>	<b>\$1,071.75</b>	<b>\$2,100.66</b>	<b>\$2,959.20</b>

<b>Employee Assistance Program (EAP)</b>
\$3.67 regardless of number enrolled
\$0.07 2% COBRA Admin Fee
<b>\$3.74 Total</b>
<b>ConcernPlus EAP</b>
\$14.35 regardless of number enrolled
\$0.29 2% COBRA Admin Fee
<b>\$14.64 Total</b>