

**Premera Blue Cross Blue Shield of Alaska
Group 1011203**

COBRA Prices effective July 1, 2020 to June 30, 2021

Monthly Premium

	REGULAR RATES	COBRA TOTAL (PLUS 102%)
Employee Only	\$1,137.98	\$1,160.74
Employee & Spouse	\$2,131.11	\$2,173.73
Employee and Family	\$3,053.00	\$3,114.06
Employee & Child(ren)	\$2,059.95	\$2,101.15