

**BAY AREA/SACRAMENTO REGION**

Alameda, Amador, Contra Costa, El Dorado, Marin, Napa, Nevada, Placer, Sacramento,  
San Francisco, San Joaquin, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma,  
Sutter, Yolo, Yuba

**"COBRA"**

**GROUP CONTINUATION COVERAGE**  
**RATES FOR JANUARY 1, 2009 TO DECEMBER 31, 2009**

Rates are calculated at 102%; however not all carriers will require 102%

<b>-- BASIC --</b>				
<b>PLAN CODE</b>	<b>PLAN NAME</b>	<b>1 Party</b>	<b>2 Party</b>	<b>3 Party</b>
301	Blue Shield HMO	\$571.78	\$1,143.56	\$1,486.63
060	Blue Shield HPN*	\$505.41	\$1,010.82	\$1,314.07
305	Kaiser	\$518.47	\$1,036.93	\$1,348.01
320	PERS Choice	\$492.13	\$984.26	\$1,279.54
072	PERS Select*	\$462.22	\$924.45	\$1,201.78
325	PERSCare	\$764.83	\$1,529.65	\$1,988.55
207	PORAC	\$493.68	\$924.12	\$1,174.02

\* Blue Shield NetValue and PERS Select are high performance physician network plans

**LOS ANGELES AREA REGION**

Los Angeles, San Bernardino, Ventura

**"COBRA"****GROUP CONTINUATION COVERAGE****RATES FOR JANUARY 1, 2009 TO DECEMBER 31, 2009**

Rates are calculated at 102%; however not all carriers will require 102%

**-- BASIC --**

<b>PLAN CODE</b>	<b>PLAN NAME</b>	<b>1 Party</b>	<b>2 Party</b>	<b>3 Party</b>
302	Blue Shield HMO	\$420.60	\$841.19	\$1,093.55
062	Blue Shield HPN*	\$371.78	\$743.56	\$966.62
306	Kaiser	\$395.78	\$791.56	\$1,029.03
321	PERS Choice	\$458.02	\$916.04	\$1,190.85
080	PERS Select*	\$430.19	\$860.37	\$1,118.48
326	PERSCare	\$711.83	\$1,423.65	\$1,850.75
207	PORAC	\$493.68	\$924.12	\$1,174.02

\* Blue Shield NetValue and PERS Select are high performance physician network plans

**OTHER SOUTHERN CALIFORNIA REGION**

Fresno, Imperial, Inyo, Kern, Kings, Madera, Riverside, Orange, San Diego,  
San Luis Obispo, Santa Barbara, Tulare

**"COBRA"****GROUP CONTINUATION COVERAGE**

**RATES FOR JANUARY 1, 2009 TO DECEMBER 31, 2009**

Rates are calculated at 102%; however not all carriers will require 102%

**-- BASIC --**

<b>PLAN CODE</b>	<b>PLAN NAME</b>	<b>1 Party</b>	<b>2 Party</b>	<b>3 Party</b>
304	Blue Shield HMO	\$480.60	\$961.21	\$1,249.57
064	Blue Shield HPN*	\$424.82	\$849.64	\$1,104.53
308	Kaiser	\$433.61	\$867.22	\$1,127.40
323	PERS Choice	\$467.76	\$935.52	\$1,216.18
082	PERS Select*	\$439.33	\$878.67	\$1,142.27
328	PERSCare	\$726.96	\$1,453.93	\$1,890.11
207	PORAC	\$493.68	\$924.12	\$1,174.02

\* Blue Shield NetValue and PERS Select are high performance physician network plans

## OTHER NORTHERN CALIFORNIA REGION

Alpine, Butte, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Lake, Lassen, Mariposa,  
Mendocino, Merced, Modoc, Mono, Monterey, Plumas, San Benito, Shasta, Sierra,  
Siskiyou, Stanislaus, Tehama, Trinity, Tuolumne

### "COBRA"

## GROUP CONTINUATION COVERAGE

RATES FOR JANUARY 1, 2009 TO DECEMBER 31, 2009

Rates are calculated at 102%; however not all carriers will require 102%

-- BASIC --				
PLAN CODE	PLAN NAME	1 Party	2 Party	3 Party
303	Blue Shield HMO	\$580.39	\$1,160.78	\$1,509.02
307	Kaiser	\$530.01	\$1,060.02	\$1,378.03
322	PERS Choice	\$511.62	\$1,023.24	\$1,330.21
053	PERS Select*	\$480.52	\$961.04	\$1,249.36
327	PERSCare	\$795.12	\$1,590.24	\$2,067.32
207	PORAC	\$493.68	\$924.12	\$1,174.02

\* PERS Select is a high performance physician network plan

**OUT OF STATE REGION  
"COBRA"  
GROUP CONTINUATION COVERAGE  
RATES FOR JANUARY 1, 2009 TO DECEMBER 31, 2009**

Rates are calculated at 102%; however not all carriers will require 102%

-- BASIC --				
PLAN CODE	PLAN NAME	1 Party	2 Party	3 Party
**	Kaiser Out-of-State	\$673.53	\$1,347.05	\$1,751.17
324	PERS Choice	\$535.98	\$1,071.96	\$1,393.54
329	PERSCare	\$832.98	\$1,665.97	\$2,165.76
207	PORAC	\$493.68	\$924.12	\$1,174.02
**	These premiums cover all Kaiser out-of-state areas.			