

**Seattle Cancer Care Alliance  
2021 – 2022 COBRA RATES  
(July 1, 2021 – June 30, 2022)**

**MEDICAL**

|  | <b><u>PREMERA BLUE CROSS<br/>PLAN A</u></b> | <b><u>PREMERA BLUE CROSS<br/>PLAN B</u></b> | <b><u>KAISER PERMANENTE<br/>HMO PLAN</u></b> |
|--|---|---|--|
| Employee Only                                  | \$956.76                                    | \$891.48                                    | \$738.48                                     |
| Employee & Spouse/Domestic Partner             | \$1,893.12                                  | \$1,766.64                                  | \$1,515.72                                   |
| Employee & Child(ren)                          | \$1,603.44                                  | \$1,497.36                                  | \$1,226.04                                   |
| Employee, Spouse/Domestic Partner & Child(ren) | \$2,537.76                                  | \$2,368.44                                  | \$1,991.04                                   |
| Spouse/Domestic Partner Only                   | \$956.76                                    | \$891.48                                    | \$738.48                                     |
| Spouse/Domestic Partner & Child(ren)           | \$1,603.44                                  | \$1,497.36                                  | \$1,226.04                                   |
| Child(ren) Only                                | \$956.76                                    | \$891.48                                    | \$738.48                                     |

**DENTAL**

|  | <b><u>DELTA DENTAL OF<br/>WASHINGTON PLAN A</u></b> | <b><u>DELTA DENTAL OF<br/>WASHINGTON PLAN B</u></b> |
|--|---|---|
| Employee Only                                  | \$57.12   | \$40.80   |
| Employee & Spouse/Domestic Partner             | \$120.36  | \$81.60   |
| Employee & Child(ren)                          | \$108.12  | \$75.48   |
| Employee, Spouse/Domestic Partner & Child(ren) | \$171.36  | \$116.28  |
| Spouse/Domestic Partner Only                   | \$57.12   | \$40.80   |
| Spouse/Domestic Partner & Child(ren)           | \$108.12  | \$75.48   |
| Child(ren) Only                                | \$57.12   | \$40.80   |