



CALIFORNIA STATE UNIVERSITY, FRESNO

COBRA MONTHLY RATES

Human Resources
 5150 N. Maple Avenue
 Fresno, CA 93740
 (559) 278-2032

Effective January 1, 2009 – December 31, 2009

PLAN NAME	1 PARTY	2 PARTY	FAMILY
Blue Shield HMO	\$515.12	\$1030.24	\$1339.31
Blue Shield Net Value	\$455.33	\$910.66	\$1183.85
Kaiser	\$481.31	\$962.61	\$1251.40
PERS Choice	\$487.25	\$974.51	\$1266.86
PERSCARE	\$757.26	\$1514.52	\$1968.88
PERS Select	\$457.64	\$915.29	\$1189.87
PORAC	\$493.68	\$924.12	\$1174.02
DELTA DENTAL	1 PARTY	2 PARTY	FAMILY
Basic	\$29.66	\$56.03	\$112.52
Enhanced Level I	\$36.10	\$68.29	\$140.76
Enhanced Level II	\$44.68	\$84.29	\$164.67
DELTA CARE USA	1 PARTY	2 PARTY	FAMILY
Basic	\$19.01	\$31.37	\$46.37
Enhanced	\$25.26	\$41.70	\$61.66
VSP (Vision Service Plan)	\$9.31	\$9.31	\$9.31