



PUBLIC SCHOOL COBRA EMPLOYEES MONTHLY RATES

RATES EFFECTIVE JANUARY 1, 2027 - DECEMBER 31, 2027

Plan	Total Monthly Rate
PREMIUM	
Employee Only	\$607.04
Employee & Spouse	\$1,426.56
Employee & Child(ren)	\$1,183.74
Employee & Family	\$2,003.26
CLASSIC	
Employee Only	\$527.76
Employee & Spouse	\$1,240.23
Employee & Child(ren)	\$1,029.12
Employee & Family	\$1,741.59
BASIC	
Employee Only	\$465.79
Employee & Spouse	\$1,094.61
Employee & Child(ren)	\$908.30
Employee & Family	\$1,537.12
The Basic Plan meets the minimum essential coverage required under A.C.A.	

State Contribution is funded by legislation.
Plan Contribution is funded by PSE Trust Fund as Claims Reserve Allocation.