

Raytown School District Group #33060000 Direct Bill COBRA Rate Confirmation Effective 7/1/2024

Preferred-Care Blue PPO \$1,000 Plan Cobra	
Employee	\$967.08
Employee & Spouse	\$2,224.14
Employee & Child(ren)	\$1,808.37
Family	\$3,046.15
Preferred-Care Blue PPO \$1,500 Plan Cobra	
Employee	\$905.01
Employee & Spouse	\$2,081.40
Employee & Child(ren)	\$1,692.36
Family	\$2,850.65
Preferred-Care Blue PPO \$2,500 Plan Cobra	
Employee	\$786.34
Employee & Spouse	\$1,808.43
Employee & Child(ren)	\$1,470.41
Family	\$2,476.79
Preferred-Care Blue BlueSaver PPO Plan Cobra	
Employee	\$786.34
Employee & Spouse	\$1,808.43
Employee & Child(ren)	\$1,470.41
Family	\$2,476.79
BlueSelect Plus BlueSaver PPO Plan Cobra	
Employee	\$718.34
Employee & Spouse	\$1,649.29
Employee & Child(ren)	\$1,341.02
Family	\$2,258.84
BlueSelect Plus PPO \$2,500 Plan Cobra	
Employee	\$735.34
Employee & Spouse	\$1,649.29
Employee & Child(ren)	\$1,341.02
Family	\$2,258.84

Confirmed by: Raytown School District	Approved by: Blue Cross and Blue Shield of Kansas City
Signature	Signature
Title	Title
Date	Date