



**Medical Plan Monthly Rates  
 ACA Group Bronze Plans  
 2019-20 Plan Year  
 (Effective October 1, 2019)**

<b>OEBB Bronze Plan w/Pharmacy</b>	<b>Tier-Rated Groups</b>	
<b>OEBB Rates</b>	<b>Employee Only</b>	<b>Employee + Child(ren)</b>
Moda Health	\$431.53	\$819.92
Moda Health - Select <sup>1</sup>	\$431.53	\$819.92
Kaiser Permanente	\$275.00	\$522.51
<b>COBRA</b>	<b>Employee Only</b>	<b>Employee + Child(ren)</b>
Moda Health	\$440.16	\$836.32
Moda Health - Select <sup>1</sup>	\$440.16	\$836.32
Kaiser Permanente	\$280.50	\$532.96

<sup>1</sup> Select rates apply only to members whose most recent OEBA medical plan enrollment between June 30, 2019 and September 30, 2019 was in a Moda CCM Synergy/Summit Plan.