



**State of Connecticut - Office of the State Comptroller**  
**Healthcare Policy & Benefit Services Division**  
**2023 - 2024 COBRA Medical and Rx Insurance Rates**

<b>Vendor</b>	<b>Plan Name</b>	<b>Class Coverage</b>	<b>Monthly Medical COBRA Rate</b>	<b>Monthly Rx COBRA Rate</b>
<b>Anthem</b>	Primary Care Access	Employee Only	\$928.31	\$177.25
		Employee +1	\$2,042.28	\$389.94
		Family	\$2,506.45	\$478.56
<b>Anthem</b>	Standard Access	Employee Only	\$947.05	\$177.25
		Employee +1	\$2,083.51	\$389.94
		Family	\$2,557.04	\$478.56
<b>Anthem</b>	Expanded Access	Employee Only	\$947.71	\$177.25
		Employee +1	\$2,084.97	\$389.94
		Family	\$2,558.82	\$478.56
<b>Anthem</b>	Anthem Out of Area	Employee Only	\$1,343.00	\$177.25
		Employee +1	\$2,954.60	\$389.94
		Family	\$3,626.11	\$478.56
<b>Anthem</b>	Preferred	Employee Only	\$1,343.00	\$177.25
		Employee +1	\$2,954.60	\$389.94
		Family	\$3,626.11	\$478.56
<b>Anthem</b>	Quality First Select Access	Employee Only	\$855.90	\$177.25
		Employee +1	\$1,882.98	\$389.94
		Family	\$2,310.93	\$478.56