

COBRA RATES

COVERAGE	MONTHLY PREMIUM
VOLUNTARY VISION	
EE ONLY	\$7.00
EE + SPOUSE	\$11.00
EE + CHILDREN	\$12.00
EE + FAMILY	\$17.00

BASIC DENTAL	
EE ONLY	\$12.24
EE+SPOUSE	\$38.76
EE+CHILDREN	\$34.68
EE+FAMILY	\$62.22
BUY UP DENTAL	
EE ONLY	\$43.86
EE+SPOUSE	\$99.96
EE+CHILDREN	\$138.72
EE+FAMILY	\$194.82

BASIC MEDICAL	
EE ONLY	\$721.00
EE+SPOUSE	\$1,153.00
EE+CHILDREN	\$1,298.00
EE+FAMILY	\$1,802.00
BUY UP MEDICAL	
EE ONLY	\$838.00
EE+SPOUSE	\$1,341.00
EE+CHILDREN	\$1,509.00
EE+FAMILY	\$2,096.00
HDHP MEDICAL	
EE ONLY	\$645.00
EE+SPOUSE	\$1,033.00
EE+CHILDREN	\$1,162.00
EE+FAMILY	\$1,614.00