

COBRA Rates: July 1, 2016 - June 30, 2017

Medical Plans

<u>HMO</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 536.31	\$ 10.73	\$ 547.04
Employee + Spouse	\$ 1,126.22	\$ 22.52	\$ 1,148.74
Employee + Child(ren)	\$ 1,009.39	\$ 20.19	\$ 1,029.58
Family	\$ 1,609.03	\$ 32.18	\$ 1,641.21

<u>HRA/HSA</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 402.51	\$ 8.05	\$ 410.56
Employee + Spouse	\$ 845.22	\$ 16.90	\$ 862.12
Employee + Child(ren)	\$ 757.34	\$ 15.15	\$ 772.49
Family	\$ 1,207.85	\$ 24.16	\$ 1,232.01

Dental

<u>Cigna PPO</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 35.46	\$ 0.71	\$ 36.17
Individual + 1	\$ 69.51	\$ 1.39	\$ 70.90
Individual + 2 or more	\$ 102.43	\$ 2.05	\$ 104.48

<u>Cigna DMO</u>	100 % Rate	2% Fee	Total Amount
Individual	\$ 8.18	\$ 0.16	\$ 8.34
Individual + 1	\$ 15.55	\$ 0.31	\$ 15.86
Individual + 2 or more	\$ 19.97	\$ 0.40	\$ 20.37

Vision

<u>Avesis</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 5.15	\$ 0.10	\$ 5.25
Individual + 1	\$ 9.05	\$ 0.18	\$ 9.23
Individual + 2 or more	\$ 13.32	\$ 0.27	\$ 13.59