

COBRA Rates: July 1, 2017 - June 30, 2018

Medical Plans

<u>HMO</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 567.64	\$ 11.35	\$ 578.99
Employee + Spouse	\$ 1,192.01	\$ 23.84	\$ 1,215.85
Employee + Child(ren)	\$ 1,068.35	\$ 21.37	\$ 1,089.72
Family	\$ 1,703.02	\$ 34.06	\$ 1,737.08

<u>HRA/HSA</u>	100% Rate	2% Fee	Total Amount
Individual	\$ 426.02	\$ 8.52	\$ 434.54
Employee + Spouse	\$ 894.59	\$ 17.89	\$ 912.48
Employee + Child(ren)	\$ 801.57	\$ 16.03	\$ 817.60
Family	\$ 1,278.40	\$ 25.57	\$ 1,303.97

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	\$ 5.05	\$ 0.10	\$ 5.15
Individual + 1	\$ 8.87	\$ 0.18	\$ 9.05
Individual + 2 or more	\$ 13.05	\$ 0.26	\$ 13.31