

2024 COBRA and Early Retiree Insurance Rates

*COBRA rates include 2% Administration Fee

COBRA HEALTH INSURANCE

High Deductible Health Plan	
	Monthly Premium
Employee Only	\$642.60
Employee + Children	\$1,124.55
Employee + Spouse	\$1,285.20
Family	\$1,767.15

PPO	
	Monthly Premium
Employee Only	\$790.50
Employee + Children	\$1,260.72
Employee + Spouse	\$1,383.39
Family	\$2173.89

EARLY RETIREE HEALTH INSURANCE

High Deductible Health Plan	
	Monthly Premium
Employee Only	\$630.00

PPO	
	Monthly Premium
Employee Only	\$775.00

COBRA DENTAL INSURANCE

	Monthly Premium
Employee Only	\$35.70
Employee + Children	\$62.49
Employee + Spouse	\$71.40
Family	\$98.23

COBRA VISION INSURANCE

	Monthly Premium
Employee Only	\$9.75
Employee + Children	\$21.42
Employee + Spouse	\$16.16
Family	\$31.19