

2018 COBRA Insurance Rates (medical, dental, vision)

Harvard Pilgrim Health Care Health Plan Choices	Total Monthly Premium	2% Admin Fee	Cobra Monthly Rates
HMO-Individual	\$737.64	\$14.75	\$752.39
HMO- Family	\$1,999.01	\$39.98	\$2,038.99
PPO- Individual	\$1,180.65	\$23.61	\$1,204.26
PPO – Family	\$3,199.57	\$63.99	\$3,263.56
PPO Plus H.S.A. Individual -	\$626.99	\$12.54	\$639.53
PPO Plus H.S.A. Family -	\$1,698.55	\$33.97	\$1,732.52
Delta Dental	Total Monthly Premium	2% Admin Fee	Cobra Monthly Rates
Delta Premier-IND	\$55.71	\$1.11	\$56.82
Delta Premier-FAM	\$145.39	\$2.91	\$148.30
Delta Care - IND	\$37.65	\$0.75	\$38.40
Delta Care - FAM	\$93.06	\$1.86	\$94.92
Eye Med Select Vision Plan	Total Monthly Premium	2% Admin Fee	Cobra Monthly Rates
Employee Only	\$6.87	\$0.14	\$7.01
Employee + Spouse	\$13.05	\$0.26	\$13.31
Employee + Child(ren)	\$13.74	\$0.27	\$14.01
Family	\$20.20	\$0.40	\$20.60