

2018 Monthly COBRA Costs

MEDICAL

Option	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Core Medical	\$441.02	\$1014.33	\$793.83	\$1367.14
Standard Medical	\$505.94	\$1163.66	\$910.69	\$1568.39
Value Medical	\$934.01	\$2148.24	\$1681.23	\$2895.45

VISON AND DENTAL

	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Vision	\$5.39	\$10.45	\$10.25	\$14.66
Standard Dental Plan	\$38.54	\$79.77	\$86.32	\$136.41
	Employee Only	Employee + 1	Employee + 2 or more	
Dental Option 1 (FA Only)	\$33.92	\$65.09	\$92.51	
Dental Option 2 (FA Only)	\$30.08	\$57.71	\$82.05	