WageWorks: Cobra Rate Sheet Dickinson College

Plan Name	Description	Coverage Level	Monthly Cobra Premium (7/1/18 - 6/30/19)
Aetna and CVS	MEDICAL and PRESCRIPTION	Individual Individual + Child(ren) Individual + Spouse Individual + Spouse + Child(ren)	\$575.04 \$1,019.16 \$1,322.58 \$1,713.60
United Concordia	DENTAL (Low Option)	Individual Individual + One Individual + Two or more	\$28.10 \$52.16 \$83.14
United Concordia	DENTAL (High Option)	Individual Individual + One Individual + Two or more	\$30.90 \$59.23 \$105.90
Vision Benefits of America - VBA	VISION	Individual Individual + One Individual + Two or more	\$6.25 \$11.43 \$15.56