## WageWorks: Cobra Rate Sheet Dickinson College

Plan Name	Description	Coverage Level	Monthly Cobra Premium (7/1/19 - 6/30/20)
Aetna and CVS	MEDICAL and PRESCRIPTION	Individual Individual + Child(ren) Individual + Spouse Individual + Spouse + Child(ren)	\$605.84 \$1,073.76 \$1,393.43 \$1,805.41
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