

## Participating COBRA/Early Retiree - 2024 MONTHLY PLAN RATES

Plan	Coverage	Early Retirees	COBRA
CDHP 1	Single	\$735.97	\$750.69
	Family	\$2,042.47	\$2,083.32
CDHP 1 W/ Non-Tobacco Use Incentive	Single	\$660.14	\$673.34
	Family	\$1,966.64	\$2,005.97
CDHP 2	Single	\$793.17	\$809.04
	Family	\$2,205.88	\$2,250.00
CDHP 2 W/ Non-Tobacco Use Incentive	Single	\$717.34	\$731.69
	Family	\$2,130.05	\$2,172.65
Traditional	Single	\$976.21	\$995.74
	Family	\$2,759.68	\$2,814.88
Traditional W/ Non-Tobacco Use Incentive	Single	\$900.38	\$918.39
	Family	\$2,683.85	\$2,737.53
<b>Dental and Vision Rates</b>			
Dental	Single	\$25.35	\$25.86
	Family	\$66.56	\$67.89
Vision	Single	\$5.07	\$5.17
	Family	\$12.48	\$12.73