

# COBRA Benefits 2017 Rate Sheet

## Dental Insurance

(COBRA package mailed from Risk Management – Payments made directly to Sarasota Co.

	<b>Monthly</b>
Employee	\$21.94
Employee Plus 1	\$45.36
Employee and Family	\$75.47

## Vision Insurance

(COBRA package mailed from Risk Management – Payments made directly to Sarasota Co.

	<b>Monthly</b>
Employee	\$4.53
Employee and family	\$14.73

## Medical Insurance

(COBRA package mailed from Risk Management - Payments made directly to Sarasota Co.

	<b>Blue Choice PPO 0702</b>	<b>Blue Choice PPO 0727</b>	<b>Blue Care HMO 55</b>	<b>Blue Care HMO 060</b>
Employee	\$823.04	\$461.14	\$662.54	\$613.60
Employee and spouse	\$1,710.60	\$958.36	\$1,377.97	\$1,276.26
Employee and children	\$1,555.10	\$871.27	\$1,253.12	\$1,160.54
Employee and family	\$2,384.16	\$1,335.75	\$1,920.53	\$1,778.72