

### 2024 Cobra Rates - Dental & Vision

<b>DHMO- Deltacare</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	20.42	0.41	20.83
Two-Party	38.09	0.76	38.85
Family (two or more dependents)	57.13	1.14	58.27

<b>Delta DPO Basic</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	40.77	0.82	41.59
Two-Party	77.29	1.55	78.84
Family (two or more dependents)	117.12	2.34	119.46

<b>Delta DPO Buy-Up</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	48.90	0.98	49.88
Two-Party	86.88	1.74	88.62
Family (two or more dependents)	131.59	2.63	134.22

<b>Executive Dental</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
<b>Single</b>	71.75	1.44	73.19
<b>Two-Party</b>	139.90	2.80	142.70
<b>Family (two or more dependents)</b>	231.13	4.62	235.75

<b>Executive Dental Buy-Up</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	75.51	1.51	77.02
Two-Party	146.69	2.93	149.62
Family (two or more dependents)	239.12	4.78	243.90

<b>VSP Basic</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	5.51	0.11	5.62
Two-Party	9.60	0.19	9.79
Family (two or more dependents)	17.24	0.34	17.58

<b>VSP Buy-Up</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	10.27	0.21	10.48
Two-Party	17.86	0.36	18.22
Family (two or more dependents)	32.03	0.64	32.67

<b>Executive VSP</b>	Premium Subtotal	Cobra Fee 2%	Premium Total
Single	19.15	0.38	19.53