



2024 Monthly Active & COBRA Rates - Medical

Plan	Coverage Tier	Subsidized Rate	Unsubsidized Rate
CDHP	Single	\$58.72	\$718.51
	Single + Spouse or DP	\$268.07	\$1,511.27
	Single + Child(ren)	\$169.30	\$1,359.40
	Spouse or DP Only	\$209.35	\$792.76
	Spouse or DP + Child(ren)	\$321.31	\$1,511.27
	Child(ren) Only	\$110.58	\$640.89
	Single + Spouse or DP + Child(ren)	\$380.03	\$2,270.61
Basic	Single	\$58.72	\$762.59
	Single + Spouse or DP	\$268.07	\$1,599.58
	Single + Child(ren)	\$169.30	\$1,447.40
	Spouse or DP Only	\$209.35	\$836.99
	Spouse or DP + Child(ren)	\$321.31	\$1,599.58
	Child(ren) Only	\$110.58	\$684.81
	Single + Spouse or DP + Child(ren)	\$380.03	\$2,360.50
Enhanced	Single	\$138.22	\$843.68
	Single + Spouse or DP	\$435.02	\$1,769.88
	Single + Child(ren)	\$320.36	\$1,601.49
	Spouse or DP Only	\$296.80	\$926.20
	Spouse or DP + Child(ren)	\$488.25	\$1,769.88
	Child(ren) Only	\$182.14	\$757.81
	Single + Spouse or DP + Child(ren)	\$626.47	\$2,611.89

2024 Monthly Active & COBRA Rates - Dental

Plan	Coverage Tier	Subsidized Rate	Unsubsidized Rate
Basic	Single	\$15.05	\$34.70
	Single + Spouse or DP	\$31.61	\$72.86
	Single + Child(ren)	\$28.60	\$65.92
	Spouse or DP Only	\$16.56	\$38.17
	Spouse or DP + Child(ren)	\$31.61	\$72.86
	Child(ren) Only	\$13.55	\$31.23
	Single + Spouse or DP + Child(ren)	\$46.66	\$107.56
Enhanced	Single	\$22.67	\$42.25
	Single + Spouse or DP	\$47.61	\$88.72
	Single + Child(ren)	\$43.08	\$80.27
	Spouse or DP Only	\$24.94	\$46.47
	Spouse or DP + Child(ren)	\$47.61	\$88.72
	Child(ren) Only	\$20.41	\$38.02
	Single + Spouse or DP + Child(ren)	\$70.28	\$130.97

2024 Monthly Active & COBRA Rates - Vision

Plan	Coverage Tier	Subsidized Rate	Unsubsidized Rate
Vision	Single	\$3.07	\$5.78
	Single + Spouse or DP	\$6.17	\$11.64
	Single + Child(ren)	\$7.43	\$14.03
	Spouse or DP Only	\$3.10	\$5.85
	Spouse or DP + Child(ren)	\$7.97	\$15.05
	Child(ren) Only	\$4.36	\$8.24
	Single + Spouse or DP + Child(ren)	\$11.04	\$20.83