

COBRA RATES INCLUDE 2%

Medical Plan Only

Tier	Keystone HMO 15 Local 634	<u>PFT</u> Keystone HMO 20	<u>PFT</u> Personal Choice 25/35/50
Employee Only	\$565.55	\$559.50	\$654.14
Employee and Child	\$791.76	\$783.30	\$915.80
Employee and Children	\$1,017.97	\$1,007.10	\$1,177.46
Employee and Spouse/Life Partner	\$1,131.08	\$1,118.99	\$1,308.28
Employee and Family	\$1,696.63	\$1,678.50	\$1,962.42

Medical Bundle with Rx and Vision

Tier	SPAP Keystone HMO 20 includes RX & VIS	SPAP Personal Choice 25/35/50 includes RX & VIS
Employee Only	\$702.51	\$797.15
Employee and Child	\$1,155.13	\$1,287.63
Employee and Children	\$1,378.93	\$1,549.29
Employee and Spouse/Life Partner	\$1,490.82	\$1,680.11
Employee and Family	\$2,050.33	\$2,334.25

Tier	SPAP Keystone HMO 20 with Rx and Vision	<u>SPAP</u> Personal Choice 25/35/50 with Rx and Vision	Modified Personal Choice 320 CASA, Non Rep with Rx and vision	Personal Choice 20/30/70 CASA, Non Rep with rx and vision
Employee Only	\$702.51	\$797.15	\$706.41	\$810.70
Employee and Child	\$1,155.13	\$1,287.63	\$1,160.58	\$1,306.60
Employee and Children	\$1,378.93	\$1,549.29	\$1,385.93	\$1,573.69
Employee and Spouse/Life Partner	\$1,490.82	\$1,680.11	\$1,498.61	\$1,707.22
Employee and Family	\$2,050.33	\$2,334.25	\$2,061.99	\$2,374.91

Ancillary Coverage

Tier	Rx and Vision	N/A Rx and Vision	Dental
Employee Only	\$143.01	Contact PFT	\$37.58
Employee and Child	\$371.83	Contact PFT	\$67.63
Employee and Children	\$371.83	Contact PFT	\$85.21
Employee and Spouse/Life Partner	\$371.83	Contact PFT	\$67.63
Employee and Family	\$371.83	Contact PFT	\$85.21