HEALTH PLAN CONTRIBUTION RATES			
COBRA			
Effective January 1, 2015			
	EE ONLY	<u>EE+1</u>	FAMILY
Blue Shield PPO \$1300 ABHP	\$825.69	\$1,488.38	\$2,069.45
Delta Dental PPO+Premier	\$54.28	\$97.71	\$135.71
VSP Choice	\$5.28	\$10.56	\$17.00
EDC Admin Fee	\$14.88	\$29.76	\$44.63
2% COBRA Admin Fee	\$18.00	\$32.53	\$45.34
Total	\$918.13	\$1,658.94	\$2.312.13
	,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i><i><i><i></i></i></i></i>	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>
	<u>EE ONLY</u>	<u>EE+1</u>	FAMILY
Blue Shield PPO \$200	\$1,074.69	\$1,936.38	\$2,691.45
Delta Dental PPO+Premier	\$54.28	\$97.71	\$135.71
VSP Choice	\$5.28	\$10.56	\$17.00
EDC Admin Fee	\$14.88	\$29.76	\$44.63
2% COBRA Admin Fee	\$22.98	\$41.49	\$57.78
Total	\$1,172.11	\$2,115.90	\$2,946.57
	<i>Ş1,172.11</i>	<i>Ş</i> 2,113.30	<i>72,3</i> 40.37
	EE ONLY	<u>EE+1</u>	FAMILY
Kaiser HMO	\$610.60	\$1,221.21	\$1,728.01
Delta Dental PPO+Premier	\$54.28	\$97.71	\$135.71
VSP Choice	\$5.28	\$10.56	\$17.00
EDC Admin Fee	\$14.88	\$29.76	\$44.63
2% COBRA Admin Fee	\$13.70	\$27.18	\$38.51
Total	\$698.74	\$1,386.42	\$1,963.86
	3030.74	31,300.4 2	\$1,905.80
	EE ONLY	<u>EE+1</u>	FAMILY
Kaiser HMO \$1300 ABHP	\$483.53		\$1,368.40
Delta Dental PPO+Premier	, \$54.28		\$135.71
VSP Choice	\$5.28	\$10.56	\$17.00
EDC Admin Fee	\$14.88	\$29.76	\$44.63
2% COBRA Admin Fee	\$11.16	\$22.10	\$31.31
T - 4 - 1	6FC0 40	64 407 00	64 505 05
Total	\$569.13	\$1,127.20	\$1,597.05
	EE ONLY	<u>EE+1</u>	FAMILY
United Healthcare HMO	\$867.61		
Delta Dental PPO+Premier	\$54.28		\$135.71
VSP Choice	\$5.28		\$17.00
EDC Admin Fee	\$14.88		\$44.63
2% COBRA Admin Fee	\$18.84	\$38.33	\$54.27
			
Total	\$960.89	\$1,954.83	\$2,767.55