

XL America, Inc. 2019 Monthly Cobra Rates

Medical:

Cigna	CIGNA OAP Plan / OAP RX <i>(CNOAA18)</i>	Cigna OAP High Deductible 1 / HDHP1 RX <i>(CNOAB18)</i>	Cigna High Deductible 2 / HDHP2 RX <i>(CNOAC18)</i>
	<input type="checkbox"/> Single \$667.21	<input type="checkbox"/> Single \$541.95	<input type="checkbox"/> Single \$507.63
	<input type="checkbox"/> Single + Child \$1,167.73	<input type="checkbox"/> Single + Child \$934.12	<input type="checkbox"/> Single + Child \$876.90
	<input type="checkbox"/> Single + Child(ren) \$1,167.73	<input type="checkbox"/> Single + Child(ren) \$934.12	<input type="checkbox"/> Single + Child(ren) \$876.90
	<input type="checkbox"/> Single + Spouse \$1,334.54	<input type="checkbox"/> Single + Spouse \$1,083.89	<input type="checkbox"/> Single + Spouse \$1,015.24
	<input type="checkbox"/> Family \$2,335.43	<input type="checkbox"/> Family \$1,982.54	<input type="checkbox"/> Family \$1,845.25

Dental:

Delta	Delta Basic Dental Plan <i>(DO1B)</i>	Delta Premium Dental Plan <i>(DO1C)</i>
	<input type="checkbox"/> Single \$46.07	<input type="checkbox"/> Single \$52.51
	<input type="checkbox"/> Single + Child \$85.22	<input type="checkbox"/> Single + Child \$101.41
	<input type="checkbox"/> Single + Child(ren) \$85.22	<input type="checkbox"/> Single + Child(ren) \$101.41
	<input type="checkbox"/> Single + Spouse \$80.61	<input type="checkbox"/> Single + Spouse \$91.90
	<input type="checkbox"/> Family \$127.12	<input type="checkbox"/> Family \$151.28

Vision:

VSP	BASIC <i>(BASIC)</i>	PREMIUM <i>(PREMIUM)</i>
	<input type="checkbox"/> Single \$7.05	<input type="checkbox"/> Single \$12.53
	<input type="checkbox"/> Single + Child \$11.71	<input type="checkbox"/> Single + Child \$20.81
	<input type="checkbox"/> Single + Child(ren) \$11.71	<input type="checkbox"/> Single + Child(ren) \$20.81
	<input type="checkbox"/> Single + Spouse \$10.93	<input type="checkbox"/> Single + Spouse \$19.43
	<input type="checkbox"/> Family \$18.71	<input type="checkbox"/> Family \$33.24