

## Pennsbury School District

### COBRA CONTINUATION OF COVERAGE RATES – July 1, 2023- to June 30, 2024 Monthly Coverage Cost

|   | Single   | Employee/<br>Spouse | P/Child  | P/Children | Family     |
|---|----------|---------------------|----------|------------|------------|
| <b>PPO 20/40</b>                        | \$517.00 | \$1,193.25          | \$799.89 | \$1,127.94 | \$1,535.61 |
| <b>PPO 10/20</b>                        | \$547.18 | \$1,262.73          | \$845.85 | \$1,193.60 | \$1,624.44 |
| <b>PPO 20/20 (Cert./Admin/FLS only)</b> | \$546.23 | \$1,260.51          | \$844.20 | \$1,191.51 | \$1,621.44 |
| <b>QPOS 30/40</b>                       | \$442.38 | \$1,021.53          | \$686.92 | \$965.61   | \$1,316.59 |
| <b>RX 15/30/50</b>                      | \$132.64 | \$305.19            | \$200.63 | \$288.43   | \$389.16   |
| <b>UCCI Dental Flex Plan (PPO)</b>      | \$23.02  | \$63.30             | \$63.30  | \$63.30    | \$63.30    |
| <b>UCCI Dental Plus Plan (DHMO)</b>     | \$18.56  | \$53.42             | \$53.42  | \$53.42    | \$53.42    |
| <b>Delta Dental Premier Plan</b>        | \$31.92  | \$84.56             | \$84.56  | \$84.56    | \$84.56    |
|   |          |                     |          |            |            |
| <b>Total Monthly Cost:</b>              | \$       | \$                  | \$       | \$         | \$         |
|   |          |                     |          |            |            |