

MONTHLY COBRA INSURANCE RATES Effective January 1, 2023 – December 31, 2023

	Individual	Parent+1 Child	Employee/Spouse	Family
<u>DENTAL</u>	\$39.45	\$64.24	\$85.62	\$118.28
VISION PLANS:				
BASIC (only available to a grandfathered group of employees)	\$1.65	\$3.30	\$3.37	\$4.88
VOLUNTARY	\$4.67	\$9.34	\$9.51	\$13.78
EMPLOYEE ASSISTANCE PLAN:	\$0.97	\$0.97	\$0.97	\$0.97

HEALTH CARE FLEXIBLE: SPENDING ACCOUNT

If you contributed to a Health Care Flexible Spending Account, you may elect to continue benefits under specific circumstances; however, there is no tax benefit to you, your spouse or your dependents. If you are interested, please contact Stephanie Rauen for more information.

Premiums are billed for Carroll County Public Schools by Jasper & Company. Once elections under COBRA are made, you will receive a separate billing statement from Jasper & Company.