

# DARTMOUTH COLLEGE

## COBRA PARTICIPANT RATES 2025

### MEDICAL INSURANCE

MONTHLY	SINGLE	PARENT + CHILD(REN)	EMPLOYEE + SPOUSE	FAMILY
Cigna Open Access Plus Plan \$600 Deductible Plan	\$1,045.14	\$1,776.74	\$2,299.33	\$3,135.43
Cigna Choice Fund Plan \$1,600 Deductible Plan	\$971.98	\$1,652.15	\$2,138.20	\$2,915.66
Cigna High Deductible Health Plan \$3,200 Deductible Plan	\$865.40	\$1,471.25	\$1,903.97	\$2,596.25

### DENTAL INSURANCE

MONTHLY	SINGLE	TWO PERSON	FAMILY
Delta Dental - Low Plan	\$36.64	\$65.22	\$112.13
Delta Dental - High Plan	\$67.49	\$120.14	\$206.53

### VISION INSURANCE

MONTHLY	SINGLE	PARENT + CHILD(REN)	EMPLOYEE + SPOUSE	FAMILY
VSP Vision Plan	\$9.66	\$19.32	\$18.35	\$28.39

### FLEXIBLE SPENDING

Health Care Flexible Spending Account benefits are also available through COBRA