



Lynden Health Plan COBRA Rates

for Lynden Incorporated & Participating Companies

Plan year: **January 1st to December 31st, 2024**

Aetna PPO COBRA Medical Rates – Monthly

Who's on the plan	Cost
Employee Only	\$890.48
Employee & Spouse	\$1,783.57
Employee & 1 Child	\$1,374.23
Employee & Children	\$1,619.83
Employee & Family	\$2,438.49
Spouse Only	\$890.48
Child Only	\$890.48
Spouse & Child	\$1,374.23
Spouse & Children	\$1,619.83

Aetna HDHP COBRA Medical Rates – Monthly

Who's on the plan	Cost
Employee Only	\$790.99
Employee & Spouse	\$1,584.30
Employee & 1 Child	\$1,220.69
Employee & Children	\$1,438.85
Employee & Family	\$2,166.05
Spouse Only	\$790.99
Child Only	\$790.99
Spouse & Child	\$1,220.69
Spouse & Children	\$1,438.85

Dental COBRA Rates – Monthly

Who's on the plan	Cost
Employee Only	\$55.89
Employee & Spouse	\$93.91
Employee & 1 Child	\$81.09
Employee & Children	\$112.34
Employee & Family	\$147.36
Spouse Only	\$38.03
Child Only	\$25.20
Spouse & Child	\$91.47
Spouse & Children	\$91.47

Vision COBRA Rates – Monthly

Who's on the plan	Cost
Employee Only	\$6.29
Employee & Spouse	\$10.89
Employee & 1 Child	\$9.46
Employee & Children	\$11.54
Employee & Family	\$17.41
Spouse Only	\$6.29
Child Only	\$6.29
Spouse & Child	\$9.46
Spouse & Children	\$11.54

Employee Assistance Program COBRA Rates – Monthly

Who's on the plan	Cost
Employee & Family	\$1.60

If you have specific questions, please contact Gallagher Benefit Services at (833) 580-5862