



## Lynden Hawaii Health Plan COBRA Rates

for Lynden Incorporated & Participating Companies

Plan year: **January 1<sup>st</sup> to December 31<sup>st</sup>, 2024**

### Kaiser COBRA Medical Rates – Monthly

Who's on the plan	Cost
Employee Only	\$668.79
Employee & Spouse	\$1,471.35
Employee & 1 Child	\$1,103.51
Employee & Children	\$1,324.22
Employee & Family	\$2,059.88
Spouse Only	\$668.79
Child Only	\$668.79
Spouse & Child	\$1,103.51
Spouse & Children	\$1,324.22

### 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