LANL Non-Medicare COBRA 2015 Monthly Rates

Plan	Employee Only	Employee+ Child(ren)	Employee + Adult	Family
PPO	670.14	1,206.66	1,407.60	1,939.02
HDHP	635.46	1,144.44	1,336.20	1,839.06
Dental	43.97	82.07	89.55	146.53
Vision	10.74	21.71	21.49	26.87
Legal	12.34	16.56	16.56	17.99