2008 COBRA Plan Rates		
Plan Name	Tier	Monthly Price
08 BC/BS CORE NM	Employee + Spouse	\$385.87
	Employee + Child(ren)	\$330.91
	Spouse + Child(ren)	\$385.87
	Family	\$532.03
	Employee Only	\$183.58
	Spouse Only	\$183.58
	Child Only	\$183.58
	Children Only	\$385.87
08 Definity Plan (iPlan)	Employee + Spouse	\$884.44
	Employee + Child(ren)	\$758.08
	Spouse + Child(ren)	\$758.08
	Family	\$1,221.36
	Employee Only	\$421.16
	Spouse Only	\$421.16
	Child Only	\$421.16
	Children Only	\$758.08
08 LANL COBRA EPO Plan  08 LANL COBRA Options PPO National Plan	Employee + Spouse	\$896.72
	Employee + Child(ren)	\$768.61
	Spouse + Child(ren)	\$768.61
	Family	\$1,238.32
	Employee Only	\$427.01
	Spouse Only	\$427.01
	Child Only	\$427.01
	Children Only	\$768.61
	Employee + Spouse	\$865.00
	Employee + Spouse  Employee + Child(ren)	\$741.42
	Spouse + Child(ren)	\$741.42
	Family	\$1,194.51
	Employee Only	\$412.20 \$412.20
	Spouse Only	\$412.20
	Child Only	\$412.20 \$741.42
08 LANL COBRA Options PPO New Mexico	Children Only	
	Employee + Spouse	\$1,129.01
	Employee + Child(ren)	\$967.72
	Spouse + Child(ren)	\$967.72
	Family	\$1,559.10
	Employee Only	\$537.62
	Spouse Only	\$537.62
	Child Only	\$537.62
	Children Only	\$967.72
08 LANL COBRA Delta Dental Premier/Preferred	Employee + Spouse	\$67.18
	Employee + Child(ren)	\$72.98
	Spouse + Child(ren)	\$72.98
	Family	\$119.21
	Employee Only	\$35.98
	Spouse Only	\$35.98
	Child Only	\$35.98
	Children Only	\$67.18
08 LANL COBRA VSP Vision Plan	Employee + Spouse	\$13.47
	Employee + Child(ren)	\$13.47
	Spouse + Child(ren)	\$13.47
	Family	\$13.47
	Employee Only	\$13.47
	Spouse Only	\$13.47
	Child Only	\$13.47
	Children Only	\$13.47

Contact Information: UHC-COBRA Direct Bill PO Box 224708 Dallas, TX 75222-4708 1-866-747-0048