

## 2025 COBRA Rates

Medical Plans	
Cigna PPO Premium	Monthly Premium (includes 2% administration fee)
Employee	\$1,057.90
Employee + Spouse	\$2,115.27
Employee + Child(ren)	\$1,902.65
Family	\$3,171.52
Cigna EPO Base	
Employee	\$894.48
Employee + Spouse	\$1,788.56
Employee + Child(ren)	\$1,608.82
Family	\$2,681.64
Cigna HDHP Plus with HSA	
Employee	\$713.70
Employee + Spouse	\$1,424.26
Employee + Child(ren)	\$1,281.23
Family	\$2,133.89
Kaiser HMO	
Employee	\$676.13
Employee + Spouse	\$1,419.87
Employee + Child(ren)	\$1,183.22
Family	\$2,062.20



Medical Plans (Limited Abortion)		
Cigna PPO Premium	Monthly Premium (includes 2% administration fee)	
Employee	\$1,052.78	
Employee + Spouse	\$2,105.08	
Employee + Child(ren)	\$1,893.47	
Family	\$3,156.21	
Cigna EPO Base		
Employee	\$889.75	
Employee + Spouse	\$1,779.09	
Employee + Child(ren)	\$1,600.30	
Family	\$2,667.19	
Cigna HDHP Plus with HSA		
Employee	\$710.29	
Employee + Spouse	\$1,417.46	
Employee + Child(ren)	\$1,275.12	
Family	\$2,123.68	

\*\*These rates apply to Sprinklrites enrolled in the Limited Abortion plan offerings (in TX, OK, or MO)



Dental Plans		
Dental PPO Plan	Monthly Premium (includes 2% administration fee)	
Employee	\$42.79	
Employee + Spouse	\$83.96	
Employee + Child(ren)	\$107.56	
Family	\$162.62	
Dental PPO Plus Plan		
Employee	\$47.69	
Employee + Spouse	\$94.53	
Employee + Child(ren)	\$121.37	
Family	\$184.01	

Vision Plans	
VSP Vision Plan	Monthly Premium (includes 2% administration fee)
Employee	\$4.51
Employee + Spouse	\$7.21
Employee + Child(ren)	\$7.87
Family	\$11.88
VSP Vision Plus Plan	
Employee	\$12.99
Employee + Spouse	\$20.80
Employee + Child(ren)	\$21.25
Family	\$34.27