

**CITY OF AURORA  
GROUP HEALTH/DENTAL PREMIUMS  
C.O.B.R.A.  
2023**

**HEALTH PLAN**

**CITY OF AURORA  
COMPREHENSIVE HEALTH PLANS OR  
HMO ILLINOIS**

**C.O.B.R.A. Monthly Premiums**

	<b>OAP</b>	<b>VALUE HSA</b>	<b>HMO</b>
Single	\$ 866.44	\$ 509.59	\$ 728.37
Employee + Child(ren)	\$1,732.94	\$1,019.20	\$1,376.91
Employee + Spouse	\$2,166.14	\$1,274.06	\$1,434.82
Family	\$3,032.62	\$1,783.60	\$2,130.34

**DENTAL PLAN**

**C.O.B.R.A. Monthly Premiums**

Single	\$ 41.20
Employee + 1	\$ 83.76
Family	\$111.03