

**CITY OF AURORA
GROUP HEALTH/DENTAL PREMIUMS
C.O.B.R.A.
2017**

HEALTH PLAN

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

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

	OAP	HDHP	HMO
Single	\$ 799.65	\$ 509.59	\$ 625.79
Employee + Child(ren)	\$1,599.37	\$1,019.20	\$1,183.00
Employee + Spouse	\$1,999.19	\$1,274.06	\$1,232.75
Family	\$2,798.88	\$1,783.60	\$1,830.33

DENTAL PLAN

CITY OF AURORA

**C.O.B.R.A. Monthly Premiums
2017**

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