

Southern Methodist University

2009 COBRA Premiums

Medical & Dental COBRA Plans	Your Monthly Premium
\$500 Deductible PPO Plan Individual Two Person Family	 \$ 388.04 \$ 853.69 \$1,241.73
\$1,000 Deductible PPO Plan Individual Two Person Family	 \$ 354.85 \$ 780.67 \$1,135.52
\$2,000 Deductible PPO Plan Individual Two Person Family	 \$287.45 \$632.38 \$919.83
\$2,500 Deductible PPO Plan Individual Two Person Family	 \$262.29 \$577.05 \$839.35
Aetna H M O Plan Individual Two Person Family	 \$ 577.19 \$1,316.01 \$1,766.21
Dental PPO Plan Individual Two Person Family	 \$ 38.94 \$ 76.12 \$105.15