



BENEFITS



2012 MONTHLY COBRA RATES

	Associate	Associate + Child(ren)	Associate + Spouse	Family
<u>Care Options</u>				
HSA Option 1	\$542.64	\$980.22	\$1,133.22	\$1,434.12
HSA Option 2	\$582.42	\$1,053.66	\$1,218.90	\$1,542.24
Out of Area HSA	\$657.90	\$1,194.42	\$1,402.50	\$1,775.82
Hawaii	\$670.14	\$1,180.14	\$1,360.68	\$1,776.84
OurClinics@CNO		\$49.62 for all levels of coverage (1)		
	Associate	Associate + Child(ren)	Associate + Spouse	Family
<u>Dental</u>				
CIGNA DHMO	\$22.54	\$40.84	\$36.76	\$62.63
Delta PPO	\$19.73	\$49.37	\$39.19	\$82.62
Delta Passive PPO	\$36.45	\$81.66	\$69.16	\$133.31
<u>Vision</u>	\$6.08	\$13.04	\$12.18	\$20.81
<u>EAP</u>	\$2.02			

(1) If you elect HSA Option 1 or HSA Option 2, you will automatically receive continuation coverage under the OurClinics@CNO plan without paying additional premium.