Wright State University COBRA Rates for 2024

Premiums are presented as Monthly amounts.

Anthem – BLUE HPN	
Individual	\$616
Individual + Child(ren)	\$1,110
Individual + Spouse	\$1,357
Individual + Family	\$1,850

Anthem – HDHP	
Individual	\$634
Individual + Child(ren)	\$1,142
Individual + Spouse	\$1,395
Individual + Family	\$1,903

Anthem - PPO 80/20		
Individual	\$726	
Individual + Child(ren)	\$1,306	
Individual + Spouse	\$1,597	
Individual + Family	\$2,177	

Delta Dental	
Individual	\$36
Individual + Child(ren)	\$65
Individual + Spouse	\$80
Individual + Family	\$109

Vision Service Plan		
Individual	\$8	
Individual + Child(ren)	\$14	
Individual + Spouse	\$17	
Individual + Family	\$23	