

Hourly Health Care**2024 APTIV COBRA Premiums
Monthly Cost**

	You Only	You and Spouse	You and Child(ren)	You and Family
Medical				
Basic Plan	\$ 793.68	\$ 1,587.39	\$ 1,428.17	\$ 2,221.87
National Medical Value Plan - Brookhaven (NMVP-B)	\$ 859.92	\$ 1,719.86	\$ 1,547.86	\$ 2,407.79
National Medical Value Plan - Warren (NMVP)	\$ 859.92	\$ 1,719.86	\$ 1,547.86	\$ 2,407.79
Dental				
Traditional Dental Plan (TRAD) - Brookhaven	\$ 28.02	\$ 56.06	\$ 75.47	\$ 112.11
Traditional Dental Plan (TRAD) - Warren	\$ 28.02	\$ 56.06	\$ 75.47	\$ 112.11
Vision				
Vision Plan	\$ 3.98	\$ 7.56	\$ 7.96	\$ 11.70