

2018 Monthly COBRA Contributions

(Former Marathon Oil employees and dependents eligible to elect COBRA coverage)

Option	Member Only	Member & Spouse	Member & Child(ren)	Member & Family
CIGNA Dental PPO	\$ 39.98	\$ 79.96	\$ 86.77	\$ 136.75
HIP Value Option*	\$ 618.79	\$1,361.86	\$1,237.58	\$1,857.68
HIP Plus Option*	\$ 588.49	\$1,295.18	\$1,176.98	\$1,766.71
Vision	\$ 6.00	\$ 10.21	\$ 10.79	\$ 16.21

* If you live in an area with no access to in-network providers, you will be eligible for the Out-of-Area Option. These COBRA rates reflect the Out-of-Area Option if it applies to you.