# Benefits & Payroll



### MONTHLY RATES FOR THE 2017-18 PLAN YEAR

#### **COBRA Rates**

Medical Plans	CU Health Plan - Extended		CU Health Plan - Exclusive		CU Health Plan - High Deductible		CU Health Plan - Kaiser	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability
Employee Only	\$618.12	\$909.00	\$583.95	\$858.75	\$543.66	\$799.50	\$646.68	\$951.00
Employee + Spouse	\$1,241.85	\$1,826.25	\$1,184.22	\$1,741.50	\$1,031.22	\$1,516.50	\$1,297.95	\$1,908.75
Employee + Child(ren)	\$1,121.49	\$1,649.25	\$1,075.08	\$1,581.00	\$987.87	\$1,452.75	\$1,152.09	\$1,694.25
Family	\$1,761.03	\$2,589.75	\$1,683.51	\$2,475.75	\$1,483.08	\$2,181.00	\$1,824.27	\$2,682.75

Dental Plans	CU Health Plan - Essential Dental		CU Health Plan	- Choice Dental	CU Health Plan - Dental Premier		
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	
Employee Only	\$27.03	\$39.75	\$43.35	\$63.75	\$46.75	\$68.75	
Employee + Spouse	\$54.06	\$79.50	\$86.70	\$127.50	\$83.00	\$122.06	
Employee + Child(ren)	\$59.16	\$87.00	\$94.86	\$139.50	\$91.21	\$134.13	
Family	\$86.19	\$126.75	\$138.21	\$203.25	\$126.91	\$186.63	



# Benefits & Payroll



### MONTHLY RATES FOR THE 2017-18 PLAN YEAR

#### **COBRA Rates**

Vision Plans	CU Health Plan - Vision			
	COBRA Rate	COBRA Disability		
Employee Only	\$6.30	\$9.27		
Employee + Spouse	\$11.02	\$16.20		
Employee + Child(ren)	\$11.95	\$17.58		
Family	\$18.26	\$26.85		



