

MONTHLY RATES FOR THE 2025-26 PLAN YEAR COBRA Rates

Medical Plans	CU Health Plan — Exclusive		CU Health Plan — Pathway		CU Healt High De	h Plan — ductible	CU Health Plan — Kaiser	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability
Employee only	\$863.43	\$1,269.75	\$962.37	\$1,415.25	\$781.32	\$1,149.00	\$1089.36	\$1,602.00
Employee + Spouse	\$1,781.43	\$2,619.75	\$2,018.58	\$2,968.50	\$1,569.78	\$2,308.50	\$2,258.28	\$3,321.00
Employee + Child(ren)	\$1,645.26	\$2,419.50	\$1,828.86	\$2,689.50	\$1,518.27	\$2,232.75	\$2,051.73	\$3,017.25
Family	\$2,622.42	\$3,856.50	\$2,937.60	\$4,320.00	\$2,367.42	\$3,481.50	\$3,272.67	\$4,812.75

Dental Plans	CU Health Plan — Essential Dental		CU Health Plan — Choice Dental		Vision Plan	CU Health Plan — Vision	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability		COBRA Rate	COBRA Disability
Employee Only	\$32.64	\$48.00	\$57.12	\$84.00	Employee Only	\$7.34	\$10.80
Employee + Spouse	\$65.28	\$96.00	\$114.24	\$168.00	Employee + Spouse	\$12.85	\$18.90
Employee + Child(ren)	\$70.38	\$103.50	\$123.42	\$181.50	Employee + Child(ren)	\$13.87	\$20.40
Family	\$102.51	\$150.75	\$180.03	\$264.75	Family	\$21.22	\$31.20



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