



MONTHLY RATES FOR THE 2026-27 PLAN YEAR

COBRA Rates

Medical Plans	CU Health Plan — Exclusive		CU Health Plan — Pathway		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	\$1,019.49	\$1,499.25	\$968.49	\$1,424.25	\$882.81	\$1,298.25	\$1,200.54	\$1,765.50
Employee + Spouse	\$2,071.62	\$3,046.50	\$1,977.78	\$2,908.50	\$1,781.94	\$2,620.50	\$2,487.78	\$3,658.50
Employee + Child(ren)	\$1,977.27	\$2,907.75	\$1,920.15	\$2,823.75	\$1,723.29	\$2,534.25	\$2,288.37	\$3,365.25
Family	\$3,114.57	\$4,580.25	\$3,020.22	\$4,441.50	\$2,707.08	\$3,981.00	\$3,661.29	\$5,384.25

Dental Plans	CU Health Plan — Essential Dental		CU Health Plan — Choice Dental	
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability
Employee Only	\$33.66	\$49.50	\$59.16	\$87.00
Employee + Spouse	\$67.32	\$99.00	\$118.32	\$174.00
Employee + Child(ren)	\$72.42	\$106.50	\$128.01	\$188.25
Family	\$105.57	\$155.25	\$186.66	\$274.50

Vision Plan	CU Health Plan — Vision	
	COBRA Rate	COBRA Disability
Employee Only	\$7.45	\$10.95
Employee + Spouse	\$13.06	\$19.20
Employee + Child(ren)	\$14.08	\$20.70
Family	\$21.52	\$31.65

