



## MONTHLY RATES FOR THE 2018-19 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	\$29.07	\$42.75	\$46.41	\$68.25	\$46.75	\$68.75
Employee + Spouse	\$58.14	\$85.50	\$92.82	\$136.50	\$83.00	\$122.06
Employee + Child(ren)	\$62.73	\$92.25	\$100.47	\$147.75	\$91.21	\$134.13
Family	\$91.29	\$134.25	\$146.37	\$215.25	\$126.91	\$186.63





## MONTHLY RATES FOR THE 2018-19 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

