

2025 COBRA Rates

MEDICAL	RED PLAN			BLUE PLAN			WHITE PLAN		
	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST
Employee Only	\$964.61	\$19.29	\$983.90	\$810.67	\$16.21	\$826.88	\$648.55	\$12.97	\$661.52
Employee + Spouse	\$1,610.80	\$32.22	\$1,643.02	\$1,353.76	\$27.08	\$1,380.84	\$1,083.02	\$21.66	\$1,104.68
Employee + Chil(ren)	\$1,427.48	\$28.55	\$1,456.03	\$1,199.67	\$23.99	\$1,223.66	\$959.77	\$19.20	\$978.97
Employee + Family	\$2,343.79	\$46.88	\$2,390.67	\$1,969.81	\$39.40	\$2,009.21	\$1,575.87	\$31.52	\$1,607.39

DENTAL	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST
EE Only	\$51.00	\$1.02	\$52.02
EE + 1	\$83.00	\$1.66	\$84.66
EE + 2 or more	\$135.00	\$2.70	\$137.70

VISION	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST
EE Only	\$10.89	\$0.22	\$11.11
Family	\$23.64	\$0.47	\$24.11

EAP	Monthly Premium	Additional 2% Fee	TOTAL COBRA COST
EE	\$2.38	\$0.05	\$2.43