

## COBRA 2015-16 Rates (Monthly)

Prescription and behavioral health coverage is provided as part of your enrollment in a County-sponsored medical plan. When you elect medical coverage, you are automatically enrolled in prescription and behavioral health coverage. There is one combined rate for all three plans.

### 2015-16 Combined Medical, Prescription, Behavioral Health COBRA

Plan	Tier	Monthly Total Premium Non-Smoker	Monthly Total Premium Smoker
Cigna HMO	Beneficiary	567.30	587.70
	Beneficiary + Spouse	1148.11	1168.51
	Beneficiary + Child(ren)	935.48	955.88
	Beneficiary + Family	1518.74	1539.14
UnitedHealthcare PPO	Beneficiary	590.48	610.88
	Beneficiary + Spouse	1219.33	1239.73
	Beneficiary + Child(ren)	999.76	1020.16
	Beneficiary + Family	1620.74	1641.14
UnitedHealthcare HDHP	Beneficiary	509.68	530.08
	Beneficiary + Spouse	997.75	1018.15
	Beneficiary + Child(ren)	805.48	825.88
	Beneficiary + Family	1339.21	1359.61

## 2015-16 Vision Rates COBRA

Plan	Tier	Monthly Total Premium
Avesis	Beneficiary	6.94
	Beneficiary + Spouse	13.28
	Beneficiary + Child(ren)	13.44
	Beneficiary + Family	20.22

## 2015-16 Dental Rates COBRA

Plan	Tier	Monthly Total Premium
Cigna Prepaid (DHMO)	Beneficiary	8.16
	Beneficiary + Spouse	13.77
	Beneficiary + Child(ren)	19.11
	Beneficiary + Family	22.48
Cigna (PPO)	Beneficiary	33.35
	Beneficiary + Spouse	73.48
	Beneficiary + Child(ren)	79.50
	Beneficiary + Family	102.06
Delta (PPO)	Beneficiary	41.82
	Beneficiary + Spouse	92.17
	Beneficiary + Child(ren)	99.69
	Beneficiary + Family	128.17

## 2015-16 Other Services COBRA

Other Services	Monthly Total Premium
Employee Assistance Program (EAP)	2.63