

## MONTHLY RATES FOR THE 2025-26 PLAN YEAR COBRA Rates

Medical Plans	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
Employee Only	\$851.09	\$1,251.60	\$768.98	\$1,130.85	\$1,077.02	\$1,583.85
Employee + Spouse	\$1,769.09	\$2,601.60	\$1,557.44	\$2,290.35	\$2,245.94	\$3,302.85
Employee + Child(ren)	\$1,632.92	\$2,401.35	\$1,505.93	\$2,214.60	\$2,039.39	\$2,999.10
Family	\$2,610.08	\$3,838.35	\$2,355.08	\$3,463.35	\$3,260.33	\$4,794.60

Dental Plans	CU Health Plan	- Essential Dental	CU Health Plan - Choice Dental		
	COBRA Rate	COBRA Disability	COBRA Rate	COBRA Disability	
Employee Only	\$32.64	\$48.00	\$57.12	\$84.00	
Employee + Spouse	\$65.28	\$96.00	\$114.24	\$168.00	
Employee + Child(ren)	\$70.38	\$103.50	\$123.42	\$181.50	
Family	\$102.51	\$150.75	\$180.03	\$264.75	