

2018 COBRA Health, Dental & Vision Rates

**You are eligible for COBRA coverage for up to 18 months.
You are only eligible to enroll in the plan in which you were enrolled
as an active employee (or dependent of an active employee).**

Health Plan	Tier	Total Premium (Active Employee)	2% Admin Fee	Total Monthly Premium
Medical - Excellus BCBS - PPO-L	Employee	\$ 668.50	\$ 13.37	\$ 681.87
	Employee/Spouse	\$ 1,604.30	\$ 32.09	\$ 1,636.39
	Employee/Child(ren)	\$ 1,138.50	\$ 22.77	\$ 1,161.27
	Family	\$ 1,999.48	\$ 39.99	\$ 2,039.47
Medical - Excellus BCBS - HealthyBlue	Employee	\$ 606.54	\$ 12.13	\$ 618.67
	Employee/Spouse	\$ 1,455.68	\$ 29.11	\$ 1,484.79
	Employee/Child(ren)	\$ 1,033.02	\$ 20.66	\$ 1,053.68
	Family	\$ 1,814.28	\$ 36.29	\$ 1,850.57
Medical - Excellus BCBS - SimplyBlue	Employee	\$ 310.32	\$ 6.21	\$ 316.53
	Employee/Spouse	\$ 744.70	\$ 14.89	\$ 759.59
	Employee/Child(ren)	\$ 528.50	\$ 10.57	\$ 539.07
	Family	\$ 928.16	\$ 18.56	\$ 946.72
Dental - Excellus BCBS - Dental Blue Options	Employee	\$ 33.02	\$ 0.66	\$ 33.68
	Family	\$ 99.72	\$ 1.99	\$ 101.71
Vision - Guaridan Vision PPO	Employee	\$ 6.20	\$ 0.12	\$ 6.32
	Employee/Spouse	\$ 10.42	\$ 0.21	\$ 10.63
	Employee/Child(ren)	\$ 10.64	\$ 0.21	\$ 10.85
	Family	\$ 16.82	\$ 0.34	\$ 17.16