



2024 **Monthly** COBRA Rates

Effective 1/1/2024

2024 MONTHLY COBRA RATES HMA SELF-FUNDED				
	HMA Medical/Rx COBRA Rates	HMA Dental COBRA Rates	HMA Vision COBRA Rates	TOTAL
Employee Only	817.55	68.36	20.67	906.58
Employee and Spouse	1,870.41	143.72	47.31	2,061.44
Employee and Child	1,354.54	133.72	34.27	1,522.53
Employee and Children	1,771.80	195.06	44.80	2,011.66
Employee, Spouse and Child	2,407.42	209.12	60.91	2,677.45
Employee, Spouse and Children	2,824.67	270.42	71.50	3,166.59
Spouse Only	1,052.86	75.36	26.64	1,154.86
Child Only	536.99	65.36	13.61	615.96
Children Only	954.25	126.70	24.13	1,105.08

2024 MONTHLY COBRA RATES KAISER PERMANENTE			
	Kaiser Medical Rx Vision COBRA Rates	HMA Dental COBRA Rates	TOTAL
Employee Only	691.46	68.36	759.82
Employee and Spouse	1,745.08	143.72	1,888.80
Employee and Child	1,196.40	133.72	1,330.12
Employee and Children	1,637.47	195.06	1,832.53
Employee, Spouse and Child	2,250.00	209.12	2,459.12
Employee, Spouse and Children	2,691.03	270.42	2,961.45
Spouse Only	1,053.62	75.36	1,128.98
Child Only	504.94	65.36	570.30
Children Only	946.01	126.70	1,072.71