

**City of Baltimore
DHR-Employee Benefits Division**

2017 Monthly Active COBRA Rates

High Option & Standard Option Medical & Rx Plans

CareFirst Preferred Provider Network (PPN)			UnitedHealthcare Point of Service (POS)		
Coverage Level	High Option COBRA Cost	Standard Option COBRA Cost	Coverage Level	High Option COBRA Cost	Standard Option COBRA Cost
Individual	\$701.14	\$634.14	Individual	\$622.20	\$547.79
Parent + Child	\$1,360.88	\$1,230.86	Parent + Child	\$1,182.13	\$1,041.15
Individual + Spouse	\$1,567.81	\$1,418.00	Individual + Spouse	\$1,306.67	\$1,150.82
Family	\$1,701.76	\$1,539.16	Family	\$1,866.58	\$1,643.96

Aetna Choice POS II			Express Scripts		
Coverage Level	High Option COBRA Cost	Standard Option COBRA Cost	Coverage Level	High Option COBRA Cost	Standard Option COBRA Cost
Individual	\$519.07	\$453.50	Individual	\$127.98	\$122.45
Parent + Child	\$1,121.97	\$982.36	Parent + Child	\$248.40	\$237.67
Individual + Spouse	\$1,237.34	\$1,088.28	Individual + Spouse	\$286.18	\$273.82
Family	\$1,719.23	\$1,506.36	Family	\$310.60	\$297.19

HMO Medical Plans

Open Access Aetna Select (HMO)	
Coverage Level	COBRA Cost
Participant Only	\$464.85
Participant + Child	\$938.48
Participant + Spouse	\$1,029.60
Participant + Family	\$1,123.24

Kaiser Permanente	
Coverage Level	COBRA Cost
Participant Only	\$449.88
Participant + Child	\$854.78
Participant + Spouse	\$944.75
Participant + Family	\$1,349.65

UnitedHealthcare Choice (HMO)	
Coverage Level	COBRA Cost
Participant Only	\$505.41
Participant + Child	\$960.29
Participant + Spouse	\$1,061.37
Participant + Family	\$1,516.24

Dental & Vision Plans

Delta Dental HMO (Dental DHMO)	
Coverage Level	COBRA Cost
Participant Only	\$8.05
Participant + Child	\$13.66
Participant + Spouse	\$16.07
Participant + Family	\$22.49

Delta Dental PPO (Dental DPPO)	
Coverage Level	COBRA Cost
Participant Only	\$27.70
Participant + Child	\$47.06
Participant + Spouse	\$55.40
Participant + Family	\$77.52

CareFirst Select Vision (Vision Plan)	
Coverage Level	COBRA Cost
Participant Only	\$4.95
Participant + Child	\$4.95
Participant + Spouse	\$4.95
Participant + Family	\$4.95