



2025 COBRA Rates

MEDICAL: Blue Cross Blue Shield through Sourcewell

\$4,125/\$8,250 Deductible Plan AWARE network

Single: \$777.24 per month

Family: \$2,190.96 per month

\$5,000/\$10,000 Deductible Plan AWARE network

Single: \$733.38

Family: \$2,065.50

\$7,070/\$14,140 Deductible Plan AWARE network *(This plan is not considered "creditable" with Medicare and Medicaid Services.)*

Single: \$653.82

Family: \$1833.96

\$7,070/\$14,140 Deductible Plan HIGH VALUE Network *(This plan is not considered "creditable" with Medicare and Medicaid Services.)*

Single: \$594.66

Family: \$1662.60

DENTAL: Met Life

Employee: \$35.42

Employee + 1: \$74.90

Employee + Family: \$118.03

VISION: VSP

Employee: \$8.00

Employee + Spouse: \$16.00

Employee + Child(ren): \$17.12

Family: \$27.36

LIFE: The Hartford

Basic Employee Life, \$20,000 coverage: \$2.86 per month

Child Life, \$10,000 coverage: \$1.33 per month

Voluntary & Spousal life: cost varies depending on age and amount of coverage

*Includes 2% administrative fee