2026 COBRA COST SHEET

COBRA You are eligible to continue your medical, dental, vision, and Healthcare Flexible Spending Account through COBRA beginning on the first day after your benefits have terminated. A COBRA election packet will be mailed to your home address directly from the BenefitsPlus Solutions Center (our COBRA administrator) within two weeks after your benefit termination date and will also be available on your benefit account online via www.cobraandbillingservices.com. You have 60 days to elect COBRA coverage. If you have questions about your COBRA coverage, please call the BenefitsPlus Solution Center at (800) 597-2335. Below are the COBRA monthly rates for 2026:

Coverage	Standard PPO	Enhanced PPO	Classic HDHP	Surest	Standard Dental	Enhanced Dental	Vision
Employee + Spouse	\$1,832.75	\$1,886.24	\$1,677.22	\$1,625.14	\$72.45	\$96.38	\$19.16
Employee +Child(ren)	\$1,582.81	\$1,629.00	\$1,448.50	\$1,403.53	\$90.35	\$120.20	\$20.50
Employee + Family	\$2,749.09	\$2,829.32	\$2,515.83	\$2,437.69	\$126.13	\$167.79	\$32.76

If you are eligible for Medicare (i.e. age of 65+), COBRA benefits will pay differently. Please review your existing coverage to ensure you understand how COBRA medical and Medicare coverage coordinate