

Health Equity COBRA Customer Service 888-678-4861

2024 Monthly Medical Cobra Rates				
	Single	Parent Plus	Couple	Family
LivingWell CDHP	\$949.38	\$1,294.67	\$1,903.56	\$2,119.64
LivingWell PPO	\$968.02	\$1,346.81	\$2,021.25	\$2,229.50
LivingWell Basic CDHP	\$919.06	\$1,259.50	\$1,900.30	\$2,111.28
Waiver HRA	\$163.86			

2024 Monthly Dental Cobra Rates				
	Single	Employee +Spouse	Employee +Child(ren)	Family
Bronze	\$14.26	\$26.09	\$33.97	\$50.16
Silver	\$21.73	\$41.33	\$46.74	\$69.52
Gold	\$28.87	\$55.90	\$71.30	\$104.04

2024 Monthly Vision Cobra Rates				
	Single	Employee +Spouse	Employee + Child(ren)	Family
Bronze	\$5.53	\$11.06	\$11.34	\$16.87
Silver	\$6.49	\$12.95	\$13.28	\$19.77
Gold	\$13.28	\$26.56	\$27.23	\$40.51