



**COBRA Rates – July 1, 2019 – June 30, 2020**

**Monthly Rates**

Plan Type	Plan and/or Provider	Single	Single Plus Spouse	Family Minus Spouse	Family Plus Spouse
<b>Medical*</b>	Ohio Med PPO <i>(Includes Medical Mutual of Ohio &amp; Anthem administered plans)</i>	\$782.45	N/A	\$2,148.75	\$2,161.50
<b>Medical*</b>	Ohio Med HDHP <i>(Includes Medical Mutual of Ohio &amp; Anthem administered plans)</i>	\$716.97	\$1,611.93	\$1,253.95	\$2,148.91
<b>Dental</b>	Delta Dental PPO	\$34.91	N/A	\$101.17	\$101.17
<b>Vision</b>	EyeMed Vision Care	\$10.24	N/A	\$28.16	\$28.16

**Dental & Vision Coverage for Union Participants**

*Dental and vision COBRA coverage may be elected through the Union Benefits Trust (UBT). For information, please contact UBT at (800) 228-5088.*

**\* Medical Plan Coverage**

*Medical plan enrollment includes behavioral health coverage (provided by Optum Behavioral Solutions), prescription drug coverage (provided by OptumRx), and the Take Charge! Live Well! wellness program (provided by Sharecare).*

*Participants on COBRA are not eligible for wellness incentives due to the State not being able to tax the benefit.*