

Monthly COBRA Rates (includes 2% admin) Plan Year 2025: January 1, 2025 - December 31, 2025

MEDICAL/RX PLAN RATES (SAL, O&M, CLERICAL & CAR)

Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Premium	\$1,192.49	\$2,325.30	\$2,134.52	\$3,267.40
Preferred	\$984.85	\$1,920.45	\$1,762.92	\$2,698.44
Economy	\$882.23	\$1,720.36	\$1,579.19	\$2,417.34
HDHP (SAL Only)	\$726.52	\$1,416.68	\$1,300.45	\$1,990.65

MEDICAL/RX PLAN RATES (IBEW)

Plan	Employee Only	Employee + Family
Premium	\$1,192.49	\$2,681.11
Preferred	\$984.85	\$2,214.29
Economy	\$882.23	\$1,983.56

MEDICAL/RX PLAN RATES - RETIREE/SURVIVING SPOUSES

Monthly Retiree Rates	Premium		Preferred		Economy	
Tier 3 Retired 12/1/04 & After	Single	Family	Single	Family	Single	Family
Tier 3 Non Medicare	\$1,637.01	\$3,680.52	\$1,351.94	\$3,039.72	\$1,211.13	\$2,722.97
Tier 3 Medicare	\$982.86	\$1,926.41	\$848.95	\$1,663.99	\$792.50	\$1,553.18

MEDICARE ADVANTAGE PLAN RATES (RETIREES)

Plan	Employee Only	Per Add'l Family Member
GHP Advantra	\$405.93	\$405.93
UHC Secure Horizons	\$410.73	\$410.73



DENTAL PLAN RATES (SALARIED EMPLOYEES)

Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
High Option	\$24.02	\$48.06	\$70.85	\$95.66
Low Option	\$15.15	\$30.33	\$46.18	\$62.32

DENTAL PLAN RATES (HOURLY EMPLOYEES)

	Employee	Employee +
Plan	Only	Family
High Option	\$24.02	\$74.75
Low Option	\$15.15	\$46.24

VISION RATES (ALL EMPLOYEES)

Employee	Employee +	Employee +	Employee +
Only	Spouse	Child(ren)	Family
\$3.92	\$7.45	\$7.83	\$11.63