

2026 Monthly COBRA Rates

ANTHEM Medical

	Single	Employee & Spouse	Employee & Child(ren)	Family
Max Deductible	\$761.06	\$1814.92	\$1324.90	\$2458.60
High Deductible	\$828.98	\$1976.89	\$1443.16	\$2678.02
Medium Deductible	\$879.79	\$2098.08	\$1531.62	\$2842.23
Lowest Deductible	\$922.30	\$2199.48	\$1605.62	\$2979.54

ANTHEM Medical - AFSCME

	Single	Employee & Spouse	Employee & Child(ren)	Family
Max Deductible	\$761.06			\$2192.39
High Deductible	\$828.98			\$2388.30
Medium Deductible	\$879.79			\$2534.59
Lowest Deductible	\$922.30			\$2656.94

Delta Dental

	Single	Employee & Spouse	Employee & Child(ren)	Family
High Plan	\$40.53	\$86.26	\$96.65	\$153.53
Low Plan	\$23.39	\$46.46	\$62.87	\$96.65

ANTHEM Vision

	Single	Employee & Spouse	Employee & Child(ren)	Family
Anthem Vision	\$6.26	\$11.32	\$12.14	\$18.39