

2026 Monthly Active & COBRA Rates - Medical

Plan	Coverage Tier	Subsidized COBRA Rate (Active Associate Contribution)	Active Total Funding Rate	Unsubsidized COBRA Rate (Active Total Funding Rate, Plus EAP, Less HSA Seed, Plus 2%)
Basic	Single	\$63.05	\$835.39	\$853.79
	Single + Spouse or DP	\$287.85	\$1,754.30	\$1,791.08
	Single + Child(ren)	\$181.79	\$1,587.22	\$1,620.66
	Spouse or DP Only	\$224.80	\$918.91	\$937.29
	Spouse or DP + Child(ren)	\$345.01	\$1,754.30	\$1,791.08
	Child(ren) Only	\$118.74	\$751.83	\$766.87
	Single + Spouse or DP + Child(ren)	\$408.06	\$2,589.69	\$2,643.18
CDHP	Single	\$63.05	\$828.80	\$804.57
	Single + Spouse or DP	\$287.85	\$1,740.47	\$1,691.97
	Single + Child(ren)	\$181.79	\$1,574.70	\$1,522.89
	Spouse or DP Only	\$224.80	\$911.67	\$887.40
	Spouse or DP + Child(ren)	\$345.01	\$1,740.47	\$1,691.97
	Child(ren) Only	\$118.74	\$745.90	\$718.32
	Single + Spouse or DP + Child(ren)	\$408.06	\$2,569.27	\$2,537.35
Enhanced	Single	\$148.42	\$920.76	\$940.87
	Single + Spouse or DP	\$467.14	\$1,933.59	\$1,973.95
	Single + Child(ren)	\$344.01	\$1,749.44	\$1,786.13
	Spouse or DP Only	\$318.72	\$1,012.83	\$1,033.08
	Spouse or DP + Child(ren)	\$524.30	\$1,933.59	\$1,973.95
	Child(ren) Only	\$195.59	\$828.68	\$845.26
	Single + Spouse or DP + Child(ren)	\$672.72	\$2,854.35	\$2,913.13

2026 Monthly Active & COBRA Rates - Dental

Plan	Coverage Tier	Subsidized COBRA Rate (Active Associate Contribution)	Active Total Funding Rate	Unsubsidized COBRA Rate (Active Total Funding Rate, Plus 2%)
Basic	Single	\$16.35	\$38.22	\$38.99
	Single + Spouse or DP	\$34.34	\$80.27	\$81.88
	Single + Child(ren)	\$31.07	\$72.63	\$74.08
	Spouse or DP Only	\$17.99	\$42.05	\$42.89
	Spouse or DP + Child(ren)	\$34.34	\$80.27	\$81.88
	Child(ren) Only	\$14.72	\$34.40	\$35.09
	Single + Spouse or DP + Child(ren)	\$50.69	\$118.50	\$120.86
Enhanced	Single	\$24.63	\$46.55	\$47.48
	Single + Spouse or DP	\$51.72	\$97.75	\$99.70
	Single + Child(ren)	\$46.79	\$88.44	\$90.21
	Spouse or DP Only	\$27.09	\$51.20	\$52.22
	Spouse or DP + Child(ren)	\$51.72	\$97.75	\$99.70
	Child(ren) Only	\$22.17	\$41.89	\$42.73
	Single + Spouse or DP + Child(ren)	\$76.35	\$144.29	\$147.18

2026 Monthly Active & COBRA Rates - Vision

Plan	Coverage Tier	Subsidized COBRA Rate (Active Associate Contribution)	Active Total Funding Rate	Unsubsidized COBRA Rate (Active Total Funding Rate, Plus 2%)
Vision	Single	\$3.27	\$6.55	\$6.68
	Single + Spouse or DP	\$6.59	\$13.18	\$13.44
	Single + Child(ren)	\$7.94	\$15.88	\$16.20
	Spouse or DP Only	\$3.32	\$6.63	\$6.76
	Spouse or DP + Child(ren)	\$8.52	\$17.04	\$17.38
	Child(ren) Only	\$4.67	\$9.33	\$9.52
	Single + Spouse or DP + Child(ren)	\$11.79	\$23.59	\$24.06

2026 Monthly Active & COBRA Rates - Minute Clinic

Plan	Coverage Tier	COBRA Rate (Includes 2% Administrative Load)
	Single	\$9.75
	Single + Spouse or DP	\$19.50
	Single + Family, no Spouse or DP	\$29.25
	Spouse or DP Only	\$9.75
	Spouse or DP + Child(ren)	\$29.25
	Child(ren) Only	\$19.50
CVS Clinic Plan	Single + Family, with Spouse or DP	\$39.01