

2022 COBRA Coverage per Month

Teachers/ABE	Medical Plan One	Medical Plan Two	Medical Plan Three	Dental	Vision – Standard	Vision – Premier
Single	\$799.18	\$737.49	\$691.60	\$25.37	\$5.53	\$7.65
Single Plus One	N/A	N/A	N/A	\$69.50	N/A	N/A
Family	\$2063.07	\$1903.60	\$1785.16	\$112.37	\$15.00	\$21.08

All Other Unions	Medical Plan One	Medical Plan Two	Medical Plan Three	Dental	Vision – Standard	Vision – Premier
Single	\$779.16	\$718.93	\$674.19	\$25.37	\$5.53	\$7.65
Single Plus One	\$1831.01	\$1689.47	\$1584.35	\$69.50	N/A	N/A
Family	\$2220.59	\$2048.94	\$1921.48	\$112.37	\$15.00	\$21.08