
***FY2019 Health & Dental
COBRA Rate Tables***

Effective July 1, 2018
Department of Central Management Services
Group Insurance Division

COBRA RATE TABLE DESCRIPTION

The amount a person pays for COBRA coverage is 100% of the rate paid for actively working members plus a 2% administrative fee.

DEFINITION OF TYPES OF COVERAGE

Member Only: Single coverage; the member has no dependents covered under his/her health plan.

Member Plus 1 Non-Medicare Dependent: The member is covered and has one dependent enrolled. The dependent is not enrolled in Medicare or the dependent is **not enrolled in both** Parts A and B of Medicare (the State is primary claim payer for either Part A or B).

Member Plus 2 or More Dependents: This category includes a member with two or more dependents enrolled where: 1) the dependents are not enrolled in Medicare, 2) the State is primary claim payer for Part A or B, but not both, or 3) there is a combination of dependents who have Medicare primary and Non-Medicare coverage.

Member Plus 1 Medicare Dependent: The member is covered and has one dependent covered. Medicare is primary claim payer for **both** Parts A and B for the dependent or the dependent is enrolled in premium free Part A of Medicare, is not purchasing Part B and Part B benefits are being reduced.

Member Plus 2 or More Medicare Dependents: The member is covered and has two or more dependents covered. Medicare is primary claim payer for **both** Parts A and B for all of the dependents or the dependents are enrolled in premium free Part A of Medicare, not purchasing Part B and Part B benefits are being reduced.

NOTE: The COBRA tables provide both monthly and semi-monthly rates. In addition, the amount a member pays for dependent coverage is displayed separately, but is included in the 'Total'. This is to assist in answering inquiries from members who need to know how much of the total premium is relative to dependent coverage.

COBRA Monthly Rates

(Effective July 1, 2018)

Quality Care Health Plan (Carrier Code D3)

	<u>Total</u>
Member Only	\$1,151.03
Member Plus 1 Non Medicare Dependent	\$2,388.49
Member Plus 2 or More Dependents	\$2,704.65
Member Plus 1 Medicare Primary Dependent	\$1,684.92
Member Plus 2 or More Medicare Primary Dependents	\$2,704.65

Health Alliance HMO (Carrier Code AH)

	<u>Total</u>
Member Only	\$ 883.28
Member Plus 1 Non Medicare Dependent	\$1,627.74
Member Plus 2 or More Dependents	\$2,189.29
Member Plus 1 Medicare Primary Dependent	\$1,423.16
Member Plus 2 or More Medicare Primary Dependents	\$2,189.29

Healthlink (Carrier Code CF)

	<u>Total</u>
Member Only	\$ 925.14
Member Plus 1 Non Medicare Dependent	\$1,703.66
Member Plus 2 or More Dependents	\$2,280.78
Member Plus 1 Medicare Primary Dependent	\$1,493.61
Member Plus 2 or More Medicare Primary Dependents	\$2,280.78

HMO Illinois (Carrier Code BY)

	<u>Total</u>
Member Only	\$ 780.69
Member Plus 1 Non Medicare Dependent	\$1,438.97
Member Plus 2 or More Dependents	\$1,938.98
Member Plus 1 Medicare Primary Dependent	\$1,252.97
Member Plus 2 or More Medicare Primary Dependents	\$1,938.98

Aetna (formerly Coventry) Healthcare HMO (Carrier Code AS)

	<u>Total</u>
Member Only	\$ 884.28
Member Plus 1 Non Medicare Dependent	\$1,629.57
Member Plus 2 or More Dependents	\$2,191.73
Member Plus 1 Medicare Primary Dependent	\$1,412.66
Member Plus 2 or More Medicare Primary Dependents	\$2,191.73

Aetna (formerly Coventry) Healthcare OAP (Carrier Code CH)	<u>Total</u>
Member Only	\$ 754.92
Member Plus 1 Non Medicare Dependent	\$1,390.20
Member Plus 2 or More Dependents	\$1,862.50
Member Plus 1 Medicare Primary Dependent	\$1,221.14
Member Plus 2 or More Medicare Primary Dependents	\$1,862.50

BlueAdvantage (Carrier Code CI)	<u>Total</u>
Member Only	\$ 746.84
Member Plus 1 Non Medicare Dependent	\$1,376.69
Member Plus 2 or More Dependents	\$1,856.38
Member Plus 1 Medicare Primary Dependent	\$1,197.97
Member Plus 2 or More Medicare Primary Dependents	\$1,856.38

Quality Care Dental Plan	<u>Total</u>
Member Only	\$ 37.02
Member Plus 1 Non Medicare Dependent	\$ 68.58
Member Plus 2 or More Dependents	\$ 114.62