



**Simmons University FY20 COBRA monthly rates - Medical, Dental and Vision**

Medical Plan		
Plan Election	Coverage tier	New COBRA Monthly Premium effective 07/01/19 - 06/30/20
HDHP/PPO Higher Ed Blue Plan	Individual	\$631.67
	Individual + 1	\$1,262.31
	Family	\$1,936.35
HMO Blue Higher Ed Blue Plan	Individual	\$687.87
	Individual + 1	\$1,375.70
	Family	\$2,110.33

Dental Plan		
Plan Election	Coverage tier	New COBRA Monthly Premium effective 07/01/19 - 06/30/20
Blue Cross_CORE Dental Plan	Individual	\$44.68
	Family	\$133.27
Blue Cross_ENHANCED Dental Plan	Individual	\$53.61
	Family	\$159.94

Vision Plan		
Plan Election	Coverage tier	New COBRA Monthly Premium effective 07/01/19 - 06/30/20
VSP	Individual	\$9.12
	Individual + 1	\$13.23
	Family	\$23.72