

University of Chicago COBRA Rates eff. 1/1/22

BlueCross BlueShield

HMO Medical	Rate	COBRA Rate
Single	\$321.05	\$327.47
Double	\$677.04	\$690.58
Family	\$969.60	\$988.99

BlueCross BlueShield

PPO Medical	Rate	COBRA Rate
Single	\$337.95	\$344.71
Double	\$713.12	\$727.38
Family	\$1,020.61	\$1,041.02

MetLife

Dental - Low	Rate	COBRA Rate
Single	\$16.93	\$17.27
Double	\$32.16	\$32.80
Family	\$42.31	\$43.16

MetLife

Dental - High	Rate	COBRA Rate
Single	\$37.83	\$38.59
Double	\$73.64	\$75.11
Family	\$129.61	\$132.20

VSP

Vision	Rate	COBRA Rate
Single	\$8.14	\$8.30
Double	\$11.80	\$12.04
Family	\$21.15	\$21.57