

Active Employee Cost - Calendar Year 2026

COBRA RATE SCHEDULE

102% OF ACTIVE EMPLOYEE RATE

Effective January 1, 2026

		COBRA Rate Cost		Component Cost		
		MONTHLY	ANNUAL	Vendor	MCPS	2% COBRA
Cigna OAP	Individual	858.76	10,305.12			
	Individual + Spouse	1,717.46	20,609.52	21.12	820.80	16.84
	Individual + Child	1,717.46	20,609.52	21.12	1,662.66	33.68
	Family (Individual + Spouse + Child(ren))	2,336.82	28,041.84	21.12	1,662.66	33.68
	Family (Individual + Children)	2,336.82	28,041.84	21.12	2,269.88	45.82
Cigna OAP w/o Care Management	Individual	835.26	10,023.12	21.12	2,269.88	45.82
	Individual + Spouse	1,670.44	20,045.28	21.12	797.76	16.38
	Individual + Child	1,670.44	20,045.28	21.12	1,616.57	32.75
	Family (Individual + Spouse + Child(ren))	2,272.85	27,274.20	21.12	1,616.57	32.75
	Family (Individual + Children)	2,272.85	27,274.20	21.12	2,207.16	44.57
Cigna OAPIN	Individual	614.88	7,378.56	21.12	2,207.16	44.57
	Individual + Spouse	1,155.68	13,868.16	21.12	581.70	12.06
	Individual + Child	1,155.68	13,868.16	21.12	1,111.90	22.66
	Family (Individual + Spouse + Child(ren))	1,893.40	22,720.80	21.12	1,111.90	22.66
	Family (Individual + Children)	1,893.40	22,720.80	21.12	1,835.15	37.13
Cigna OAPIN w/o Care Management	Individual	598.05	7,176.60	21.12	1,835.15	37.13
	Individual + Spouse	1,124.05	13,488.60	21.12	565.20	11.73
	Individual + Child	1,124.05	13,488.60	21.12	1,080.89	22.04
	Family (Individual + Spouse + Child(ren))	1,841.56	22,098.72	21.12	1,080.89	22.04
	Family (Individual + Children)	1,841.56	22,098.72	21.12	1,784.33	36.11
Kaiser Permanente HMO	Individual	775.91	9,310.92	21.12	1,784.33	36.11
	Individual + Spouse	1,548.49	18,581.88	760.70	0.00	15.21
	Individual + Child	1,548.49	18,581.88	1,518.13	0.00	30.36
	Family (Individual + Spouse + Child(ren))	2,243.79	26,925.48	1,518.13	0.00	30.36
	Family (Individual + Children)	2,243.79	26,925.48	2,199.79	0.00	44.00
Caremark Prescription	Individual	239.54	2,874.48	2,199.79	0.00	44.00
	Individual + Spouse	478.57	5,742.84	0.00	234.84	4.70
	Individual + Child	478.57	5,742.84	0.00	469.19	9.38
	Family (Individual + Spouse + Child(ren))	590.58	7,086.96	0.00	469.19	9.38
	Family (Individual + Children)	590.58	7,086.96	0.00	579.00	11.58
Kaiser Permanente Prescription	Individual	98.52	1,182.24	0.00	579.00	11.58
	Individual + Spouse	196.62	2,359.44	96.59	0.00	1.93
	Individual + Child	196.62	2,359.44	192.76	0.00	3.86
	Family (Individual + Spouse + Child(ren))	284.91	3,418.92	192.76	0.00	3.86
	Family (Individual + Children)	284.91	3,418.92	279.32	0.00	5.59
CareFirst PPO Dental	Individual	37.98	455.76	279.32	0.00	5.59
	Individual + Spouse	76.01	912.12	1.53	35.71	0.74
	Individual + Child	76.01	912.12	1.53	72.99	1.49
	Family (Individual + Spouse + Child(ren))	111.66	1,339.92	1.53	72.99	1.49
	Family (Individual + Children)	111.66	1,339.92	1.53	107.94	2.19
Aetna DMO Dental	Individual	22.31	267.72	1.53	107.94	2.19
	Individual + Spouse	44.65	535.80	21.87	0.00	0.44
	Individual + Child	44.65	535.80	43.77	0.00	0.88
	Family (Individual + Spouse + Child(ren))	65.62	787.44	43.77	0.00	0.88
	Family (Individual + Children)	65.62	787.44	64.33	0.00	1.29
Davis Vision	Individual	1.89	22.68	64.33	0.00	1.29
	Individual + Spouse	3.47	41.64	0.12	1.73	0.04
	Individual + Child	3.47	41.64	0.12	3.28	0.07
	Family (Individual + Spouse + Child(ren))	4.40	52.80	0.12	3.28	0.07
	Family (Individual + Children)	4.40	52.80	0.12	4.19	0.09