

## 2024 Monthly COBRA Rates for Local 26 Unions

Plan Name	Individual	Family	
HUGHP HMO	\$821.10	\$2,216.46	
HUGHP POS	\$862.92	\$2,329.68	
BCBSMA HMO	\$844.56	\$2,280.72	
BCBSMA POS	\$886.38	\$2,393.94	
BCBSMA PPO	\$886.38	\$2,393.94	
MetLife Dental	\$46.61	\$129.58	
EyeMed Vision	\$6.75	\$15.53	

## 2024 Layoff and COBRA Rates for Local 26 Union

(Layoff rates during first 12 months, COBRA rates thereafter)

Individual Coverage	Layoff Rates  Based on full time equivalent salary				COBRA Rates
	<\$55k	\$55K - \$74,999	\$75k – \$99,999	\$100k and above	102%
HUGHP HMO	\$153.00	\$177.00	\$238.50	\$298.50	\$821.10
HUGHP POS	\$214.50	\$238.50	\$300.00	\$360.00	\$862.92
BCBSMA HMO	\$187.50	\$211.50	\$273.00	\$333.00	\$844.56
BCBSMA POS	\$249.00	\$273.00	\$334.50	\$394.50	\$886.38
BCBSMA PPO	\$249.00	\$273.00	\$334.50	\$394.50	\$886.38
MetLife Dental	\$25.50	\$25.50	\$25.50	\$25.50	\$46.61
EyeMed Vision	\$6.62	\$6.62	\$6.62	\$6.62	\$6.15

Family Coverage	Layoff Rates  Based on full time equivalent salary				COBRA Rates
	<\$55k	\$55K - \$74,999	\$75k – \$99,999	\$100k and above	102%
HUGHP HMO	\$414.00	\$478.50	\$642.00	\$805.50	\$2,216.46
HUGHP POS	\$580.50	\$645.00	\$808.50	\$972.00	\$2,329.68
BCBSMA HMO	\$508.50	\$573.00	\$736.50	\$900.00	\$2,280.72
BCBSMA POS	\$675.00	\$739.50	\$903.00	\$1,066.50	\$2,393.94
BCBSMA PPO	\$675.00	\$739.50	\$903.00	\$1,066.50	\$2,393.94
MetLife Dental	\$72.00	\$72.00	\$72.00	\$72.00	\$129.58
EyeMed Vision	\$15.23	\$15.23	\$15.23	\$15.23	\$15.53

## 2024 Survivor and COBRA Rates for Local 26 Union

(Employee rates during first 9 months, COBRA rate for remaining 27 months)

Individual Coverage	Employee Rates  Based on full time equivalent salary				COBRA Rates
	<\$55k	\$55K - \$74,999	\$75k – \$99,999	\$100k and above	102%
HUGHP HMO	\$102	\$118	\$159	\$199	\$821.10
HUGHP POS	\$143	\$159	\$200	\$240	\$862.92
BCBSMA HMO	\$125	\$141	\$182	\$222	\$844.56
BCBSMA POS	\$166	\$182	\$233	\$263	\$886.38
BCBSMA PPO	\$166	\$182	\$233	\$263	\$886.38
MetLife Dental	\$17	\$17	\$17	\$17	\$46.61
EyeMed Vision	\$6.62	\$6.62	\$6.62	\$6.62	\$6.75

Family Coverage	Employee Rates  Based on full time equivalent salary				COBRA Rates
	<\$55k	\$55K - \$74,999	\$75k – \$99,999	\$100k and above	102%
HUGHP HMO	\$276	\$319	\$428	\$537	\$2,216.46
HUGHP POS	\$387	\$430	\$539	\$648	\$2,329.68
BCBSMA HMO	\$339	\$382	\$491	\$600	\$2,280.72
BCBSMA POS	\$450	\$493	\$602	\$711	\$2,393.94
BCBSMA PPO	\$450	\$493	\$602	\$711	\$2,393.94
MetLife Dental	\$48	\$48	\$48	\$48	\$129.58
EyeMed Vision	\$15.23	\$15.23	\$15.23	\$15.23	\$15.53