Miami-Dade County 2016 COBRA Monthly Rates

(For Non-Bargaining Employees, AFSCME Aviation, AFSCME General, AFSCME Solid Waste, GSAF Professional & Supervisors and IAFF Union Employees)

(The COBRA Rates Below Include the 2% Admin. Fee)

MEDICAL - REDESIGN GROUP

AVMED POS PLAN		AVMED SELECT NETWORK HMO	
Single	1369.89	Single	658.93
EE+ Child(ren)	2390.05	EE+ Child(ren)	1281.03
EE+ Spouse	2607.98	EE+ Spouse	1383.06
Family	3539.98	Family	1686.69
AVMED HIGH OPT HMO		AVMED MDC JACH	KSON FIRST HMO
Single	708.55	Single	625.98
EE+ Child(ren)	1377.47	EE+ Child(ren)	1216.98
EE+ Spouse	1487.15	EE+ Spouse	1313.91
Family	1813.66	Family	1602.36

DENTAL

Delta		HUMANA C	HS	
S	Standard	Enriched	Standard	Enriched
Single	31.84	41.69	8.16	15.12
2 Persons	63.00	82.43	13.50	25.07
Family	101.54	132.91	20.62	39.80
MET DHN	/IO Standard	Enriched		

Standard	Enriched
11.74	17.10
19.40	28.33
29.69	45.03
	11.74

METLIFE VISION

Single	<u> 2 Persons</u>	<u>Family</u>
4.22	8.47	15.54

2016 COBRA Rates1.xlsx Revised 12/01/15

Miami-Dade County 2016 COBRA Monthly Rates

(AFSCME Water & Sewer, PBA Rank and File\Supervisory Units, and TWU Transit Employees)

(The COBRA Rates Below Include the 2% Admin. Fee)

MEDICAL - NON-REDESIGN GROUP

AVMED POS PLAN		AVMED LOW OPT HMO	
Single	1416.48	Single	688.66
EE+ Child(ren)	2471.38	EE+ Child(ren)	1339.48
EE+ Spouse	2696.69	EE+ Spouse	1446.22
Family	3660.38	Family	1763.96
AVMED HIGH O I	PT HMO	AVMED MDC JACK	(SON FIRST HMO*
AVMED HIGH OI Single	PT HMO 732.64	AVMED MDC JACH Single	<u>KSON FIRST HMO*</u> 625.98
Single	732.64	Single	625.98
Single EE+ Child(ren)	732.64 1424.35	Single EE+ Child(ren)	625.98 1216.98

DENTAL

Delta	HUMANA OHS		DHS	
	Standard	Enriched	Standard	Enriched
Single	31.84	41.69	8.16	15.12
2 Persons	63.00	82.43	13.50	25.07
Family	101.54	132.91	20.62	39.80
MET DH	IMO			

St	tandard_	Enriched
Single	11.74	17.10
2 Persons	19.40	28.33
Family	29.69	45.03

METLIFE VISION

Single	2 Persons	Family
4.22	8.47	15.54