Miami-Dade County 2017 COBRA Monthly Rates

(AFSCME Water & Sewer, and TWU Transit Employees)

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

MEDICAL - NON-REDESIGN GROUP

AVMED POS PLAN

Single	1464.81
EE+ Child(ren)	2555.71
EE+ Spouse	2788.71
Family	3785.29

AVMED LOW OPT HMO

Single	712.15
EE+ Child(ren)	1385.18
EE+ Spouse	1495.57
Family	1824.16

AVMED HIGH OPT HMO

Single	757.63
EE+ Child(ren)	1472.94
EE+ Spouse	1590.23
Family	1939.36

AVMED MDC JACKSON FIRST PILOT HMO*

Single	647.35	
EE+ Child(ren)	1258.51	
EE+ Spouse	1358.75	
Family	1657.04	
* Applicable to TWU Transit Employees Only		

DENTAL

Delta			
	Standard	Enriched	
Single	31.84	41.69	
2 Persons	63.00	82.43	
Family	101.54	132.91	

MET DHMO

	Standard	Enriched
Single	12.57	18.29
2 Persons	20.76	30.30
Family	31.77	48.18

HUMANA OHS

Standard	Enriched
7.83	14.52
12.97	24.07
19.81	38.21

METLIFE VISION

<u>2 Persons</u> 8.47

Family 15.54