

COBRA Rates 2021 - IBEW

Company Facilities	Plan Name	2021 Monthly COBRA Rate Single Coverage
All sites	NYPA PLAN (UHC)	\$801.37
BG, CEC	CDPHP Capital District	\$891.62
NIA	Independent Health	\$731.69
All sites	Dental	\$49.05
All sites	Core Vision - Employee Only	\$6.38
All sites	Health Reimbursement Account (For Hearing Aids) - Employee Only	\$28.33
All sites	Employee Assistance Program	\$1.53

Company Facilities	Plan Name	2021 Monthly COBRA Rate Family Coverage
All sites	NYPA Plan (UHC)	\$1,956.52
BG, CEC	CDPHP Capital District	\$2,237.36
NIA	Independent Health	\$1,829.22
All sites	Dental	\$111.02
All sites	Employee Assistance Program	\$1.53

All rates include a 2% administrative fee