## **2025 COBRA Premiums**

Medical/Pharmacy	Wellmark BC/BS BluePPO	Wellmark BC/BS BlueHMO
Single/Yourself	\$833.34	\$813.96
Yourself and Spouse	\$1,905.36	\$1,868.64
Yourself and Child(ren)	\$1,487.16	\$1,460.64
Yourself and Family	\$2,442.90	\$2,377.62

Delta Dental	Basic Plan	Comprehensive Plan
Single/Yourself	\$25.50	\$44.88
Yourself and Spouse	\$61.20	\$115.26
Yourself and Child(ren)	\$68.34	\$121.38
Yourself and Family	\$78.54	\$137.70

Avesis	Vision Plan
Single/Yourself	\$7.28
Yourself and Spouse	\$13.56
Yourself and Child(ren)	\$15.34
Yourself and Family	\$19.83