

2026 MONTHLY COBRA RATES (includes 2% admin fee)

MEDICAL/RX PLAN RATES

SAL & ATU	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Premium	\$1,358.05	\$2,648.13	\$2,430.87	\$3,721.02
Preferred	\$1,121.58	\$2,187.07	\$2,007.68	\$3,073.08
Economy	\$1,004.71	\$1,959.21	\$1,798.44	\$2,752.95
HDHP	\$827.38	\$1,613.36	\$1,481.00	\$2,267.02

IBEW	Employee Only	Employee + Family
Premium	\$1,358.05	\$3,053.34
Preferred	\$1,121.58	\$2,521.71
Economy	\$1,004.71	\$2,258.95

RETIREE/SURVIVING SPOUSE	Premium		Preferred		Economy	
	Single	Family	Single	Family	Single	Family
Tier 3 Retired 12/1/04 & After						
Tier 3 Non Medicare	\$1,864.28	\$4,191.50	\$1,539.64	\$3,461.74	\$1,379.27	\$3,101.01
Tier 3 Medicare	\$1,119.32	\$2,193.87	\$966.81	\$1,895.01	\$902.53	\$1,768.82

DENTAL PLAN RATES

SALARIED	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
High Option	\$24.02	\$48.06	\$70.85	\$95.66
Low Option	\$15.15	\$30.33	\$46.18	\$62.32

HOURLY	Employee Only	Employee + Family
High Option	\$24.02	\$74.75
Low Option	\$15.15	\$46.24

VISION PLAN RATES

ALL	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
	\$3.92	\$7.45	\$7.83	\$11.63