

# 2025 COBRA Rates

## Health Reimbursement Arrangement (HRA) Plans



Monthly	Tier	HRA Total
<b>HRA Red Medical/Pharmacy</b>	Associate	\$ 1,063.22
	Associate + Children	\$ 1,827.88
	Associate + Spouse	\$ 2,315.53
	Associate + Family	\$ 3,012.17
<b>HRA Blue Medical/Pharmacy</b>	Associate	\$ 1,052.96
	Associate + Children	\$ 1,810.42
	Associate + Spouse	\$ 2,293.06
	Associate + Family	\$ 2,982.50
<b>HRA White Medical/Pharmacy</b>	Associate	\$ 987.97
	Associate + Children	\$ 1,699.98
	Associate + Spouse	\$ 2,150.76
	Associate + Family	\$ 2,794.74

Monthly	Tier	Monthly Total
<b>Red Dental</b>	Associate	\$ 48.24
	Associate + Children	\$ 95.53
	Associate + Spouse	\$ 84.85
	Associate + Family	\$ 155.34
<b>Blue Dental</b>	Associate	\$ 35.95
	Associate + Children	\$ 74.19
	Associate + Spouse	\$ 63.33
	Associate + Family	\$ 120.09
<b>White Dental</b>	Associate	\$ 23.91
	Associate + Children	\$ 46.27
	Associate + Spouse	\$ 42.12
	Associate + Family	\$ 77.02
<b>Premium Vision</b>	Associate	\$ 8.14
	Associate + Children	\$ 17.40
	Associate + Spouse	\$ 16.28
	Associate + Family	\$ 27.86
<b>Base Vision</b>	Associate	\$ 5.24
	Associate + Children	\$ 11.20
	Associate + Spouse	\$ 10.48
	Associate + Family	\$ 17.92