

COBRA* Monthly Rates

Continuation of Medical, Dental or Vision

Effective January 2026

These rates include the 2% administrative fee.

* The Consolidated Omnibus Budget Reconciliation Act of 1986 (COBRA) is a federal law which mandates continuation of group health care insurance plans, at workers' expenses, after a worker leaves an employer. The University of Arkansas outsources COBRA benefits administration to:

UMR COBRA ADMINISTRATION
P.O. Box 1206
Wausau, WI 54402-1206
PHONE (toll-free): 1-800-207-1824
EMAIL: MyCOBRA@UMR.com
WEB PORTAL: <https://mycobra.tpa.com>

MEDICAL	Classic Plan	Premier Plan	Health Savings Plan
Single coverage for Employee Only, Spouse Only, or Child Only	\$ 530.50	\$ 803.90	\$ 460.41
Employee and Spouse	\$ 1,241.44	\$ 1,902.79	\$ 1,050.09
Employee and Child(ren), or Spouse and Child(ren), or Children only	\$ 993.28	\$ 1,503.11	\$ 863.84
Employee, Spouse and Child(ren)	\$ 1,714.58	\$ 2,623.60	\$ 1,465.31

DENTAL

Single coverage for Employee Only, or Spouse Only, or Child Only	\$ 32.97
Employee and Spouse	\$ 67.99
Employee and Child(ren), or Spouse and Child(ren), or Children only	\$ 57.39
Employee, Spouse and Child(ren)	\$ 92.41

VISION

	Basic	Enhanced
Single coverage for Employee Only, or Spouse Only, or Child Only	\$ 4.79	\$ 9.67
Employee and Spouse	\$ 9.51	\$ 19.11
Employee and Child(ren), or Spouse and Child(ren), or Children only	\$ 9.30	\$ 18.75
Employee, Spouse and Child(ren)	\$ 14.14	\$ 28.48