

COBRA* Monthly Rates

Continuation of Medical, Dental or Vision

Effective January 2027

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	\$543.76	\$824.00	\$471.92
Employee and Spouse	\$1,272.45	\$1,950.36	\$1,076.34
Employee and Child(ren), or Spouse and Child(ren), or Children only	\$1,018.10	\$1,540.69	\$885.42
Employee, Spouse and Child(ren)	\$1,757.44	\$2,689.19	\$1,501.95

DENTAL

Single coverage for Employee Only, or Spouse Only, or Child Only	\$33.29
Employee and Spouse	\$68.67
Employee and Child(ren), or Spouse and Child(ren), or Children only	\$57.96
Employee, Spouse and Child(ren)	\$93.33

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