

2019 COBRA Rates and Vendor Contact Information

2019 Medical Monthly Contributions

Coverage Tier	HRA	HSA
Employee Only	\$663.79	\$557.51
Employee + Spouse	\$1,506.81	\$1,265.54
Employee + Child(ren)	\$1,241.29	\$1,042.54
Family	\$2,084.30	\$1,750.59

2019 Dental Monthly Contributions

Coverage Tier	Basic	Enhanced
Employee Only	\$36.26	\$59.45
Employee + Spouse	\$77.96	\$127.81
Employee + Child(ren)	\$70.71	\$115.92
Family	\$110.59	\$181.32

2019 Vision Monthly Contributions

Coverage Tier	Contribution Amount
Employee Only	\$9.19
Employee + Spouse	\$18.26
Employee + Child(ren)	\$20.08
Family	\$28.03

If you are a former employee with subsidized COBRA you can find the active employee rates that apply to you by going to www.onebeaconbenefits.com or you can logon to WageWorks to see what your 2019 rates will be.

Coverage	Contact Information
COBRA Enrollment	Wageworks: Monday–Friday 7:00 a.m. – 7:00 p.m. CST 866-747-0039 mybenefits.wageworks.com
Medical / Pharmacy	Blue Cross Blue Shield / Prime Therapeutics 866.873.5943 www.bluecrossmnonline.com
HRA, HSA, or FSA	Further 800.859.2144 www.hellofurther.com
Dental	Delta Dental 800.448.3815 www.deltadentalmn.org
Vision	EyeMed 866.723.0513 www.eyemedvisioncare.com