



State of Connecticut - Office of the State Comptroller
Healthcare Policy & Benefit Services Division
2018 - 2019 COBRA Dental Insurance Rates

Administered By

CIGNA

| | Class Coverage | Monthly COBRA Rate |
|----------------------|-----------------------|---------------------------|
| Basic Dental Plan | Employee Only | \$51.03 |
| | Employee +1 | \$155.64 |
| | Family | \$155.64 |
| Enhanced Dental Plan | Employee Only | \$43.97 |
| | Employee +1 | \$134.12 |
| | Family | \$134.12 |
| Dental HMO | Employee Only | \$29.62 |
| | Employee +1 | \$65.17 |
| | Family | \$79.98 |
| Judges Plan | Employee Only | \$53.35 |
| | Employee +1 | \$162.17 |
| | Family | \$162.17 |