

Effective January 1, 2024

2024 Flex COBRA Rates

The following chart provides the 2024 COBRA medical plan rates by health plan option. Additional details about COBRA are provided in the *Benefits Book* on the HR Services & Support site.

Regular and fixed term full-time employees	You	You + spouse ¹	You + children	You + spouse ¹ + children
Flexible High-Deductible Health Plan (HDHP) All states except Hawaii	\$534.64	\$1,122.86	\$962.41	\$1,550.49
POS Kaiser Added Choice — Hawaii	\$877.39	\$1,842.53	\$1,579.31	\$2,544.44

1. Includes domestic partner.

BenefitConnect™ | COBRA

For questions about your COBRA benefits, call BenefitConnect™ | COBRA at 1-877-29-COBRA (1-877-292-6272). For international callers only: 858-314-5108. Specialists are available Monday through Friday, 8:00 a.m. to 6:00 p.m. Central Time. Relay service calls are accepted. You may also access plan information online at cobra.ehr.com.