

2012 COBRA Coverage Rates and Tiers

	Carrier	Group #	Div	Package ID	UHC COBRA Code	Plan Description	Coverage Level (24 Positions)	Coverage Code	Rate Start Date	Premium	Premium + 2% Admin. Fee
Medical Plan 1	HUMANA	692696	181	SFUCHMO3	AAUPHMO	HUMANA MED HMO AAUP	Participant Only	01	1/1/2012	\$498.00	\$507.96
							Participant + One	05	1/1/2012	\$994.00	\$1,013.88
							Participant + Family	04	1/1/2012	\$1,563.00	\$1,594.26
Medical Plan 2	HUMANA	692696	183	SFUCNPS2	AAUPPOS	HUMANA MED POS AAUP	Participant Only	01	1/1/2012	\$626.00	\$638.52
							Participant + One	05	1/1/2012	\$1,251.00	\$1,276.02
							Participant + Family	04	1/1/2012	\$1,758.00	\$1,793.16
Medical Plan 3	HUMANA	692696	185	SFUCNCF3	AAUPFIR	HUMANA MED FIRST 1000 AAUP	Participant Only	01	1/1/2012	\$444.00	\$452.88
							Participant + One	05	1/1/2012	\$888.00	\$905.76
							Participant + Family	04	1/1/2012	\$1,310.00	\$1,336.20
Medical Plan 4	HUMANA	692696	101	SFUCHMO3	REPHMO	HUMANA MED HMO REP	Participant Only	01	1/1/2012	\$611.00	\$623.22
							Participant + One	05	1/1/2012	\$1,222.00	\$1,246.44
							Participant + Family	04	1/1/2012	\$1,961.00	\$2,000.22
Medical Plan 5	HUMANA	692696	103	SFUCNPS5	REPPPOS	HUMANA MED POS REP	Participant Only	01	1/1/2012	\$643.00	\$655.86
							Participant + One	05	1/1/2012	\$1,274.00	\$1,299.48
							Participant + Family	04	1/1/2012	\$1,845.00	\$1,881.90
Medical Plan 6	HUMANA	692696	105	SFUCNCF3	REPFIR	HUMANA MED FIRST 1000 REP	Participant Only	01	1/1/2012	\$444.00	\$452.88
							Participant + One	05	1/1/2012	\$888.00	\$905.76
							Participant + Family	04	1/1/2012	\$1,310.00	\$1,336.20
Medical Plan 7	HUMANA	692696	221	SFUCHMO4	UNREPHMO	HUMANA MED HMO UNREP	Participant Only	01	1/1/2012	\$463.00	\$472.26
							Participant + One	05	1/1/2012	\$926.00	\$944.52
							Participant + Family	04	1/1/2012	\$1,486.00	\$1,515.72
Medical Plan 8	HUMANA	692696	223	SFUCNPS5	UNREPPPOS	HUMANA MED POS UNREP	Participant Only	01	1/1/2012	\$654.00	\$667.08
							Participant + One	05	1/1/2012	\$1,297.00	\$1,322.94
							Participant + Family	04	1/1/2012	\$1,873.00	\$1,910.46
Medical Plan 9	HUMANA	692696	225	SFUCNCF3	UNREPFIR	HUMANA MED FIRST 1000 UNREP	Participant Only	01	1/1/2012	\$444.00	\$452.88
							Participant + One	05	1/1/2012	\$888.00	\$905.76
							Participant + Family	04	1/1/2012	\$1,310.00	\$1,336.20
Dental Plan 1	HUMANA	692696	012	SF3UOCP1	DENAAUP	HUMANA AAUP BASIC DEN	Participant Only	01	1/1/2012	\$36.26	\$36.99
							Participant + One	05	1/1/2012	\$81.80	\$83.44
							Participant + Family	04	1/1/2012	\$123.20	\$125.66
Dental Plan 2	HUMANA	692696	025	SF3UOCP2	DENBASIC	HUMANA BASIC DEN	Participant Only	01	1/1/2012	\$15.94	\$16.26
							Participant + One	05	1/1/2012	\$35.88	\$36.60
							Participant + Family	04	1/1/2012	\$53.71	\$54.78
Dental Plan 3	HUMANA	692696	025	SF3UOCP4	DENHIGH	HUMANA HIGH DEN	Participant Only	01	1/1/2012	\$33.79	\$34.47
							Participant + One	05	1/1/2012	\$76.11	\$77.63
							Participant + Family	04	1/1/2012	\$112.36	\$114.61
Dental Plan 4	HUMANA	692696	025	SF3UOCP7	DENHIGHO	HUMANA HIGH ORTHO DEN	Participant Only	01	1/1/2012	\$29.08	\$29.66
							Participant + One	05	1/1/2012	\$67.59	\$68.94
							Participant + Family	04	1/1/2012	\$107.59	\$109.74
Dental Plan 5	HUMANA	692696	025	S3FUOCP3	DENORTHO	HUMANA ORTHO DEN	Participant Only	01	1/1/2012	\$20.17	\$20.57
							Participant + One	05	1/1/2012	\$46.45	\$47.38
							Participant + Family	04	1/1/2012	\$73.49	\$74.96

Where will the money be sent? 100% of Premium & 100% Admin Fee goes back to UC