UNIVERSITY OF CINCINNATI

2023 COBRA Coverage Rates and Tiers

Chard Snyder processes UC COBRA enrollments and payments.

Chard Snyder COBRA Call Center number: 888-993-4646 or

email [cobra@chard-Snyder.com](mailto:cobra@chard-Snyder.com)

# COBRA DENTAL (Delta Dental Effective 01/01/2023

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| --- | --- | --- | --- |
| **Employees in Group** | **Plan Description** | **Tier** | **Monthly COBRA Rate** |
| AAUP Bargaining Unit | AAUP BASIC DENTAL | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $38.69  $74.17 $82.56  $134.0812.851 |
| Non-AAUP | BASIC DENTAL | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $18.51  $35.47  $41.72  $67.17 |
| Non-AAUP | COMPREHENSIVE DENTAL PLAN | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $32.38  $62.27 $69.09  $109.01 |
| Non-AAUP | COMPREHENSIVE PLUS ORTHO DENTAL PLAN | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $36.52  $70.20  $88.86  $136.51 |

**COBRA MEDICAL**

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| --- | --- | --- | --- |
| AAUP Bargaining Unit | ANTHEM HDHP | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $425.09  $893.45  $893.45  $1,276.12.35 |
| AAUP Bargaining Unit | ANTHEM MED PPO | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $814.67  $1,625.71  $1,625.71  $2,381.61  $$2,381.6185 |
| Non-AAUP | ANTHEM HDHP | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $567.49  $1,220.09  $1,106.60  $1,872.72  $1,767.27.89 |
| Non-AAUP | ANTHEM MED PPO | Participant Only Participant + Spouse Participant + Child/ren Participant + Family | $761.52  $1,637.24  $1,484.97  $2,513.01  $2,234.423.14 |

\*If you are on a university Leave of Absence you are eligible to continue your university benefit plans (non-COBRA). Please contact benefits@uc.edu.