

SANTA MONICA UNITE HERE HEALTH BENEFIT TRUST FUND

Administered By: Benefit Programs Administration
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MARTIN LUTHER KING COMMUNITY HEALTHCARE PLAN Subsidized COBRA Rates Effective March 1, 2021 thru May 31, 2021*

CORE (medical rx only) COBRA rate:

Employee Only, Employee plus One & Employee plus family \$50.00

CORE Plus (medical rx United Concordia dental & vision) COBRA rate:

Employee Only, Employee plus One & Employee plus family \$50.00

CORE Plus (medical rx Delta dental & vision) COBRA rate:

Employee Only, Employee plus One & Employee plus family \$50.00

HEALTH NET HMO Subsidized COBRA Rates Effective March 1, 2021 thru May 31, 2021

CORE (medical rx only) COBRA rates:

Employee Only, Employee plus One & Employee plus family \$100.00

CORE Plus (medical rx United Concordia dental & vision) COBRA rates:

Employee Only, Employee plus One & Employee plus family \$100.00

CORE Plus (medical rx Delta dental & vision) COBRA rates:

Employee Only, Employee plus One & Employee plus family \$100.00

HEALTH NET HMO COBRA Rates Effective June 1, 2021

CORE (medical rx only) COBRA rates:

Employee Only	\$440.46
Employee plus One	\$830.88
Employee plus Family	\$1,102.48

CORE Plus (medical rx United Concordia dental & vision) COBRA rates:

Employee Only	\$465.31
Employee plus One	\$858.24
Employee plus family	\$1,132.93

CORE Plus (medical rx Delta dental & vision) COBRA rates:

Employee Only	\$538.88
Employee plus One	\$931.82
Employee plus family	\$1,206.50

- MLK COBRA Rates after May 31, 2021 have not as yet been developed.