

**Hawaii Employer-Union Health Benefits Trust Fund  
HSTA VB Monthly Active COBRA Rates**

Benefit Plan	Type of Enrollment	7/1/2016 - 6/30/2017	
		Regular COBRA	Disability COBRA
<b><i>MEDICAL PLANS</i></b>			
PPO - 90/10 Plan - HMSA Medical and CVS Caremark Prescription Drug	Self	\$ 585.84	\$ 861.54
	Two Party	1,422.10	2,091.33
	Family	1,813.38	2,666.76
PPO - 80/20 Plan - HMSA Medical and CVS Caremark Prescription Drug	Self	\$ 464.56	\$ 683.19
	Two-Party	1,127.83	1,658.58
	Family	1,438.00	2,114.73
HMO - Kaiser Comprehensive Medical Kaiser Prescription Drug	Self	\$ 466.44	\$ 685.95
	Two-Party	1,137.66	1,673.04
	Family	1,452.13	2,135.49
<b><i>DENTAL PLANS</i></b>			
HDS Dental	Self	\$ 34.08	\$ 50.13
	Two-Party	68.17	100.26
	Family	112.15	164.94
HDS Supplemental Dental	Self	\$ 18.66	\$ 27.45
	Two-Party	37.33	54.90
	Family	55.99	82.35
<b><i>VISION PLAN</i></b>			
VSP Vision	Self	\$ 6.63	\$ 9.75
	Two-Party	12.26	18.03
	Family	16.01	23.55
<b><i>CHIROPRACTIC PLAN</i></b>			
Royal State Chiro	Self	\$ 1.48	\$ 2.19
	Two-Party	2.97	4.38
	Family	3.16	4.65

**NOTE: Rates include the ACA Insurer fees for all fully-insured benefits as provided by the carriers and take into account deferral of Insurer fees for 2017. ACA Insurer fees not required for CVS Caremark prescription drug rates. The rates exclude the Reinsurance fees and Comparative Effectiveness Research (Patient-Centered Outcome Research Institute) fees assessed to comply with ACA.**

**The 2016/2017 Active COBRA rates do not include an EUTF administrative fee which may be added.**