

**STATE OF VERMONT**  
**COBRA - JANUARY 1, 2022**  
**MEDICAL PREMIUMS FOR CONTINUATION COVERAGE**  
**MONTHLY**

**TOTALCHOICE PLAN**

CLASS CODE	DEFINITION	TOTAL PREMIUM
01	One Person	\$1,132.94
1A	Two Person	\$2,265.90
1B	Family	\$3,115.60

**SELECTCARE POS PLAN**

CLASS CODE	DEFINITION	TOTAL PREMIUM
01	One Person	\$948.20
1A	Two Person	\$1,896.37
1B	Family	\$2,607.52

**DENTAL PLAN**

CLASS CODE	DEFINITION	TOTAL PREMIUM
01	One Person	\$33.70
1A	Two Person	\$61.99
1B	Family	\$117.45