

STATE OF VERMONT
COBRA - JANUARY 1, 2023
MEDICAL PREMIUMS FOR CONTINUATION COVERAGE
MONTHLY

TOTALCHOICE PLAN

CLASS CODE	DEFINITION	TOTAL PREMIUM
01	One Person	\$1,262.67
1A	Two Person	\$2,525.35
1B	Family	\$3,472.34

SELECTCARE POS PLAN

CLASS CODE	DEFINITION	TOTAL PREMIUM
01	One Person	\$1,056.77
1A	Two Person	\$2,113.51
1B	Family	\$2,906.08

DENTAL PLAN

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