

State of Connecticut - Office of the State Comptroller Healthcare Policy & Benefit Services Division 2021 - 2022 COBRA Dental Insurance Rates

Administered By CIGNA	Class Coverage	Monthly COBRA Rate	
	Employee Only	\$44.09	
Basic Dental Plan	Employee +1	\$134.49	
	Family	\$134.49	
	Employee Only	\$37.26	
Enhanced Dental Plan	Employee +1	\$113.65	
	Family	\$113.65	
	Employee Only	\$25.17	
Dental HMO	Employee +1	\$55.39	
	Family	\$67.97	
	Employee Only	\$46.09	
Judges Plan	Employee +1	\$140.13	
	Family	\$140.13	
	Employee Only	\$31.40	
Total Care DHMO	Employee +1	\$69.07	
	Family	\$84.77	