



Fresno Unified School District 2026 COBRA & Ed Code 7000 Rates

Regular 18 Month* COBRA Coverage (Includes 2% Administration Fee)						
	2025 Current Rates			Projected Rates for 2026		
	Single	Two Party	Family	Single	Two Party	Family
Option A - Medical/Rx Only	\$733.00	\$1,468.00	\$2,141.00	\$864.00	\$1,729.00	\$2,522.00
Option B - Medical/Rx Only	\$655.00	\$1,312.00	\$1,913.00	\$772.00	\$1,546.00	\$2,254.00
Option C - Kaiser	\$1,378.00	\$1,378.00	\$1,378.00	\$1,461.00	\$1,461.00	\$1,461.00
Delta Dental Plan	\$47.00	\$97.00	\$145.00	\$55.00	\$114.00	\$170.00
United Healthcare Dental	\$58.00	\$58.00	\$58.00	\$55.00	\$55.00	\$55.00
VSP Vision Plan	\$18.00	\$18.00	\$18.00	\$18.00	\$18.00	\$18.00
Extended COBRA Coverage (Months 19 through 29 if Disabled)						
	2025 Current Rates			Projected Rates for 2026		
	Single	Two Party	Family	Single	Two Party	Family
Option A - Medical/Rx Only	\$1,079.00	\$2,159.00	\$3,148.00	\$1,270.00	\$2,543.00	\$3,709.00
Option B - Medical/Rx Only	\$963.00	\$1,929.00	\$2,813.00	\$1,135.00	\$2,273.00	\$3,314.00
Option C - Kaiser	\$2,067.00	\$2,067.00	\$2,067.00	\$2,192.00	\$2,192.00	\$2,192.00
Delta Dental Plan	\$69.00	\$141.00	\$212.00	\$69.00	\$141.00	\$212.00
United Healthcare Dental	\$87.00	\$87.00	\$87.00	\$83.00	\$83.00	\$83.00
VSP Vision Plan	\$27.00	\$27.00	\$27.00	\$27.00	\$27.00	\$27.00
Ed Code 7000 Rates (For Certificated Retirees and all Non-Certificated Retirees who Retired after 1/1/2009)						
	2025 Current Rates			Projected Rates for 2026		
	Single	Two Party	Family	Single	Two Party	Family
Option A - Medical/Rx Only - Non-Medicare Retiree <65	\$1,191.00	\$2,383.00		\$1,719.00	\$3,439.00	
Option B - Medical/Rx Only - Non-Medicare Retiree <65	\$1,060.00	\$2,123.00		\$1,530.00	\$3,064.00	
Option C - Kaiser - Non-Medicare Retiree <65	\$971.00	\$1,942.00		\$1,029.16	\$2,058.32	
Option A - Medical/Rx Only - Retiree 65+ w/out Medicare	\$778.00	\$1,555.00		\$1,322.00	\$2,641.00	
Option B - Medical/Rx Only - Retiree 65+ w/out Medicare	\$699.00	\$1,395.00		\$1,187.00	\$2,370.00	
Medicare Advantage PPO Medicare Retiree	\$286.30	\$572.60		\$534.48	\$1,068.96	
Medicare Advantage PPO Over/Under 65 Combo		\$1,478.65			\$1,987.82	
Option C - Kaiser - Medical/Rx Only - Medicare Retiree	\$300.23	\$600.46		\$323.52	\$647.04	
Option C - Kaiser - Medical/Rx - Over/Under 65 Combo		\$1,271.23			\$1,352.68	
Delta Dental Plan	\$47.00	\$97.00		\$55.00	\$114.00	
United Healthcare Dental	\$58.00	\$58.00		\$55.00	\$55.00	
VSP Vision Plan	\$18.00	\$18.00		\$18.00	\$18.00	

*Up to 36 months for a qualified dependent beneficiary