



Department of Human Resources
Benefits Division

Milwaukee County
COBRA Rates
Effective January 1, 2026

Milwaukee County UHC PPO Plan	
Employee Only Coverage	\$705.30
Employee + Child/(ren) Coverage	\$1,269.54
Employee + Spouse Coverage	\$1,481.14
Family Coverage	\$2,412.59

Milwaukee County Dental Plan	
Employee Only Coverage	\$57.93
Employee + Child/(ren) Coverage	\$144.84
Employee + Spouse Coverage	\$144.84
Family Coverage	\$144.84

Milwaukee County Vision Plan	
Employee Only Coverage	\$4.16
Employee + Child/(ren) Coverage	\$8.50
Employee + Spouse Coverage	\$8.32
Family Coverage	\$12.66