

2026 U.S. COBRA RATES



MEDICAL OPTIONS

Coverage begins retroactively on the date your employment and active benefits coverage ends.

Monthly COBRA Rates	HMSA (Hawaii) Plan Rates
Employee	\$976.30
EE + Spouse/DP	\$2,235.73
EE + Child(ren)	\$1,854.99
Family	\$3,114.40
Cigna Global (Select Locations) Plan Rates	
Employee	\$837.98
EE + Spouse/DP	\$1,966.49
EE + Child(ren)	\$1,360.34
Family	\$3,239.71

CONTACT INFORMATION

Reimbursement Accounts: HSA, and/or FSA	Aptia 365 Reimbursement Services PH: 866-268-0142 MON - FRI 8am to 9pm EST Website: yourflexbenefits.aptia365.com
Continuation of Benefit Services (COBRA)	Aptia 365 Continuation of Benefits Services PH: 866-268-0142 MON - FRI 8 am to 9 pm EST Fax: 844-890-9653 Website: yourflexbenefits.aptia365.com

For greater details regarding all benefits, please go to benefits.motorolasolutions.com or yourflexbenefits.aptia365.com/aptia/client-resources

This summary represents general information regarding the Plans and policy provisions available at Motorola Solutions. You should not rely on this information other than as a general summary of the features of the Plans or policies. In the event of any difference between the terms of this Summary and the Plan documents or policies, the terms of the Plan documents or policies shall control.