

2022 UVM plus Employee Cost

<i>Rates Effective 1/1/2022</i>	Non-union, UAFT, UAPT (Grandfathered), Teamsters, & UE Total Monthly Cost			
	Employee	Employee plus Spouse	Employee plus Children	Employee plus Family
Retirees: Medicare Advantage Medi-Comp III	\$414.83	N/A	N/A	N/A
Retirees: Medicare Advantage J Plan	\$396.12	\$792.24	\$792.24	N/A
Retirees: J Grandfathered	\$1,117.98	\$2,235.94	\$2,234.59	\$3,037.59
BCBSVT VHP Open Access Plan	\$883.51	\$1,767.03	\$1,836.41	\$ 2,548.96
Northeast Delta Dental Base Plan	\$43.92	\$88.41	\$72.02	\$133.49
Northeast Delta Dental High Option #2 Plan	\$54.67	\$109.70	\$95.33	\$168.04
Monthly Employee Premium for High Option #2 Dental	\$10.75	\$21.29	\$23.31	\$34.55
VSP Vision Plan (100% Employee Paid)	\$7.26	\$14.51	\$13.68	\$22.77
COBRA: BCBSVT VHP Open Access Plan	\$901.18	\$1,802.37	\$1,873.14	\$2,599.94
COBRA: Northeast Delta Dental Base Plan	\$44.80	\$90.18	\$73.46	\$136.16
COBRA: Northeast Delta Dental High Option #2 Plan	\$55.76	\$111.90	\$97.24	\$ 171.40
COBRA: VSP Vision Plan (100% Employee Paid)	\$7.41	\$14.80	\$13.95	\$23.23