

2023 UVM plus Employee Cost

<i>Rates Effective 1/1/2023</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	\$ 134.97	N/A	N/A	N/A
Retirees: Medicare Advantage J Plan	\$ 148.59	\$ 297.18	N/A	N/A
Retirees: J Grandfathered	\$ 1,273.38	\$ 2,546.74	\$ 2,545.20	\$ 3,459.81
BCBSVT VHP Open Access Plan	\$ 1,006.32	\$ 2,012.65	\$ 2,091.67	\$ 2,903.27
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	\$ 1,026.44	\$ 2,052.90	\$ 2,133.50	\$ 2,961.33
COBRA: Northeast Delta Dental Base Plan	\$ 44.80	\$ 90.18	\$ 73.46	\$ 136.16
COBRA: Northeast Delta Dental High Option #2 Plan	\$ 55.76	\$ 111.89	\$ 97.24	\$ 171.40
COBRA: VSP Vision Plan (100% Employee Paid)	\$ 7.41	\$ 14.80	\$ 13.95	\$ 23.23