



2023 Contribution Rate Sheet

Employees Working Less than 75% of a Full-Time Schedule

HEALTH PLANS

Plan	Coverage Level	Monthly Cost		Weekly Cost*	
		University	Employee	University	Employee
BCBS PPO	Employee only	\$391.72	\$391.72	\$90.40	\$90.40
	Employee plus child(ren)	\$714.89	\$714.90	\$164.97	\$164.98
	Employee plus spouse	\$822.62	\$822.62	\$184.84	\$189.84
	Family	\$1,145.80	\$1,145.81	\$264.42	\$264.42
BU Health Savings Plan with Health Savings Account	Employee only	\$369.62	\$369.63	\$85.30	\$85.30
	Employee plus child(ren)	\$674.63	\$674.63	\$155.68	\$155.68
	Employee plus spouse	\$776.35	\$776.35	\$179.16	\$179.16
	Family	\$1,081.27	\$1,081.27	\$249.52	\$249.52

*Weekly costs are based on the 52 weekly pay periods in 2023

DENTAL PLANS

Plan	Coverage Level	Monthly Cost		Weekly Cost*	
		University	Employee	University	Employee
BU Dental Health Center Plan	Employee only	\$17.78	\$17.78	\$4.10	\$4.10
	Employee plus child(ren)	\$35.55	\$35.55	\$8.20	\$8.20
	Employee plus spouse	\$35.55	\$35.55	\$8.20	\$8.20
	Family	\$53.33	\$53.34	\$12.31	\$12.31
Dental Blue Freedom Plan	Employee only	\$21.50	\$21.51	\$4.96	\$4.96
	Employee plus child(ren)	\$43.00	\$43.01	\$9.92	\$9.93
	Employee plus spouse	\$43.00	\$43.01	\$9.92	\$9.93
	Family	\$64.51	\$64.51	\$14.89	\$14.89

*Weekly costs are based on the 52 weekly pay periods in 2023