2022 Contribution Rate Sheet

Employees Working Between 50% and 74% of a Full-Time Schedule

HEALTH PLANS

Plan	Coverage Level	Monthly Cost		Weekly Cost	
		University	Employee	University	Employee
BCBS PPO	Employee only	\$367.13	\$367.13	\$84.72	\$84.72
	Employee plus child(ren)	\$670.01	\$670.01	\$154.62	\$154.62
	Employee plus spouse	\$770.97	\$770.97	\$177.92	\$177.92
	Family	\$1,073.85	\$1,073.85	\$247.81	\$247.81
	Employee only	\$346.42	\$346.42	\$79.94	\$79.94
BU Health Savings Plan with Health Savings Account	Employee plus child(ren)	\$632.27	\$632.27	\$145.91	\$145.91
	Employee plus spouse	\$727.60	\$727.60	\$167.91	\$167.91
	Family	\$1,013.37	\$1,013.37	\$233.85	\$233.85

DENTAL PLANS

Plan BU Dental Health Center	Coverage Level	Monthly Cost		Weekly Cost	
		University	Employee	University	Employee
Plan	Employee only	\$22.01	\$22.01	\$5.08	\$5.08
	Employee plus child(ren)	\$44.00	\$44.00	\$10.15	\$10.15
	Employee plus spouse	\$44.00	\$44.00	\$10.15	\$10.15
	Family	\$66.00	\$66.00	\$15.23	\$15.23
Dental Blue Freedom	Employee only	\$26.61	\$26.61	\$6.14	\$6.14
Plan	Employee plus child(ren)	\$53.22	\$53.22	\$12.28	\$12.28
	Employee plus spouse	\$53.22	\$53.22	\$12.28	\$12.28
	Family	\$79.83	\$79.83	\$18.42	\$18.42