

# The University of Vermont Medical Center

## Full-time

| Medical     |                              |                  |                           |                  |
|-------------|------------------------------|------------------|---------------------------|------------------|
| Premier 250 | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (20%)           | UVMMC Cost (80%) |
| 1 Person    | \$9,461.64                   | \$1,892.28       | 72.78                     | 291.13           |
| 2 Person    | \$18,928.44                  | \$3,785.60       | 145.60                    | 582.41           |
| Family      | \$25,077.72                  | \$5,015.66       | 192.91                    | 771.62           |
| Premier 400 | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (20%)           | UVMMC Cost (80%) |
| 1 Person    | \$9,052.80                   | \$1,810.64       | 69.64                     | 278.55           |
| 2 Person    | \$18,110.64                  | \$3,622.06       | 139.31                    | 557.25           |
| Family      | \$23,994.12                  | \$4,798.82       | 184.57                    | 738.28           |
| HDHP 1500   | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (18%)           | UVMMC Cost (82%) |
| 1 Person    | \$8,317.44                   | \$1,497.08       | 57.58                     | 262.32           |
| 2 Person    | \$16,639.44                  | \$2,995.20       | 115.20                    | 524.78           |
| Family      | \$22,045.08                  | \$3,968.12       | 152.62                    | 695.27           |
| HDHP 3000   | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (18%)           | UVMMC Cost (82%) |
| 1 Person    | \$7,722.72                   | \$1,389.96       | 53.46                     | 243.56           |
| 2 Person    | \$15,449.64                  | \$2,780.96       | 106.96                    | 487.26           |
| Family      | \$20,468.76                  | \$3,684.46       | 141.71                    | 645.55           |
| Dental      |                              |                  |                           |                  |
| Core        | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (25%)           | UVMMC Cost (75%) |
| 1 Person    | \$516.00                     | \$128.96         | \$4.96                    | \$14.88          |
| 2 Person    | \$936.00                     | \$234.00         | \$9.00                    | \$27.00          |
| Family      | \$1,704.00                   | \$425.88         | \$16.38                   | \$49.15          |
| Buy-up      | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (25%)           | UVMMC Cost (75%) |
| 1 Person    | \$552.00                     | \$138.06         | \$5.31                    | \$15.92          |
| 2 Person    | \$1,008.00                   | \$251.94         | \$9.69                    | \$29.08          |
| Family      | \$1,836.00                   | \$458.90         | \$17.65                   | \$52.96          |
| Vision      |                              |                  |                           |                  |
| Core        | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (100%)          | UVMMC Cost (0%)  |
| 1 Person    | \$67.80                      | \$68.90          | \$2.65                    | \$0.00           |
| 2 Person    | \$118.68                     | \$120.64         | \$4.64                    | \$0.00           |
| Family      | \$169.32                     | \$172.12         | \$6.62                    | \$0.00           |
| Buy-up      | Annual Cost<br>(UVMMC & You) | Your Annual Cost | Per Pay Period Cost Share |                  |
|             |                              |                  | Your Cost (100%)          | UVMMC Cost (0%)  |
| 1 Person    | \$109.80                     | \$109.20         | \$4.20                    | \$0.00           |
| 2 Person    | \$192.24                     | \$191.36         | \$7.36                    | \$0.00           |
| Family      | \$274.44                     | \$273.00         | \$10.50                   | \$0.00           |