

## Medical and both Preventive and Optional Dental Rates for active full time employees effective January 1, 2022

All premiums are monthly.

Coverage is effective the first day of the month following your date of hire, if enrolled  
within 31 days of eligibility.

**You may enroll your dependents and/or yourself  
in the preventive dental and optional dental even if you are not enrolled in the  
health insurance.**

### \$900 deductible per individual/\$1800 per family

	<b>Health Premium</b>	<b>Preventive Dental Premium</b>	<b>Optional Dental Premium</b>	<b>Total Premium Per Month</b>	<b>Deduct: State Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$1,051.68	\$22.15	\$18.46	\$1,092.29	\$900.19	<b>\$192.10</b>
Employee plus Child(ren)	\$1,596.87	\$48.92	\$43.26	\$1,689.05	\$1,369.20	<b>\$319.85</b>
Employee plus Spouse	\$2,117.40	\$48.92	\$43.26	\$2,209.58	\$1,796.03	<b>\$413.55</b>
Family (employee, spouse and child(ren))	\$2,436.40	\$48.92	\$43.26	\$2,528.58	\$2,057.60	<b>\$470.98</b>
Split (both spouses employed by UW &/or State and have child(ren))	\$1,218.20	\$24.46	\$21.63	\$1,264.29	\$1,038.62	<b>\$225.67</b>

### \$2,000 deductible per individual/\$4,000 per family

	<b>Health Premium</b>	<b>Preventive Dental Premium</b>	<b>Optional Dental Premium</b>	<b>Total Premium Per Month</b>	<b>Deduct: State Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$969.98	\$22.15	\$18.46	\$1,010.59	\$900.19	<b>\$110.40</b>
Employee plus Child(ren)	\$1,472.43	\$48.92	\$43.26	\$1,564.61	\$1,369.20	<b>\$195.41</b>
Employee plus Spouse	\$1,952.38	\$48.92	\$43.26	\$2,044.56	\$1,796.03	<b>\$248.53</b>
Family (employee, spouse and child(ren))	\$2,244.88	\$48.92	\$43.26	\$2,337.06	\$2,057.60	<b>\$279.46</b>
Split (both spouses employed by UW &/or State and have child(ren))	\$1,122.44	\$24.46	\$21.63	\$1,168.53	\$1,038.62	<b>\$129.91</b>

**\$4,000 deductible per individual/\$8,000 per family**

	<b>Health Premium</b>	<b>Preventive Dental Premium</b>	<b>Optional Dental Premium</b>	<b>Total Premium Per Month</b>	<b>Deduct: State Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$889.05	\$22.15	\$18.46	\$929.66	\$900.19	<b>\$29.47</b>
Employee plus Child(ren)	\$1,349.92	\$48.92	\$43.26	\$1,442.10	\$1,369.20	<b>\$72.90</b>
Employee plus Spouse	\$1,789.96	\$48.92	\$43.26	\$1,882.14	\$1,796.03	<b>\$86.11</b>
Family (employee, spouse and child(ren))	\$2,059.90	\$48.92	\$43.26	\$2,152.08	\$2,057.60	<b>\$94.48</b>
Split (both spouses employed by UW &/or State and have child(ren))	\$1,029.95	\$24.46	\$21.63	\$1,076.04	\$1,038.62	<b>\$37.42</b>

**\$1,500 deductible (High Deductible Health Plan)**

	<b>Health Premium</b>	<b>Preventive Dental Premium</b>	<b>Optional Dental Premium</b>	<b>Total Premium Per Month</b>	<b>Deduct: State Contribution</b>	<b>Employee Contribution</b>
Employee Only	\$970.17	\$22.15	\$18.46	\$1,010.78	\$900.19	<b>\$110.59</b>

**\$3,000 deductible (High Deductible Health Plan)**

	<b>Health Premium</b>	<b>Preventive Dental Premium</b>	<b>Optional Dental Premium</b>	<b>Total Premium Per Month</b>	<b>Deduct: State Contribution</b>	<b>Employee Contribution</b>
Employee plus Child(ren)	\$1,470.08	\$48.92	\$43.26	\$1,562.26	\$1,369.20	<b>\$193.06</b>
Employee plus Spouse	\$1,949.28	\$48.92	\$43.26	\$2,041.46	\$1,796.03	<b>\$245.43</b>
Family (employee, spouse and child(ren))	\$2,247.70	\$48.92	\$43.26	\$2,339.88	\$2,057.60	<b>\$282.28</b>
Split (both spouses employed by UW &/or State and have child(ren))	\$1,123.85	\$24.46	\$21.63	\$1,169.94	\$1,038.62	<b>\$131.32</b>