

COBRA Contribution Rates

The charts below summarize your contribution rates for coverage in 2022.

UHC Medical Coverage

Monthly Contributions

GW Health Savings Plan (HSP)

Participant Only	\$611.84
Participant + SP/DP	\$1,284.85
Participant + Child(ren)	\$1,162.48
Family	\$1,835.51

GW PPO

EE	\$684.29
EE+SP/DP	\$1,437.00
EE+ Child(ren)	\$1,300.15
Family	\$2,052.87

Dental Coverage

Monthly Contributions

DMO

Participant Only	\$14.84
Participant + One	\$33.92
Participant + Family	\$41.06

High PPO

Participant Only	\$52.77
Participant + One	\$114.46
Participant + Family	\$138.50

Low PPO

Participant Only	\$31.57
Participant + One	\$67.11
Participant + Family	\$81.22

UHC Vision Coverage

Monthly Contributions

Basic

Participant Only	\$5.09
Participant + One	\$9.42
Participant + Family	\$15.02

Enhanced

Participant Only	\$7.38
Participant + One	\$13.67
Participant + Family	\$21.79