

# Contribution Rates

The charts below summarize your contribution rates for coverage in 2024.

## UHC Medical Coverage

### Full-Time with Benefits Salary ≤ \$35,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

#### GW Health Savings Plan (HSP)

EE	\$36.41	\$654.72	\$16.80	\$302.18	\$48.55	\$872.96
EE+SP/DP	\$113.53	\$1,337.84	\$52.40	\$617.46	\$151.37	\$1,783.79
EE+ Child(ren)	\$99.50	\$1,213.64	\$45.92	\$560.14	\$132.67	\$1,618.19
Family	\$176.62	\$1,896.77	\$81.52	\$875.43	\$235.49	\$2,529.03

#### GW PPO

EE	\$48.03	\$724.94	\$22.17	\$334.59	\$64.04	\$966.59
EE+SP/DP	\$144.13	\$1,479.10	\$66.52	\$682.66	\$192.17	\$1,972.13
EE+ Child(ren)	\$126.64	\$1,342.01	\$58.45	\$619.39	\$168.85	\$1,789.35
Family	\$222.73	\$2,096.19	\$102.80	\$967.47	\$296.97	\$2,794.92

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

## UHC Medical Coverage

### Full-Time with Benefits Salary \$35,000.01 - \$50,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

#### GW Health Savings Plan (HSP)

EE	\$58.79	\$632.34	\$27.13	\$291.85	\$78.39	\$843.12
EE+SP/DP	\$183.38	\$1,267.99	\$84.64	\$585.23	\$244.51	\$1,690.65
EE+ Child(ren)	\$160.75	\$1,152.39	\$74.19	\$531.87	\$214.33	\$1,536.52
Family	\$285.35	\$1,788.04	\$131.70	\$825.25	\$380.47	\$2,384.05

#### GW PPO

EE	\$87.68	\$685.29	\$40.47	\$316.29	\$116.91	\$913.72
EE+SP/DP	\$263.05	\$1,360.18	\$121.41	\$627.78	\$350.73	\$1,813.57
EE+ Child(ren)	\$231.14	\$1,237.51	\$106.68	\$571.16	\$308.19	\$1,650.01
Family	\$406.49	\$1,912.43	\$187.61	\$882.66	\$541.99	\$2,549.91

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

## UHC Medical Coverage

### Full-Time with Benefits Salary \$50,000.01 - \$90,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

#### GW Health Savings Plan (HSP)

EE	\$90.47	\$600.66	\$41.76	\$277.23	\$120.63	\$800.88
EE+SP/DP	\$224.19	\$1,227.18	\$103.47	\$566.39	\$298.92	\$1,636.24
EE+ Child(ren)	\$199.96	\$1,113.18	\$92.29	\$513.78	\$266.61	\$1,484.24
Family	\$321.17	\$1,752.22	\$148.23	\$808.72	\$428.23	\$2,336.29

#### GW PPO

EE	\$134.91	\$638.06	\$62.27	\$294.49	\$179.88	\$850.75
EE+SP/DP	\$404.70	\$1,218.53	\$186.78	\$562.40	\$539.60	\$1,624.71
EE+ Child(ren)	\$355.59	\$1,113.06	\$164.12	\$513.72	\$474.12	\$1,484.08
Family	\$625.39	\$1,693.53	\$288.64	\$781.63	\$833.85	\$2,258.04

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

## UHC Medical Coverage

Full-Time with Benefits Salary \$90,000.01 - \$130,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

### GW Health Savings Plan (HSP)

EE	\$98.61	\$592.52	\$45.51	\$273.47	\$131.48	\$790.03
EE+SP/DP	\$248.14	\$1,203.23	\$114.53	\$555.34	\$330.85	\$1,604.31
EE+ Child(ren)	\$223.26	\$1,089.88	\$103.04	\$503.02	\$297.68	\$1,453.17
Family	\$347.65	\$1,725.74	\$160.45	\$796.50	\$463.53	\$2,300.99

### GW PPO

EE	\$147.04	\$625.93	\$67.86	\$288.89	\$196.05	\$834.57
EE+SP/DP	\$441.11	\$1,182.12	\$203.59	\$545.59	\$588.15	\$1,576.16
EE+ Child(ren)	\$387.59	\$1,081.06	\$178.89	\$498.95	\$516.79	\$1,441.41
Family	\$675.29	\$1,643.63	\$311.67	\$758.60	\$900.39	\$2,191.51

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

# UHC Medical Coverage

Full-Time with Benefits Salary \$130,000.01 - \$200,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

## GW Health Savings Plan (HSP)

EE	\$107.47	\$583.66	\$49.60	\$269.38	\$143.29	\$778.21
EE+SP/DP	\$290.51	\$1,160.86	\$134.08	\$535.78	\$387.35	\$1,547.81
EE+ Child(ren)	\$263.26	\$1,049.88	\$121.50	\$484.56	\$351.01	\$1,399.84
Family	\$401.86	\$1,671.53	\$185.47	\$771.48	\$535.81	\$2,228.71

## GW PPO

EE	\$160.27	\$612.70	\$73.97	\$282.78	\$213.69	\$816.93
EE+SP/DP	\$480.82	\$1,142.41	\$221.92	\$527.27	\$641.09	\$1,523.21
EE+ Child(ren)	\$422.47	\$1,046.18	\$194.99	\$482.85	\$563.29	\$1,394.91
Family	\$743.00	\$1,575.92	\$342.92	\$727.35	\$990.67	\$2,101.23

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

# UHC Medical Coverage

## Full-Time with Benefits Salary \$200,000.01 - \$300,000

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

### GW Health Savings Plan (HSP)

EE	\$117.14	\$573.99	\$54.06	\$264.92	\$156.19	\$765.32
EE+SP/DP	\$333.85	\$1,117.52	\$154.08	\$515.78	\$445.13	\$1,490.03
EE+ Child(ren)	\$305.41	\$1,007.73	\$140.96	\$465.11	\$407.21	\$1,343.64
Family	\$448.76	\$1,624.63	\$207.12	\$749.83	\$598.35	\$2,166.17

### GW PPO

EE	\$174.69	\$598.28	\$80.63	\$276.13	\$232.92	\$797.71
EE+SP/DP	\$524.09	\$1,099.14	\$241.89	\$507.30	\$698.79	\$1,465.52
EE+ Child(ren)	\$460.51	\$1,008.14	\$212.54	\$465.30	\$614.01	\$1,344.19
Family	\$809.89	\$1,509.03	\$373.80	\$696.48	\$1,079.85	\$2,012.04

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

# UHC Medical Coverage

## Full-Time with Benefits Salary >\$300,000.01

Monthly		Bi-Weekly		Paid Over 9 Months Monthly Contributions	
Employee Contributions	GW Contributions	Employee Contributions	GW Contributions	Jan-May and Sept-Dec	GW Contributions

### GW Health Savings Plan (HSP)

EE	\$127.69	\$563.44	\$58.93	\$260.05	\$170.25	\$751.25
EE+SP/DP	\$390.03	\$1,061.34	\$180.01	\$489.85	\$520.04	\$1,415.12
EE+ Child(ren)	\$349.11	\$964.03	\$161.13	\$444.94	\$465.48	\$1,285.37
Family	\$510.86	\$1,562.53	\$235.78	\$721.17	\$681.15	\$2,083.37

### GW PPO

EE	\$190.43	\$582.54	\$87.89	\$268.86	\$253.91	\$776.72
EE+SP/DP	\$571.27	\$1,051.96	\$263.66	\$485.52	\$761.69	\$1,402.61
EE+ Child(ren)	\$501.95	\$966.70	\$231.67	\$446.17	\$669.27	\$1,288.93
Family	\$882.78	\$1,436.14	\$407.44	\$662.83	\$1,177.04	\$1,914.85

EE = Employee | SP/DP = Spouse/Domestic Partner

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

For SEIU Local 32 employee contributions, please contact GW Benefits, as these contributions differ from those presented above.

## Dental Coverage

### Full-Time and Part-Time

Coverage Categories	Monthly (Paid Over 12 months)	Bi-Weekly	Paid Over 9 Months Monthly Contributions
---------------------	-------------------------------	-----------	--

#### DMO

Employee Only	\$15.34	\$7.08	\$20.45
Employee + One	\$35.06	\$16.18	\$46.75
Employee + Family	\$42.43	\$19.58	\$56.57

#### High PPO

Employee Only	\$54.55	\$25.18	\$72.73
Employee + One	\$118.32	\$54.61	\$157.76
Employee + Family	\$143.16	\$66.07	\$190.88

#### Low PPO

Employee Only	\$32.64	\$15.06	\$43.52
Employee + One	\$69.37	\$32.02	\$92.49
Employee + Family	\$83.96	\$38.75	\$111.95

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.

## UHC Vision Coverage

### Full-Time and Part-Time

	Monthly (Paid Over 12 months)	Bi-Weekly	Paid Over 9 Months Monthly Contributions
--	-------------------------------	-----------	--

#### Basic

Employee Only	\$5.14	\$2.37	\$6.85
Employee + One	\$9.52	\$4.39	\$12.69
Employee + Family	\$15.18	\$7.01	\$20.24

#### Enhanced

Employee Only	\$7.46	\$3.44	\$9.95
Employee + One	\$13.80	\$6.37	\$18.40
Employee + Family	\$22.00	\$10.15	\$29.33

9-Month Employees, please note: There are no employee or GW contributions during June, July or August.