

Full-Time Faculty and Staff Health Plans Premium Rates	2022	2022 Monthly Rates		2022 Biweekly Rates	
	Total Monthly Rate	Employer	Employee	Employer	Employee

Blue Edge CDHP*					
Single	\$503.02	\$ 402.42	\$ 100.60	\$ 201.21	\$ 50.30
Single+Spouse	\$1,131.82	\$ 905.46	\$ 226.36	\$ 452.73	\$ 113.18
Single+Children	\$1,041.26	\$ 833.01	\$ 208.26	\$ 416.50	\$ 104.13
Family	\$1,559.38	\$ 1,247.50	\$ 311.88	\$ 623.75	\$ 155.94

HMO Illinois					
Single	\$651.27	\$ 518.07	\$ 133.20	\$ 259.04	\$ 66.60
Single+Spouse	\$1,304.30	\$ 1,037.16	\$ 267.14	\$ 518.58	\$ 133.57
Single+Children	\$1,188.38	\$ 945.02	\$ 243.36	\$ 472.51	\$ 121.68
Family	\$1,695.28	\$ 1,347.94	\$ 347.34	\$ 673.97	\$ 173.67

Blue Cross Blue Shield PPO					
Single	\$911.14	\$ 728.91	\$ 182.23	\$ 364.46	\$ 91.11
Single+Spouse	\$2,050.06	\$ 1,640.04	\$ 410.02	\$ 820.02	\$ 205.01
Single+Children	\$1,886.04	\$ 1,508.84	\$ 377.20	\$ 754.42	\$ 188.60
Family	\$2,824.50	\$ 2,259.60	\$ 564.90	\$ 1,129.80	\$ 282.45

Dental					
Single	\$41.08	\$ 26.00	\$ 15.08	\$ 13.00	\$ 7.54
Single+Spouse	\$90.36	\$ 57.20	\$ 33.16	\$ 28.60	\$ 16.58
Single+Children	\$85.04	\$ 53.84	\$ 31.20	\$ 26.92	\$ 15.60
Family	\$123.26	\$ 78.02	\$ 45.24	\$ 39.01	\$ 22.62

Vision					
Single	\$ 8.84	\$ -	\$ 8.84	\$ -	\$ 4.42
Single+Spouse	\$ 14.10	\$ -	\$ 14.10	\$ -	\$ 7.05
Single+Children	\$ 15.09	\$ -	\$ 15.09	\$ -	\$ 7.55
Family	\$ 24.12	\$ -	\$ 24.12	\$ -	\$ 12.06

Supplemental Life	Rates are based on age bracket and salary
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Accidental Death & Dismemberment	Rates are based on salary
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Dependent Life					
Option I - \$10,000/\$5,000 coverage	\$ 3.29	\$ -	\$3.29	\$ -	\$1.65
Option II - \$20,000/\$10,000 coverage	\$ 6.58	\$ -	\$6.58	\$ -	\$3.29

*When you enroll in the Blue Cross Blue Shield CDHP and establish a tax-free Health Savings Account (HSA) DePaul will contribute a maximum of \$500 (Single) or \$1,000 (Family) per year for use towards medical expenses.

Note: COBRA rates available on separate document on HR website