ENROLLMENT SHEET - 1 UNITEDHEALTHCARE INSURANCE COMPANY EAST GEORGIA STATE COLLEGE 2022-202727-11

<u>Insured Categories</u> Graduate

Graduate Undergraduate

Basic

		Annual (A-)	Monthly (MX)	<u> Fall (F-)</u>	Spring/Summer (J-)
1	Student	3,744.00	312.00	1,569.00	2,175.00
2	Spouse	4,118.00	344.00	1,726.00	2,392.00
3	One Child	4,118.00	344.00	1,726.00	2,392.00
4	Two or more Children	8,237.00	687.00	3,452.00	4,785.00
5	Spouse and 2 or more Children	12,355.00	1,030.00	5,179.00	7,176.00

		Summer (S-)
1	Student	626.00
2	Spouse	688.00
3	One Child	688.00
4	Two or more Children	1,376.00
5	Spouse and 2 or more Children	2,064.00

Effective/Expiration Dates

Voluntary

Annual	8/1/2022	to	7/31/2023
Monthly			
Fall	8/1/2022	to	12/31/2022
Spring/Summer	1/1/2023	to	7/31/2023
Summer	6/1/2023	to	7/31/2023

ENROLLMENT SHEET - 2 UNITEDHEALTHCARE INSURANCE COMPANY EAST GEORGIA STATE COLLEGE 2022-202727-11

Insured Categories Dental-Low

Dental Low PPO

		<u>Annual (A-)</u>
6	Student	239.77
7	Spouse	239.77
8	One Child	348.11
9	Two or more Children	348.11
10	Spouse and 2 or more Children	638.11

Effective/Expiration Dates

Dental Low PPO

8/1/2022 to 7/31/2023 Annual

ENROLLMENT SHEET - 3 UNITEDHEALTHCARE INSURANCE COMPANY EAST GEORGIA STATE COLLEGE 2022-202727-11

Insured Categories Vision

Vision

		Annual (A-)
11	Student	140.03
12	Spouse	126.03
13	One Child	172.00
14	Two or more Children	172.00
15	Spouse and 2 or more Children	298.82

Effective/Expiration Dates

Vision

8/1/2022 to 7/31/2023 Annual

ENROLLMENT SHEET - LOCATIONS UNITEDHEALTHCARE INSURANCE COMPANY EAST GEORGIA STATE COLLEGE 2022-202727-11

<u>Location Name</u> <u>Location Number</u>

East Georgia College

1