

Drexel University Full-Time Employees 2018 Monthly Medical Contributions

MEDICAL

Keystone Point of Service						
Coverage level	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$66.67	\$0.00	\$66.67	(\$66.67)	\$0.00	(\$66.67)
Employee Only	\$425.54	\$92.70	\$518.24	\$72.25	\$40.46	\$112.71
Employee + Child	\$555.83	\$147.38	\$703.21	\$190.82	\$64.31	\$255.13
Employee + Children	\$714.97	\$156.02	\$870.99	\$280.70	\$68.05	\$348.75
Employee + Spouse	\$837.49	\$213.26	\$1,050.76	\$282.48	\$93.04	\$375.52
Family	\$1,105.75	\$273.81	\$1,379.56	\$387.60	\$119.46	\$507.06

Personal Choice PPO - Basic Option						
Coverage level	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$66.67	\$0.00	\$66.67	(\$66.67)	\$0.00	(\$66.67)
Employee Only	\$588.34	\$92.70	\$681.04	\$210.80	\$40.45	\$251.24
Employee + Child	\$499.12	\$147.38	\$646.50	\$699.55	\$64.30	\$763.85
Employee + Children	\$493.62	\$156.02	\$649.64	\$1,104.76	\$68.05	\$1,172.81
Employee + Spouse	\$704.57	\$213.26	\$917.83	\$1,093.45	\$93.04	\$1,186.49
Family	\$996.53	\$273.81	\$1,270.34	\$1,400.89	\$119.46	\$1,520.35

Personal Choice PPO - High Option						
Coverage level	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$66.67	\$0.00	\$66.67	(\$66.67)	\$0.00	(\$66.67)
Employee Only	\$548.27	\$92.70	\$640.96	\$369.68	\$40.45	\$410.13
Employee + Child	\$416.64	\$147.38	\$564.02	\$960.23	\$64.30	\$1,024.53
Employee + Children	\$441.64	\$156.02	\$597.66	\$1,394.36	\$68.05	\$1,462.41
Employee + Spouse	\$618.62	\$213.26	\$831.88	\$1,446.73	\$93.04	\$1,539.77
Family	\$827.93	\$273.81	\$1,101.74	\$1,925.91	\$119.46	\$2,045.37

High Deductible Health Plan with HSA						
Coverage level	Drexel Pays			Employee Pays		
	Medical & Rx	Rx	Total Medical & Rx	Medical & Rx	Rx	Total Medical & Rx
Waive Coverage	\$66.67	\$0.00	\$66.67	(\$66.67)	\$0.00	(\$66.67)
Employee Only	\$451.91	\$0.00	\$451.91	\$39.83	\$0.00	\$39.83
Employee + Child	\$628.30	\$0.00	\$628.30	\$118.61	\$0.00	\$118.61
Employee + Children	\$767.36	\$0.00	\$767.36	\$183.31	\$0.00	\$183.31
Employee + Spouse	\$936.12	\$0.00	\$936.12	\$175.53	\$0.00	\$175.53
Family	\$1,226.82	\$0.00	\$1,226.82	\$243.61	\$0.00	\$243.61

DENTAL

Coverage level	CIGNA Base Plan		CIGNA Preferred Plan	
	Drexel Pays	Employee Pays	Drexel Pays	Employee Pays
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$9.58	\$9.58	\$14.22	\$14.22
Employee + Child	\$28.29	\$28.29	\$46.52	\$46.52
Employee + Children	\$28.29	\$28.29	\$46.52	\$46.52
Employee + Spouse	\$28.29	\$28.29	\$46.52	\$46.52
Family	\$28.29	\$28.29	\$46.52	\$46.52

VISION

Coverage level	Drexel Vision Care	
	Drexel Pays	Employee Pays
Waive Coverage	\$0.00	\$0.00
Employee Only	\$2.03	\$2.04
Employee + Child	\$4.69	\$4.69
Employee + Children	\$4.69	\$4.69
Employee + Spouse	\$4.69	\$4.69
Family	\$4.69	\$4.69