Drexel University Full-Time Employees 2026 Monthly Medical Contributions

MEDICAL

	Point of Service					
	Drexel Pays			Employee Pays		
Coverage level	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	\$517.70	\$112.76	\$630.46	\$87.89	\$49.21	\$137.10
Employee + Child	\$676.19	\$179.29	\$855.48	\$232.14	\$78.23	\$310.37
Employee + Children	\$869.80	\$189.80	\$1,059.60	\$341.48	\$82.79	\$424.27
Employee + Spouse	\$1,018.86	\$259.45	\$1,278.31	\$343.65	\$113.19	\$456.84
Family	\$1,345.22	\$333.11	\$1,678.33	\$471.53	\$145.33	\$616.86

	Personal Choice PPO - Basic Option					
	Drexel Pays			Employee Pays		
Coverage level	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	\$715.76	\$112.76	\$828.52	\$256.44	\$49.21	\$305.65
Employee + Child	\$607.21	\$179.29	\$786.50	\$851.04	\$78.23	\$929.27
Employee + Children	\$600.52	\$189.80	\$790.32	\$1,344.00	\$82.79	\$1,426.79
Employee + Spouse	\$857.15	\$259.45	\$1,116.60	\$1,330.24	\$113.19	\$1,443.43
Family	\$1,212.33	\$333.11	\$1,545.44	\$1,704.26	\$145.33	\$1,849.59

	Personal Choice PPO - High Option					
	Drexel Pays			Employee Pays		
Coverage level	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	\$667.00	\$112.76	\$779.76	\$449.74	\$49.21	\$498.95
Employee + Child	\$506.88	\$179.29	\$686.17	\$1,168.16	\$78.23	\$1,246.39
Employee + Children	\$537.28	\$189.80	\$727.08	\$1,696.31	\$82.79	\$1,779.10
Employee + Spouse	\$752.59	\$259.45	\$1,012.04	\$1,760.03	\$113.19	\$1,873.22
Family	\$1,007.22	\$333.11	\$1,340.33	\$2,342.98	\$145.33	\$2,488.31

	Consumer Directed Health Plan with HSA						
		Drexel Pays		Employee Pays			
Coverage level	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	\$549.77	\$0.00	\$549.77	\$48.45	\$0.00	\$48.45	
Employee + Child	\$764.36	\$0.00	\$764.36	\$144.29	\$0.00	\$144.29	
Employee + Children	\$933.53	\$0.00	\$933.53	\$223.01	\$0.00	\$223.01	
Employee + Spouse	\$1,138.84	\$0.00	\$1,138.84	\$213.54	\$0.00	\$213.54	
Family	\$1,492.49	\$0.00	\$1,492.49	\$296.37	\$0.00	\$296.37	

DENTAL

	Cigna DHMO		Cigna Base		Cigna Preferred	
Coverage level	Drexel Pays	Employee Pays	Drexel Pays	Employee Pays	Drexel Pays	Employee Pays
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$5.64	\$5.65	\$11.00	\$11.01	\$16.82	\$16.83
Employee + Child	\$14.24	\$14.24	\$32.47	\$32.47	\$55.01	\$55.01
Employee + Children	\$14.24	\$14.24	\$32.47	\$32.47	\$55.01	\$55.01
Employee + Spouse	\$14.24	\$14.24	\$32.47	\$32.47	\$55.01	\$55.01
Family	\$14.24	\$14.24	\$32.47	\$32.47	\$55.01	\$55.01

VISION

	Davis Vision			
Coverage level	Drexel	Employee		
Waive Coverage	\$0.00	\$0.00		
Employee Only	\$2.16	\$2.17		
Employee + Child	\$4.99	\$4.99		
Employee + Children	\$4.99	\$4.99		
Employee + Spouse	\$4.99	\$4.99		
Family	\$4.99	\$4.99		