

Drexel University Part-Time Employees 2019 Monthly Medical Contributions

MEDICAL

Coverage level	Keystone Point of Service					
	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$392.36	\$74.14	\$466.50	\$110.41	\$60.33	\$170.74
Employee + Child	\$465.03	\$116.39	\$581.42	\$289.08	\$97.41	\$386.49
Employee + Children	\$580.37	\$123.21	\$703.58	\$425.25	\$103.10	\$528.35
Employee + Spouse	\$703.21	\$168.40	\$871.61	\$427.96	\$140.97	\$568.93
Family	\$921.08	\$216.22	\$1,137.30	\$587.21	\$180.98	\$768.19

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
Employee Only	\$4.91	\$14.73	\$7.29	\$21.87
Employee + Child	\$14.52	\$43.58	\$23.84	\$71.52
Employee + Children	\$14.52	\$43.58	\$23.84	\$71.52
Employee + Spouse	\$14.52	\$43.58	\$23.84	\$71.52
Family	\$14.52	\$43.58	\$23.84	\$71.52

VISION

Coverage level	Personal Choice PPO - Basic Option					
	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$486.83	\$74.14	\$560.97	\$320.30	\$60.33	\$380.63
Employee + Child	\$150.83	\$116.39	\$267.22	\$1,059.82	\$97.41	\$1,157.23
Employee + Children	-\$10.43	\$123.21	\$112.78	\$1,624.80	\$103.10	\$1,727.90
Employee + Spouse	\$159.44	\$168.40	\$327.84	\$1,656.56	\$140.97	\$1,797.53
Family	\$299.05	\$216.22	\$515.27	\$2,122.34	\$180.98	\$2,303.32

Coverage level	Drexel Vision Care	
	Drexel Pays	Employee Pays
	Waive Coverage	\$0.00
Employee Only	\$1.08	\$3.25
Employee + Child	\$2.49	\$7.49
Employee + Children	\$2.49	\$7.49
Employee + Spouse	\$2.49	\$7.49
Family	\$2.49	\$7.49

Coverage level	Personal Choice PPO - High Option					
	Drexel Pays			Employee Pays		
	Medical	Rx	Total Medical & Rx	Medical	Rx	Total Medical & Rx
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$366.11	\$74.14	\$440.25	\$561.02	\$60.33	\$621.35
Employee + Child	-\$9.85	\$116.39	\$106.54	\$1,400.49	\$97.41	\$1,497.90
Employee + Children	-\$10.41	\$123.21	\$112.80	\$1,864.77	\$103.10	\$1,967.87
Employee + Spouse	-\$14.24	\$168.40	\$154.16	\$2,100.24	\$140.97	\$2,241.21
Family	-\$18.29	\$216.22	\$197.93	\$2,799.67	\$180.98	\$2,980.65

Coverage level	High Deductible Health Plan with HSA					
	Drexel Pays			Employee Pays		
	Medical & Rx	Rx	Total Medical & Rx	Medical & Rx	Rx	Total Medical & Rx
Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$436.32	\$0.00	\$436.32	\$60.33	\$0.00	\$60.33
Employee + Child	\$574.68	\$0.00	\$574.68	\$179.70	\$0.00	\$179.70
Employee + Children	\$682.47	\$0.00	\$682.47	\$277.71	\$0.00	\$277.71
Employee + Spouse	\$856.83	\$0.00	\$856.83	\$265.93	\$0.00	\$265.93
Family	\$1,116.05	\$0.00	\$1,116.05	\$369.08	\$0.00	\$369.08