

Drexel University Part-Time Employees 2021 Monthly Health Plans 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	\$400.26	\$75.64	\$475.90	\$112.62	\$61.53	\$174.15
Employee + Child	\$474.40	\$118.73	\$593.14	\$294.86	\$99.36	\$394.23
Employee + Children	\$592.08	\$125.70	\$717.77	\$433.76	\$105.16	\$538.92
Employee + Spouse/Domestic Partner	\$717.39	\$171.80	\$889.19	\$436.52	\$143.79	\$580.30
Family	\$939.65	\$220.59	\$1,160.24	\$598.96	\$184.60	\$783.56

Dental Coverage Level	Cigna DHMO		Cigna Base		Cigna Preferred	
	Drexel Pays	Employee Pays	Drexel Pays	Employee Pays	Drexel Pays	Employee Pays
	Waive Coverage	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Employee Only	\$2.62	\$7.82	\$4.38	\$14.73	\$7.34	\$21.87
Employee + Child	\$6.61	\$19.72	\$12.78	\$43.58	\$23.97	\$71.52
Employee + Children	\$6.61	\$19.72	\$12.78	\$43.58	\$23.97	\$71.52
Employee + Spouse/Domestic Partner	\$6.61	\$19.72	\$12.78	\$43.58	\$23.97	\$71.52
Family	\$6.61	\$19.72	\$12.78	\$43.58	\$23.97	\$71.52

Medical 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	\$496.65	\$75.64	\$572.29	\$326.71	\$61.53	\$388.24
Employee + Child	\$153.97	\$118.73	\$272.70	\$1,081.02	\$99.36	\$1,180.38
Employee + Children	(\$10.48)	\$125.70	\$115.22	\$1,657.29	\$105.16	\$1,762.46
Employee + Spouse/Domestic Partner	\$162.81	\$171.80	\$334.61	\$1,689.69	\$143.79	\$1,833.48
Family	\$305.27	\$220.59	\$525.86	\$2,164.79	\$184.60	\$2,349.39

Vision Coverage Level	Davis Vision	
	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/Domestic Partner	\$2.49	\$7.49
Family	\$2.49	\$7.49

Medical 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	\$373.53	\$75.64	\$449.17	\$572.24	\$61.53	\$633.77
Employee + Child	(\$9.90)	\$118.73	\$108.83	\$1,428.50	\$99.36	\$1,527.86
Employee + Children	(\$10.44)	\$125.70	\$115.26	\$1,902.07	\$105.16	\$2,007.23
Employee + Spouse/Domestic Partner	(\$14.32)	\$171.80	\$157.49	\$2,142.25	\$143.79	\$2,286.03
Family	(\$18.38)	\$220.59	\$202.21	\$2,855.66	\$184.60	\$3,040.26

Medical Coverage Level	Consumer Directed 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	\$445.10	\$0.00	\$445.10	\$61.54	\$0.00	\$61.54
Employee + Child	\$586.24	\$0.00	\$586.24	\$183.30	\$0.00	\$183.30
Employee + Children	\$696.21	\$0.00	\$696.21	\$283.27	\$0.00	\$283.27
Employee + Spouse/Domestic Partner	\$874.08	\$0.00	\$874.08	\$271.25	\$0.00	\$271.25
Family	\$1,138.53	\$0.00	\$1,138.53	\$376.46	\$0.00	\$376.46