

Drexel University Part-Time Employees 2025 Monthly Medical Contributions

MEDICAL						
Point of Service						
Coverage level	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	\$450.10	\$85.06	\$535.16	\$126.66	\$69.20	\$195.86
Employee + Child	\$533.46	\$133.51	\$666.97	\$331.62	\$111.75	\$443.37
Employee + Children	\$665.78	\$141.34	\$807.12	\$487.83	\$118.27	\$606.10
Employee + Spouse	\$806.70	\$193.18	\$999.88	\$490.93	\$161.71	\$652.64
Family	\$1,056.63	\$248.04	\$1,304.67	\$673.62	\$207.61	\$881.23

Personal Choice PPO - Basic Option						
Coverage level	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	\$558.47	\$85.06	\$643.53	\$367.44	\$69.20	\$436.64
Employee + Child	\$173.02	\$133.51	\$306.53	\$1,215.78	\$111.75	\$1,327.53
Employee + Children	\$0.00	\$129.37	\$129.37	\$1,851.93	\$130.24	\$1,982.17
Employee + Spouse	\$182.90	\$193.18	\$376.08	\$1,900.33	\$161.71	\$2,062.04
Family	\$343.05	\$248.04	\$591.09	\$2,434.66	\$207.61	\$2,642.27

Personal Choice PPO - High Option						
Coverage level	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	\$419.99	\$85.06	\$505.05	\$643.57	\$69.20	\$712.77
Employee + Child	\$0.00	\$122.22	\$122.22	\$1,595.29	\$123.04	\$1,718.33
Employee + Children	\$0.00	\$129.39	\$129.39	\$2,127.24	\$130.22	\$2,257.46
Employee + Spouse	\$0.01	\$176.84	\$176.85	\$2,392.96	\$178.05	\$2,571.01
Family	\$0.01	\$227.05	\$227.06	\$3,190.66	\$228.60	\$3,419.26

Consumer Directed Health Plan with HSA						
Coverage level	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	\$500.53	\$0.00	\$500.53	\$69.21	\$0.00	\$69.21
Employee + Child	\$659.24	\$0.00	\$659.24	\$206.15	\$0.00	\$206.15
Employee + Children	\$782.89	\$0.00	\$782.89	\$318.58	\$0.00	\$318.58
Employee + Spouse	\$982.91	\$0.00	\$982.91	\$305.07	\$0.00	\$305.07
Family	\$1,280.30	\$0.00	\$1,280.30	\$423.38	\$0.00	\$423.38

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	\$0.00
Employee Only	\$2.72	\$8.14	\$5.29	\$15.87	\$8.08	\$24.28
Employee + Child	\$6.85	\$20.54	\$15.60	\$46.84	\$26.45	\$79.34
Employee + Children	\$6.85	\$20.54	\$15.60	\$46.84	\$26.45	\$79.34
Employee + Spouse	\$6.85	\$20.54	\$15.60	\$46.84	\$26.45	\$79.34
Family	\$6.85	\$20.54	\$15.60	\$46.84	\$26.45	\$79.34

VISION		
Coverage level	Davis Vision	
	Drexel Pays	Employee Pays
Waive Coverage	\$0.00	\$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