Drexel University Full-Time Employees 2024 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	\$469.57	\$102.28	\$571.85	\$79.72	\$44.63	\$124.36
Employee + Child	\$613.33	\$162.63	\$775.95	\$210.56	\$70.95	\$281.51
Employee + Children	\$788.93	\$172.16	\$961.09	\$309.74	\$75.09	\$384.83
Employee + Spouse	\$924.13	\$235.33	\$1,159.46	\$311.70	\$102.67	\$414.37
Family	\$1,220.15	\$302.14	\$1,522.29	\$427.69	\$131.82	\$559.51

		Per	sonal Choice F	PPO - Basic Op	tion				
		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	\$649.21	\$102.28	\$751.50	\$232.61	\$44.63	\$277.24			
Employee + Child	\$550.75	\$162.63	\$713.38	\$771.92	\$70.95	\$842.88			
Employee + Children	\$544.69	\$172.16	\$716.85	\$1,219.05	\$75.09	\$1,294.14			
Employee + Spouse	\$777.46	\$235.33	\$1,012.79	\$1,206.57	\$102.67	\$1,309.23			
Family	\$1,099.62	\$302.14	\$1,401.76	\$1,545.81	\$131.82	\$1,677.63			

	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	\$604.99	\$102.28	\$707.27	\$407.93	\$44.63	\$452.56
Employee + Child	\$459.75	\$162.63	\$622.38	\$1,059.56	\$70.95	\$1,130.52
Employee + Children	\$487.33	\$172.16	\$659.49	\$1,538.61	\$75.09	\$1,613.70
Employee + Spouse	\$682.62	\$235.33	\$917.94	\$1,596.40	\$102.67	\$1,699.07
Family	\$913.58	\$302.14	\$1,215.72	\$2,125.15	\$131.82	\$2,256.97

		Consu	onsumer 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	\$498.66	\$0.00	\$498.66	\$43.95	\$0.00	\$43.95	
Employee + Child	\$693.30	\$0.00	\$693.30	\$130.88	\$0.00	\$130.88	
Employee + Children	\$846.75	\$0.00	\$846.75	\$202.27	\$0.00	\$202.27	
Employee + Spouse	\$1,032.96	\$0.00	\$1,032.96	\$193.69	\$0.00	\$193.69	
Family	\$1,353.74	\$0.00	\$1,353.74	\$268.81	\$0.00	\$268.81	

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	\$5.43	\$5.43	\$10.57	\$10.59	\$16.18	\$16.18
Employee + Child	\$13.69	\$13.70	\$31.22	\$31.22	\$52.89	\$52.90
Employee + Children	\$13.69	\$13.70	\$31.22	\$31.22	\$52.89	\$52.90
Employee + Spouse	\$13.69	\$13.70	\$31.22	\$31.22	\$52.89	\$52.90
Family	\$13.69	\$13.70	\$31.22	\$31.22	\$52.89	\$52.90

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		