



Saint Joseph's University
2012 Medical Insurance Monthly Premiums

RATES EFFECTIVE 11/1/12 - 10/31/13

Personal Choice High Deductible Health Plan
Integrated Drug Program \$5/\$20/\$45
(Single Deductible \$1,500 / Family \$3,000)

	<u>Total</u>	<u>University Share</u>	<u>Employee Share</u>
EMPLOYEE	\$486.68	\$486.68	\$0.00
EMPLOYEE/CHILD(REN)	\$1,015.56	\$995.70	\$19.86
EMPLOYEE/SPOUSE	\$1,193.66	\$1,137.85	\$55.81
FAMILY	\$1,309.24	\$1,140.94	\$168.30

Personal Choice 20/30/70 Preferred Provider Organization
\$20/\$40/\$60 Select Drug Program

	<u>Total</u>	<u>University Share</u>	<u>Employee Share</u>
EMPLOYEE	\$677.02	\$540.93	\$136.09
EMPLOYEE/CHILD(REN)	\$1,403.60	\$929.31	\$474.29
EMPLOYEE/SPOUSE	\$1,700.02	\$1,143.77	\$556.25
FAMILY	\$1,832.95	\$1,153.65	\$679.30

Keystone Health Plan East Health Maintenance Organization 15
\$15/\$35/\$50 Select Drug Program/\$100 Vision

	<u>Total</u>	<u>University Share</u>	<u>Employee Share</u>
EMPLOYEE	\$551.68	\$540.93	\$10.75
EMPLOYEE/CHILD(REN)	\$976.89	\$929.31	\$47.58
EMPLOYEE/SPOUSE	\$1,267.20	\$1,143.77	\$123.43
FAMILY	\$1,629.95	\$1,153.65	\$476.30

Keystone Health Plan East Point of Service 15B
\$15/\$35/\$50 Select Drug Program/\$100 Vision

	<u>Total</u>	<u>University Share</u>	<u>Employee Share</u>
EMPLOYEE	\$575.08	\$540.93	\$34.15
EMPLOYEE/CHILD(REN)	\$1,018.33	\$929.31	\$89.02
EMPLOYEE/SPOUSE	\$1,320.94	\$1,143.77	\$177.17
FAMILY	\$1,699.07	\$1,153.65	\$545.42