

Medical Plans

2017 MEDICAL INSURANCE MONTHLY PREMIUMS RATES EFFECTIVE 1/1/2017 – 12/31/2017

Consumer Driven Health Plan (Personal Choice HDHP)

Integrated Prescription Program \$5/\$20/\$45

12-month plan year: Individual Deductible \$1,500/Family Deductible \$3,000

14-month plan year: Individual Deductible \$1,750/Family Deductible \$3,500

	Total	University Share	Employee Share
Employee	\$660.48	\$607.64	\$52.84
Employee/Child/(ren)	\$1,224.25	\$ 1,077.34	\$146.91
Employee/Spouse	\$1,564.13	\$ 1,345.15	\$218.98
Family	\$1,981.46	\$ 1,644.61	\$336.85

Keystone Health Plan East Health Maintenance Organization 25

Select Drug Program \$20/\$40/\$60

\$100 Vision

	Total	University Share	Employee Share
Employee	\$726.66	\$653.99	\$72.67
Employee/Child/(ren)	\$1,346.94	\$ 1,104.49	\$242.45
Employee/Spouse	\$1,720.88	\$ 1,376.70	\$344.18
Family	\$2,180.03	\$ 1,526.02	\$654.01