



**2019 MONTHLY MEDICAL CONTRIBUTION\***  
**STAFF**

**Medical Mutual - PPO**  
(Preferred Provider Organization)

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$80.62	\$85.46	\$93.52	\$113.28
Single + Child(ren)	\$146.46	\$155.25	\$169.89	\$205.77
Single + Spouse	\$178.99	\$189.73	\$207.63	\$251.48
Family	\$244.07	\$258.72	\$283.13	\$342.92

**Medical Mutual - HDHP**  
(High Deductible Health Plan)

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$64.80	\$68.69	\$75.17	\$91.04
Single + Child(ren)	\$117.68	\$124.74	\$136.51	\$165.34
Single + Spouse	\$143.85	\$152.48	\$166.87	\$202.11
Family	\$196.14	\$207.91	\$227.52	\$275.57

**Medical Mutual - MetroHealth Select - EPO**  
(Exclusive Provider Organization)

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$40.31	\$42.73	\$46.76	\$56.64
Single + Child(ren)	\$73.23	\$77.62	\$84.95	\$102.89
Single + Spouse	\$89.50	\$94.87	\$103.82	\$125.74
Family	\$122.04	\$129.36	\$141.56	\$171.46

**Note: A surcharge of \$120 per month will be added to the rates of any tier when an employed spouse who is eligible for his/her employer's medical plan is enrolled in any of the JCU medical plans.**  
**\*The salary tiers are based on the base salary in effect as of September 1, 2018.**