



## 2023 MONTHLY MEDICAL CONTRIBUTION\*

<b>Medical Mutual - PPO</b> (Preferred Provider Organization)				
COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$103.02	\$109.20	\$119.50	\$144.74
Single + Child(ren)	\$187.14	\$198.36	\$217.08	\$262.93
Single + Spouse	\$228.70	\$242.43	\$265.30	\$321.33
Family	\$311.86	\$330.57	\$361.76	\$438.17
<b>Medical Mutual - HDHP</b> (High Deductible Health Plan)				
COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$82.80	\$87.76	\$96.04	\$116.33
Single + Child(ren)	\$150.36	\$159.39	\$174.42	\$211.26
Single + Spouse	\$183.80	\$194.83	\$213.21	\$258.24
Family	\$250.61	\$265.65	\$290.71	\$352.11
<b>Medical Mutual – MetroHealth/Skyway Select - EPO</b> (Exclusive Provider Organization)				
COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$51.51	\$54.60	\$59.75	\$72.37
Single + Child(ren)	\$93.57	\$99.18	\$108.54	\$131.46
Single + Spouse	\$114.35	\$121.21	\$132.65	\$160.67
Family	\$155.93	\$165.29	\$180.88	\$219.08
<p><b>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.</b></p> <p><b>*The salary tiers are based on the base salary in effect as of September 1, 2022.</b></p>				