



**2021 MONTHLY MEDICAL CONTRIBUTION\***  
**FACULTY HIRED POST 1/1/2014**

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

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$81.12	\$85.99	\$94.10	\$113.98
Single + Child(ren)	\$147.36	\$156.20	\$170.94	\$207.04
Single + Spouse	\$180.10	\$190.90	\$208.91	\$253.03
Family	\$245.58	\$260.31	\$284.87	\$354.04

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

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$65.20	\$69.11	\$75.63	\$91.60
Single + Child(ren)	\$118.41	\$125.51	\$137.35	\$166.36
Single + Spouse	\$144.74	\$153.42	\$167.90	\$203.36
Family	\$197.35	\$209.19	\$228.92	\$277.27

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

COVERAGE LEVEL	<\$40k	\$40-\$69k	\$70-\$99k	\$100k+
Single	\$40.56	\$42.99	\$47.05	\$56.99
Single + Child(ren)	\$73.68	\$78.10	\$85.47	\$103.52
Single + Spouse	\$90.05	\$95.45	\$104.46	\$126.52
Family	\$122.79	\$130.16	\$142.44	\$172.52

**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, 2020.**