## Medical Plan Rates

## 2019 Medical Plan - Full Subsidy Contributions\*

(for employees working at least 30 hours per week)

	HSA	HSA Plan	POS	POS Plan
	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
Employee only	\$28.00	\$14.00	\$65.00	\$32.50
Employee + child(ren)	\$102.00	\$51.00	\$224.00	\$112.00
Employee + spouse	\$177.00	\$88.50	\$338.00	\$169.00
Family	\$248.00	\$124.00	\$484.00	\$242.00

## 2019 Medical Plan - Partial Subsidy Contributions\*

(for employees working between 20-29.9 hours per week)

	HSA	HSA Plan	POS	POS Plan
	MONTHLY	BIWEEKLY	MONTHLY	BIWEEKLY
Employee only	\$35.00	\$17.50	\$81.26	\$40.63
Employee + child(ren)	\$127.50	\$63.75	\$280.00	\$140.00
Employee + spouse	\$221.26	\$110.63	\$422.50	\$211.25
Family	\$310.00	\$155.00	\$605.00	\$302.50

\* These medical plan rates do not reflect the monthly \$50 per person tobacco use surcharge.

## Tobacco Use Surcharge

To support the health and wellness of our faculty and staff, Emory has implemented a \$50 per person monthly tobacco use surcharge on medical contributions for employees and their spouses who are covered by an Emory medical plan and use tobacco products.

You must certify online in Self-Service whether or not you and your spouse have used tobacco within the last 60 days. The perperson tobacco use surcharge will be waived if:

- You certify that you and/or your spouse have not used tobacco within the last 60 days; OR
- You are currently being treated by a physician for a medical condition such as nicotine addiction. In this case, you will need to complete and return a **Tobacco Free Physician** Affidavit to the Benefits and WorkLife Department. This form is available online at: https://hr.emory.edu/eu/benefits/faculty-staff/medical/medical-rates.html