

Covered Individual	Employee Cost per Month
Employee	\$255.00
Employee & Spouse	\$800.00
Employee & Child	\$535.00
Employee & Family	\$965.00

Medical PPO90 with or without an FSA

Covered Individual	Employee Cost per Month
Employee	\$55.00
Employee & Spouse	\$145.00
Employee & Child	\$110.00
Employee & Family	\$180.00

Medical PPO80B w/a high ded. and with or w/o an FSA

2020

UNIVERSITY OF DALLAS
Medical Rates

Medical PPO80A Traditional with or without an FSA

Covered Individual	Employee Cost per Month
Employee	\$180.00
Employee & Spouse	\$540.00
Employee & Child	\$375.00
Employee & Family	\$655.00

Medical HDHP with or without an HSA

Covered Individual	Employee Cost per Month
Employee	\$10.00
Employee & Spouse	\$25.00
Employee & Child	\$20.00
Employee & Family	\$35.00