CWRU Postdoc Plans & Monthly Rates - Paid by CWRU	
	2027
Aetna Medical HNO	
Single	$653.36
2-Party	$1,307.08
Family	$1,960.09
Aetna Medical POS/OAMC	
Single	$777.67
2-Party	$1,555.72
Family	$2,333.02
MetLife Dental PPO	
Single	$19.51
2-Party	$40.18
Family	$74.37
EyeMed Vision PPO	
Single	$5.64
2-Party	$10.75
Family	$15.74
The Standard Life/AD&D	$3.55
Impact Solutions EAP	$1.59
HNO Total with all lines of coverage	
Single	$683.65
2-Party	$1,363.15
Family	$2,055.34
POS/OAMC Total with all lines of coverage	
Single	$807.96
2-Party	$1,611.79
Family	$2,428.27