Northwestern University Non-Employee Postdoctoral Scholar Benefit Program 2020 Rates

Medical HMO	Total Monthly Premium
PD Only	\$728.32
PD + Spouse	\$1,696.96
PD + Child(ren)	\$1,478.48
Family	\$2,119.38

Medical PPO	Total Monthly Premium
PD Only	\$688.07
PD + Spouse	\$1,603.21
PD + Child(ren)	\$1,396.80
Family	\$2,002.28

Dental HMO	Total Monthly Premium
PD Only	\$18.52
PD + Spouse	\$33.57
PD + Child(ren)	\$34.73
Family	\$50.94

Dental PPO	Total Monthly Premium
PD Only	\$49.75
PD + Spouse	\$108.21
PD + Child(ren)	\$121.89
Family	\$172.89

Vision	Total Monthly Premium
PD Only	\$7.14
PD + Spouse	\$13.56
PD + Child(ren)	\$14.28
Family	\$20.99

Note: Each premium payment transaction will include a fee of 2.3% if paying by credit card, or a flat \$5.00 if paying via bank withdrawl.