2026 Full-Time
Medical/Pharmacy, Dental and Vision
Employer Funding and Associate Contribution Rates

NEMOURS CHILDREN'S HEALTH®

Twice-Monthly Contributions	Tier	Medical and Rx	With Wellness		Non-Wellness	
		Total	Nemours	Associate	Nemours	Associate
High PPO/Pharmacy (previously the Red plan)	Associate	$ 556.07	$ 409.93	$ 146.14	$ 373.39	$ 182.68
	Associate + Children	$ 945.31	$ 704.16	$ 241.15	$ 643.88	$ 301.43
	Associate + Spouse	$ 1,217.77	$ 952.19	$ 265.58	$ 885.80	$ 331.97
	Associate + Family	$ 1,607.00	$ 1,246.41	$ 360.59	$ 1,156.26	$ 450.74
EPO/Pharmacy (previously the Blue plan)	Associate	$ 550.33	$ 445.40	$ 104.93	$ 419.17	$ 131.16
	Associate + Children	$ 935.55	$ 752.97	$ 182.58	$ 707.33	$ 228.22
	Associate + Spouse	$ 1,205.21	$ 1,014.08	$ 191.13	$ 966.29	$ 238.92
	Associate + Family	$ 1,590.43	$ 1,313.03	$ 277.40	$ 1,243.68	$ 346.75
Mid PPO/Pharmacy (previously the White plan)	Associate	$ 514.02	$ 452.10	$ 61.92	$ 436.62	$ 77.40
	Associate + Children	$ 873.84	$ 765.33	$ 108.51	$ 738.21	$ 135.63
	Associate + Spouse	$ 1,125.71	$ 1,010.95	$ 114.76	$ 982.26	$ 143.45
	Associate + Family	$ 1,485.52	$ 1,289.04	$ 196.48	$ 1,239.92	$ 245.60
Low PPO with HSA/Pharmacy (previously the Green plan)	Associate	$ 466.90	$ 428.69	$ 38.21	$ 419.13	$ 47.77
	Associate + Children	$ 793.71	$ 736.00	$ 57.71	$ 721.57	$ 72.14
	Associate + Spouse	$ 1,022.48	$ 948.99	$ 73.49	$ 930.61	$ 91.87
	Associate + Family	$ 1,349.29	$ 1,232.28	$ 117.01	$ 1,203.02	$ 146.27

Contributions Twice-Monthly	Tier	Total	Nemours	Associate
Premier with Ortho (previously the Red plan)	Associate	$ 24.60	$ 8.04	$ 16.56
	Associate + Children	$ 48.72	$ 16.60	$ 32.12
	Associate + Spouse	$ 43.27	$ 14.15	$ 29.12
	Associate + Family	$ 79.21	$ 26.87	$ 52.34
Complete with Ortho (previously the Blue plan)	Associate	$ 18.33	$ 8.03	$ 10.30
	Associate + Children	$ 37.84	$ 16.60	$ 21.24
	Associate + Spouse	$ 32.29	$ 14.15	$ 18.14
	Associate + Family	$ 61.24	$ 26.87	$ 34.37
Basic Care (previously the White plan)	Associate	$ 12.19	$ 8.03	$ 4.16
	Associate + Children	$ 23.59	$ 16.60	$ 6.99
	Associate + Spouse	$ 21.48	$ 14.16	$ 7.32
	Associate + Family	$ 39.27	$ 26.86	$ 12.41

Contributions Twice-Monthly	Tier	Total	Nemours	Associate
Premium Vision	Associate	$ 3.99	$ 0.00	$ 3.99
	Associate + Children	$ 8.53	$ 0.00	$ 8.53
	Associate + Spouse	$ 7.98	$ 0.00	$ 7.98
	Associate + Family	$ 13.65	$ 0.00	$ 13.65
Base Vision	Associate	$ 2.57	$ 0.00	$ 2.57
	Associate + Children	$ 5.49	$ 0.00	$ 5.49
	Associate + Spouse	$ 5.13	$ 0.00	$ 5.13
	Associate + Family	$ 8.78	$ 0.00	$ 8.78