

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

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	\$ 395.07	\$ 161.00	\$ 354.82	\$ 201.25
	Associate + Children	\$ 945.31	\$ 671.61	\$ 273.70	\$ 603.19	\$ 342.12
	Associate + Spouse	\$ 1,217.77	\$ 865.19	\$ 352.58	\$ 777.04	\$ 440.73
	Associate + Family	\$ 1,607.00	\$ 1,141.72	\$ 465.28	\$ 1,025.40	\$ 581.60
EPO/Pharmacy (previously the Blue plan)	Associate	\$ 550.33	\$ 390.99	\$ 159.34	\$ 351.15	\$ 199.18
	Associate + Children	\$ 935.55	\$ 664.68	\$ 270.87	\$ 596.96	\$ 338.59
	Associate + Spouse	\$ 1,205.21	\$ 856.26	\$ 348.95	\$ 769.03	\$ 436.18
	Associate + Family	\$ 1,590.43	\$ 1,129.95	\$ 460.48	\$ 1,014.83	\$ 575.60
Mid PPO/Pharmacy (previously the White plan)	Associate	\$ 514.02	\$ 365.19	\$ 148.83	\$ 327.99	\$ 186.03
	Associate + Children	\$ 873.84	\$ 620.84	\$ 253.00	\$ 557.59	\$ 316.25
	Associate + Spouse	\$ 1,125.71	\$ 799.78	\$ 325.93	\$ 718.29	\$ 407.42
	Associate + Family	\$ 1,485.52	\$ 1,055.42	\$ 430.10	\$ 947.89	\$ 537.63
Low PPO with HSA/Pharmacy (previously the Green plan)	Associate	\$ 466.90	\$ 331.72	\$ 135.18	\$ 297.93	\$ 168.97
	Associate + Children	\$ 793.71	\$ 563.90	\$ 229.81	\$ 506.45	\$ 287.26
	Associate + Spouse	\$ 1,022.48	\$ 726.44	\$ 296.04	\$ 652.43	\$ 370.05
	Associate + Family	\$ 1,349.29	\$ 958.62	\$ 390.67	\$ 860.96	\$ 488.33
Twice-Monthly Contributions	Tier	Total	Nemours	Associate		
Premier with Ortho (previously the Red plan)	Associate	\$ 24.60	\$ 0.00	\$ 24.60		
	Associate + Children	\$ 48.72	\$ 0.00	\$ 48.72		
	Associate + Spouse	\$ 43.27	\$ 0.00	\$ 43.27		
	Associate + Family	\$ 79.21	\$ 0.00	\$ 79.21		
Complete with Ortho (previously the Blue plan)	Associate	\$ 18.33	\$ 0.00	\$ 18.33		
	Associate + Children	\$ 37.84	\$ 0.00	\$ 37.84		
	Associate + Spouse	\$ 32.29	\$ 0.00	\$ 32.29		
	Associate + Family	\$ 61.24	\$ 0.00	\$ 61.24		
Basic Care (previously the White plan)	Associate	\$ 12.19	\$ 0.00	\$ 12.19		
	Associate + Children	\$ 23.59	\$ 0.00	\$ 23.59		
	Associate + Spouse	\$ 21.48	\$ 0.00	\$ 21.48		
	Associate + Family	\$ 39.27	\$ 0.00	\$ 39.27		
Twice-Monthly Contributions	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		