

## 2017 Medical and Dental Contributions for Yale University Postdoctoral Fellows and Hospital Residents

Full Cost Premiums will be deducted from paychecks unless an approved Healthcare Subsidy Form is on record.

Medical Plans	Full Cost - Monthly
<b>Yale Health</b> Single Single + Child(ren) Single + Spouse Family	\$580.00 \$1102.00 \$1218.00 \$1740.00
<b>Aetna Smart Care Plan*</b> Single Single + Child(ren) Single + Spouse Family	\$550.00 \$1065.00 \$1185.00 \$1700.00
<b>Aetna Choice POS II</b> Single Single + Child(ren) Single + Spouse Family	\$770.00 \$1463.00 \$1617.00 \$2310.00
<b>Legacy Aetna Choice POS II **</b> <b>(if hired prior to 01/01/2012)</b> Single Single + Child(ren) Single + Spouse Family	\$884.00 \$1680.00 \$1856.00 \$2652.00

Delta Plan	Full Cost - Monthly
<b>DELTA DENTAL</b> Single 2-Person Family	\$53.00 \$106.00 \$164.00

\* Formerly known as the Aetna Value Plan

\*\*Closed to new enrollment.