

2010 BENEFIT PLAN RATES – BIWEEKLY PREMIUMS

HEALTH INSURANCE – FULL-TIME EMPLOYEES

| TIER/PLAN | CDH HIGH OPTION | | | CDH LOW OPTION | | | CDH W/OUT OF NETWORK | | | CDH HRA |
|------------|-----------------|----------|-----------|----------------|----------|-----------|----------------------|----------|-----------|---------|
| | Premium | Subsidy | Deduction | Premium | Subsidy | Deduction | Premium | Subsidy | Deduction | |
| Employee | \$219.14 | \$209.14 | \$10.00 | \$210.05 | \$210.05 | 0 | \$260.59 | \$244.04 | \$16.55 | \$600 |
| Emp+Spouse | \$446.38 | \$419.42 | \$26.96 | \$426.85 | \$423.61 | \$3.24 | \$535.54 | \$431.53 | \$104.01 | \$1,350 |
| Emp+Child | \$380.13 | \$353.01 | \$27.12 | \$363.43 | \$356.59 | \$6.84 | \$456.36 | \$363.36 | \$93.00 | \$1,350 |
| Emp+Family | \$643.85 | \$517.72 | \$126.13 | \$615.31 | \$523.85 | \$91.46 | \$774.19 | \$535.42 | \$238.77 | \$1,600 |

HEALTH INSURANCE – PT20 EMPLOYEES

| PT20 | Premium | Subsidy | Deduction | Premium | Subsidy | Deduction | Premium | Subsidy | Deduction | Annual |
|------------|----------|----------|-----------|----------|----------|-----------|----------|----------|-----------|---------|
| Employee | \$219.14 | \$149.52 | \$69.62 | \$210.05 | \$150.43 | \$59.62 | \$260.59 | \$184.42 | \$76.17 | \$600 |
| Emp+Spouse | \$446.38 | \$359.80 | \$86.58 | \$426.85 | \$363.99 | \$62.86 | \$535.54 | \$371.91 | \$163.63 | \$1,350 |
| Emp+Child | \$380.13 | \$293.39 | \$86.74 | \$363.43 | \$296.97 | \$66.46 | \$456.36 | \$303.74 | \$152.62 | \$1,350 |
| Emp+Family | \$643.85 | \$458.10 | \$185.75 | \$615.31 | \$464.23 | \$151.08 | \$774.19 | \$475.80 | \$298.39 | \$1,600 |

HEALTH INSURANCE - FULL-TIME WITH DOMESTIC PARTNER COVERAGE AND/OR CHILDREN AGE 25-30

| PLAN/TIER | CDH HIGH OPTION | | | CDH LOW OPTION | | | CDH OUT OF NETWORK | | | CDH HRA |
|---|-----------------|-----------|----------------|----------------|-----------|----------------|--------------------|-----------|----------------|---------|
| | Deduction | | Imputed Income | Deduction | | Imputed Income | Deduction | | Imputed Income | |
| | Pre Tax | After Tax | | Pre Tax | After Tax | | Pre Tax | After-Tax | | |
| Emp+Ch over 25 (Child+\$20) | \$10.00 | \$37.12 | \$133.87 | \$0 | \$26.84 | \$146.54 | \$16.55 | \$96.45 | \$102.77 | \$600 |
| Emp+Family w/child over 25 (Family+\$20) | \$26.96 | \$119.17 | \$71.34 | \$3.24 | \$108.22 | \$96.99 | \$104.01 | \$154.76 | \$0 | \$1,350 |
| Emp+DP | \$0 | \$26.96 | \$200.28 | \$0 | \$3.24 | \$213.56 | \$16.55 | \$87.46 | \$170.94 | \$600 |
| Emp+Ch of DP | \$0 | \$27.12 | \$133.87 | \$0 | \$6.84 | \$146.54 | \$16.55 | \$76.45 | \$102.77 | \$600 |
| Emp+Ch of DP over 25 (Ch+\$20) | \$10.00 | \$37.12 | \$133.87 | \$0 | \$26.84 | \$146.54 | \$16.55 | \$96.45 | \$102.77 | \$600 |
| Emp+DP +Ch with no child of DP | \$27.12 | \$99.01 | \$164.71 | \$6.84 | \$84.62 | \$167.26 | \$93.00 | \$145.77 | \$172.06 | \$1,350 |
| Emp+DP+Ch of DP | \$10.00 | \$116.13 | \$298.58 | \$0 | \$91.46 | \$313.80 | \$16.55 | \$222.22 | \$274.83 | \$600 |
| Emp+DP+Ch over 25 w/ no child of DP (Family+\$20) | \$10.00 | \$136.13 | \$298.58 | \$0 | \$111.46 | \$313.80 | \$16.55 | \$242.22 | \$274.83 | \$600 |
| Emp+DP+Ch of DP over 25 (Fam+\$20) | \$10.00 | \$136.13 | \$298.58 | \$0 | \$111.46 | \$313.80 | \$16.55 | \$242.22 | \$274.83 | \$600 |

DENTAL INSURANCE

(Deductions for Domestic Partner and/or Children age 25-30 coverage will be split between pre- and after-tax deductions.)

| TIER | DHMO CS150 (Humana/CompBenefits) | HIGH PPO (Standard Ins) |
|---------------|----------------------------------|-------------------------|
| Employee | \$5.70 | \$13.21 |
| Emp+Spouse/DP | \$10.26 | \$26.23 |
| Emp+Child | \$11.40 | \$30.77 |
| Emp+Family | \$13.68 | \$43.78 |

VISION INSURANCE

(Deductions for Domestic Partner and/or Children age 25-30 coverage will be split between pre- and after-tax deductions.)

| TIER | Humana/CompBenefits |
|---------------|---------------------|
| Employee | \$3.30 |
| Emp+Spouse/DP | \$6.59 |
| Emp+Child | \$6.26 |
| Emp+Family | \$9.84 |