

ACTIVE EMPLOYEE RATES EFFECTIVE 01/01/09

MEDICAL

DEPENDENT COVERAGE TIERS:

	PER PAYDAY (26 pay periods)
SPOUSE ONLY	\$163.00
SPOUSE + ONE CHILD	\$217.00
SPOUSE + TWO OR MORE CHILDREN	\$244.00
ONE CHILD ONLY	\$110.00
TWO CHILDREN ONLY	\$130.00
THREE CHILDREN ONLY	\$162.00
FOUR CHILDREN ONLY	\$216.00
FIVE OR MORE CHILDREN	\$244.00

DENTAL

EMPLOYEE & DEPENDENT COVERAGE TIERS:

	PER PAYDAY (26 pay periods)
EMPLOYEE ONLY	\$14.31
EMPLOYEE & SPOUSE	\$28.45
EMPLOYEE & CHILD(REN)	\$30.70
FULL FAMILY	\$44.46

VISION

EMPLOYEE & DEPENDENT COVERAGE TIERS:

	PER PAYDAY (26 pay periods)
EMPLOYEE ONLY	\$2.19
EMPLOYEE & SPOUSE	\$4.25
EMPLOYEE & CHILD(REN)	\$4.43
FULL FAMILY	\$7.04