2011 Health Premiums and Contributions

Effective 1/1/2011

Non-Associated

Plan	Tier	Monthly Premium	ER Monthly Contrib	EE Monthly Contrib	EE Bi-Weekly Contrib
Kaiser	Single	368.81	301.43	67.38	31.10
	Two-Party	807.70	611.06	196.64	90.76
	Family	1,062.14	792.20	269.94	124.59
Blue Shield HMO	Single	499.52	301.43	198.09	91.43
	Two-Party	1,089.66	611.06	478.60	220.89
	Family	1,410.14	792.20	617.94	285.20
Blue Shield PPO	Single	608.04	411.15	196.89	90.87
	Two-Party	1,285.45	772.48	512.97	236.76
	Family	1,593.12	936.47	656.65	303.07
Delta Dental PPO	Single	64.91	45.02	19.89	9.18
	Two-Party	121.23	85.91	35.32	16.30
	Family	159.79	122.18	37.61	17.36
Delta Care HMO	Single	25.77	24.15	1.62	0.75
	Two-Party	43.81	41.07	2.74	1.26
	Family	67.00	62.80	4.20	1.94
VSP	Single	23.50	18.46	5.04	2.33
	Two-Party	23.50	18.46	5.04	2.33
	Family	23.50	18.46	5.04	2.33

Medical Opt-Out: $316.33 per month (or $146.00 bi-wkly)