

HEALTH AND DENTAL INSURANCE COSTS — Plan Year 2010

Dining Services SEIU Bargaining Unit

Health Insurance*

| Costs for FULL-TIME EMPLOYEES WORKING 1300+ hours/year | | | | | | |
|---|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> |
| Monthly Cost | \$36.36 | \$36.36 | \$73.08 | \$73.08 | \$91.29 | \$91.29 |
| Costs for PART-TIME EMPLOYEES WORKING BETWEEN 975 and 1299 hours/year | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> |
| Monthly Cost | \$259.74 | \$259.74 | \$521.99 | \$521.99 | \$652.09 | \$652.09 |
| Costs for PART-TIME EMPLOYEES WORKING LESS THAN 975 hours/year | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> |
| Monthly Cost | \$519.49 | \$519.49 | \$1,043.98 | \$1,043.98 | \$1,304.19 | \$1,304.19 |
| Costs for health insurance coverage under COBRA | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> | BCBS <i>HealthMate</i> 100/80 | UHC <i>Choice</i> <i>Plus</i> |
| Monthly Cost | \$529.88 | \$529.88 | \$1,064.86 | \$1,064.86 | \$1,330.27 | \$1,330.27 |

Dental Insurance*

| Costs for FULL-TIME EMPLOYEES WORKING 1300+ hours/year | | | | | | |
|--|--------------------------------------|-----------------------------|--------------------------------------|-----------------------------|--------------------------------------|-----------------------------|
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> |
| Monthly Cost | \$17.04 | \$23.60 | \$44.86 | \$63.64 | \$78.98 | \$108.07 |
| Costs for PART-TIME EMPLOYEES WORKING FROM 975–1299 hours/year | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> |
| Monthly Cost | \$25.57 | \$32.13 | \$53.39 | \$72.17 | \$87.51 | \$116.60 |
| Costs for PART-TIME EMPLOYEES WORKING LESS THAN 975 hours/year | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> |
| Monthly Cost | \$34.09 | \$40.65 | \$61.91 | \$80.69 | \$96.03 | \$125.12 |
| Costs for dental insurance coverage under COBRA | | | | | | |
| | INDIVIDUAL | | 2-PERSON | | FAMILY | |
| | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> | Delta Dental <i>Comprehensive</i> | Delta Dental <i>Plus</i> |
| Monthly Cost | \$34.77 | \$41.46 | \$63.15 | \$82.30 | \$97.95 | \$127.62 |

* Note — Divide by four if you are paid weekly or by two if you are paid semi-monthly to determine your contribution per paycheck.