

## Cost of Coverage for 2010

### *Part-Time Employees*

	Your Monthly Deduction	Your Bi-weekly Deduction
<b><i>\$500 Deductible PPO</i></b>		
Employee Only	\$334.33	\$154.31
Employee + Spouse	\$735.63	\$339.53
Employee + Child(ren)	\$701.89	\$323.95
Employee + Spouse + Child(ren)	\$1,069.95	\$493.83
<b><i>\$1,000 Deductible PPO</i></b>		
Employee Only	\$288.10	\$132.97
Employee + Spouse	\$634.02	\$292.63
Employee + Child(ren)	\$604.86	\$279.17
Employee + Spouse + Child(ren)	\$922.12	\$425.60
<b><i>\$2,000 Deductible PPO</i></b>		
Employee Only	\$200.51	\$92.55
Employee + Spouse	\$440.92	\$203.51
Employee + Child(ren)	\$420.97	\$194.30
Employee + Spouse + Child(ren)	\$641.43	\$296.05
<b><i>\$2500 Deductible PPO with HSA</i></b>		
Employee Only	\$173.80	\$80.22
Employee + Spouse	\$380.37	\$175.56
Employee + Child(ren)	\$361.49	\$166.85
Employee + Spouse + Child(ren)	\$553.17	\$255.31
<b><i>Dental Plan</i></b>		
Employee Only	\$22.84	\$10.54
Employee Plus One	\$59.26	\$27.36
Family	\$83.86	\$38.72
<b><i>Vision Plan</i></b>		
Employee Only	\$5.94	\$2.74
Employee Plus One	\$11.88	\$5.48
Family	\$19.12	\$8.82