

Active Employee Cost - Calendar Year 2009

COBRA RATE SCHEDULE

102% OF ACTIVE EMPLOYEE RATE

Effective January 1, 2009

		COBRA Rate Cost	
		MONTHLY	ANNUAL
CareFirst BlueChoice POS	IND	426.86	5,122.32
	2	853.69	10,244.28
	FAM	1,161.56	13,938.72
UnitedHealthcare Select Plus Open POS	IND	387.02	4,644.24
	2	774.01	9,288.12
	FAM	1,053.15	12,637.80
UnitedHealthcare Select Plus Closed POS	IND	613.75	7,365.00
	2	1,227.51	14,730.12
	FAM	1,670.00	20,040.00
CareFirst BlueChoice HMO	IND	269.12	3,229.44
	2	505.81	6,069.72
	FAM	828.68	9,944.16
Kaiser HMO	IND	362.68	4,352.16
	2	723.75	8,685.00
	FAM	1,048.73	12,584.76
UnitedHealthcare Select HMO	IND	326.61	3,919.32
	2	613.90	7,366.80
	FAM	1,005.76	12,069.12
Caremark Prescription	IND	119.55	1,434.60
	2	238.84	2,866.08
	FAM	294.74	3,536.88
Kaiser Prescription	IND	56.50	678.00
	2	112.80	1,353.60
	FAM	163.44	1,961.28
Aetna PPO Dental	IND	31.29	375.48
	2	62.63	751.56
	FAM	92.00	1,104.00
Aetna DMO Dental	IND	21.83	261.96
	2	43.68	524.16
	FAM	64.19	770.28
NVA Vision	IND	1.02	12.24
	2	1.88	22.56
	FAM	2.38	28.56