

Active Employee Cost - Calendar Year 2010

COBRA RATE SCHEDULE

102% OF ACTIVE EMPLOYEE RATE

Effective January 1, 2010

| | | 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 |
| United Healthcare Select Plus Open POS | IND | 415.72 | 4,988.64 |
| | 2 | 831.42 | 9,977.04 |
| | FAM | 1,131.26 | 13,575.12 |
| United Healthcare Select Plus Closed POS | IND | 659.28 | 7,911.36 |
| | 2 | 1,318.55 | 15,822.60 |
| | FAM | 1,793.86 | 21,526.32 |
| CareFirst BlueChoice HMO | IND | 280.80 | 3,369.60 |
| | 2 | 527.76 | 6,333.12 |
| | FAM | 864.63 | 10,375.56 |
| Kaiser HMO | IND | 378.28 | 4,539.36 |
| | 2 | 754.88 | 9,058.56 |
| | FAM | 1,093.82 | 13,125.84 |
| UnitedHealthcare Select HMO | IND | 373.71 | 4,484.52 |
| | 2 | 702.41 | 8,428.92 |
| | FAM | 1,150.77 | 13,809.24 |
| Caremark Prescription | IND | 131.27 | 1,575.24 |
| | 2 | 262.26 | 3,147.12 |
| | FAM | 323.65 | 3,883.80 |
| Kaiser Prescription | IND | 58.93 | 707.16 |
| | 2 | 117.65 | 1,411.80 |
| | FAM | 170.48 | 2,045.76 |
| Aetna PPO Dental | IND | 32.87 | 394.44 |
| | 2 | 65.79 | 789.48 |
| | FAM | 96.65 | 1,159.80 |
| Aetna DMO Dental | IND | 23.36 | 280.32 |
| | 2 | 46.74 | 560.88 |
| | FAM | 68.69 | 824.28 |
| NVA Vision | IND | 1.02 | 12.24 |
| | 2 | 1.88 | 22.56 |
| | FAM | 2.38 | 28.56 |