

2010 BI-WEEKLY MEDICAL AND DENTAL DEDUCTION RATES FOR IUOE EMPLOYEES						
					IUOE	
		Premium Cost			Hired before 1/1/09	Hired on or after 1/1/09
Plan	Person(s) Covered	Annual	Monthly	COBRA	Employee Bi-Weekly Deductions	
Base Plan						
Blue Point 2 Value	Single	\$4,359.96	\$363.33	\$370.60	\$21.80	\$27.25
pkg. #067						
	Sponsor Two Person	\$9,819.96	\$818.33	\$834.70	\$49.10	\$61.37
	Family	\$11,336.16	\$944.68	\$963.57	\$56.68	\$70.85
	Family No Spouse	\$10,767.48	\$897.29	\$915.24	\$53.84	\$67.30
Buy Up	Single	\$4,931.04	\$410.92	\$419.14	\$45.59	\$51.04
Healthy Blue PPO						
	Sponsor Two Person	\$11,358.00	\$946.50	\$965.43	\$113.18	\$125.46
	Family	\$13,087.92	\$1,090.66	\$1,112.47	\$129.67	\$143.84
	Family No Spouse	\$12,441.84	\$1,036.82	\$1,057.56	\$123.60	\$137.06
Healthy Blue	Single	\$3,519.36	\$293.28	\$299.15	\$17.60	\$22.00
Health Savings Account *						
	Sponsor Two Person	\$8,101.44	\$675.12	\$688.62	\$40.51	\$50.63
	Family	\$9,342.24	\$778.52	\$794.09	\$46.71	\$58.39
	Family No Spouse	\$8,874.24	\$739.52	\$754.31	\$44.37	\$55.46
Dental	Single	\$392.16	\$32.68	\$33.33	\$0.33	\$0.33
	Family	\$896.04	\$74.67	\$76.16	\$0.82	\$0.82

* County is funding \$1040 towards the Single Deductible and \$2080 towards the Family Deductible for the Health Savings Account
2010 Rates are preliminary and subject to change.