

FACULTY AND STAFF MEDICAL PLANS

<u>CareFirst BCBS</u>	<u>* Premium</u>
Individual	\$694.17
Two Adults	\$1,447.11
Adult + Child(ren)	\$1,043.79
Two Adults + Child(ren)	\$1,816.13

<u>EHP Classic</u>	
Individual	\$694.17
Two Adults	\$1,447.11
Adult + Child(ren)	\$1,043.79
Two Adults + Child(ren)	\$1,816.13

<u>Kaiser Permanente</u>	
Individual	\$618.67
Two Adults	\$1,299.13
Adult + Child(ren)	\$1,175.41
Two Adults + Child(ren)	\$1,855.95

<u>BlueChoice</u>	
Individual	\$940.97
Two Adults	\$2,253.61
Adult + Child(ren)	\$1,938.35
Two Adults + Child(ren)	\$2,822.89

<u>CareFirst Plan III **</u>	
Individual	\$506.23
Two Adults	\$1,055.27
Adult + Child(ren)	\$761.14
Two Adults + Child(ren)	\$1,324.35

FACULTY AND STAFF DENTAL PLANS

<u>Delta Dental Standard</u>	<u>* Premium</u>
Individual	\$21.18
Two Adults	\$45.53
Adult + Child(ren)	\$42.35
Two Adults + Child(ren)	\$92.11

<u>Delta Dental Enhanced</u>	
Individual	\$28.85
Two Adults	\$62.02
Adult + Child(ren)	\$57.69
Two Adults + Child(ren)	\$125.46

<u>United Concordia</u>	
Individual	\$13.16
Two Adults	\$31.56
Adult + Child(ren)	\$31.56
Two Adults + Child(ren)	\$45.63

FACULTY AND STAFF VISION PLAN

<u>EyeMed</u>	<u>*Premium</u>
Individual	\$5.00
Two Adults	\$8.99
Adult + Child(ren)	\$14.15
Two Adults + Child(ren)	\$14.15

** CareFirst BCBS Plan III is only available to former Limited Time employees. Current CareFirst BCBS Plan III participants cannot choose a different plan.

* Includes 2% administrative fee.