

July 1, 2009 - Employee Health Plan Costs

Indemnity Plan Max. 3-Tier

	Biweekly EE Costs			20-Pay EE Costs		
	Single	Two	Family	Single	Two	Family
10% - N/A 25 Pay Fac	\$25.73	\$57.04	\$69.90	\$32.16	\$71.30	\$87.38
10%+10%Non Par 25 Pay Fac	\$51.45	\$114.07	\$139.80	\$64.32	\$142.59	\$174.75

PPO Plan Max. 3-Tier

10% - N/A 25 Pay Fac	\$21.92	\$48.60	\$59.56	\$27.40	\$60.74	\$74.44
10%+10%Non Par 25 Pay Fac	\$43.84	\$97.19	\$119.11	\$54.80	\$121.49	\$148.89

HMO Plans @10%

25 Pay Faculty

Aetna US HealthCare-Phila.	\$32.05	\$70.59	\$86.62	\$40.07	\$88.24	\$108.28
Geisinger	\$23.44	\$51.65	\$63.37	\$29.30	\$64.56	\$79.21
Keystone Central	\$26.49	\$53.93	\$78.22	\$33.11	\$67.42	\$97.78
Keystone East	\$31.11	\$63.90	\$88.37	\$38.89	\$79.87	\$110.47
UPMC	\$24.60	\$54.50	\$66.80	\$30.75	\$68.13	\$83.50