

Rate Tables for Taxable Dependent Coverage

January 2014 to December 2014 Monthly Employee (Non- SLEOLA) Premium Rates

		Active Only	Active & Spouse	Active & Child, no GC/LWs	Active & Child, with one GC/LW	Active & Family, no GC/LWs	Active & Family, with one GC/LW	Active & Family, with two GC/LWs	Active & Family, with 3+ GC/LWs	Active & Domestic Partner	Active & Child + DP with no GC/LWs	Active & Child + DP with one GC/LW	Active + Domestic Partner & DP's Child	Active & Family + DP & DP's Family
Aetna EPO	Pre-Tax Rate	\$ 55.77	\$111.53	\$111.53	\$ 55.76	\$139.68	\$ 83.91	\$ 28.15	\$ 0.00	\$ 55.76	\$ 83.91	\$ 28.15	\$ 28.15	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 55.77	\$ 0.00	\$ 55.77	\$111.53	\$139.68	\$ 55.77	\$ 55.77	\$111.53	\$111.53	\$139.68
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$316.01	\$ 0.00	\$316.01	\$632.02	\$791.52	\$316.01	\$316.01	\$632.02	\$632.02	\$791.52
Aetna POS	Pre-Tax Rate	\$ 68.10	\$122.58	\$122.58	\$ 54.48	\$170.24	\$102.14	\$ 47.66	\$ 0.00	\$ 54.48	\$102.14	\$ 47.66	\$ 47.66	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 68.10	\$ 0.00	\$ 68.10	\$122.58	\$170.24	\$ 68.10	\$ 68.10	\$122.58	\$122.58	\$170.24
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$332.49	\$ 0.00	\$332.49	\$598.47	\$831.17	\$332.49	\$332.49	\$598.47	\$598.47	\$831.17
CareFirst EPO	Pre-Tax Rate	\$ 63.56	\$133.39	\$133.39	\$ 69.83	\$165.25	\$101.69	\$ 31.86	\$ 0.00	\$ 69.83	\$101.69	\$ 31.86	\$ 31.86	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 63.56	\$ 0.00	\$ 63.56	\$133.39	\$165.25	\$ 63.56	\$ 63.56	\$133.39	\$133.39	\$165.25
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$360.19	\$ 0.00	\$360.19	\$755.88	\$936.44	\$360.19	\$360.19	\$755.88	\$755.88	\$936.44
CareFirst POS	Pre-Tax Rate	\$ 64.68	\$116.44	\$116.44	\$ 51.76	\$161.71	\$ 97.03	\$ 45.27	\$ 0.00	\$ 51.76	\$ 97.03	\$ 45.27	\$ 45.27	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 64.68	\$ 0.00	\$ 64.68	\$116.44	\$161.71	\$ 64.68	\$ 64.68	\$116.44	\$116.44	\$161.71
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$315.82	\$ 0.00	\$315.82	\$568.48	\$789.53	\$315.82	\$315.82	\$568.48	\$568.48	\$789.53
CareFirst PPO	Pre-Tax Rate	\$ 95.23	\$171.42	\$171.42	\$ 76.19	\$238.09	\$142.86	\$ 66.67	\$ 0.00	\$ 76.19	\$142.86	\$ 66.67	\$ 66.67	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 95.23	\$ 0.00	\$ 95.23	\$171.42	\$238.09	\$ 95.23	\$ 95.23	\$171.42	\$171.42	\$238.09
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$380.93	\$ 0.00	\$380.93	\$685.66	\$952.34	\$380.93	\$380.93	\$685.66	\$685.66	\$952.34
UHC EPO	Pre-Tax Rate	\$ 63.94	\$132.99	\$132.99	\$ 69.05	\$158.57	\$ 94.63	\$ 25.58	\$ 0.00	\$ 69.05	\$ 94.63	\$ 25.58	\$ 25.58	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 63.94	\$ 0.00	\$ 63.94	\$132.99	\$158.57	\$ 63.94	\$ 63.94	\$132.99	\$132.99	\$158.57
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$362.36	\$ 0.00	\$362.36	\$753.59	\$898.55	\$362.36	\$362.36	\$753.59	\$753.59	\$898.55
UHC POS	Pre-Tax Rate	\$ 73.80	\$132.83	\$132.83	\$ 59.03	\$184.50	\$110.70	\$ 51.67	\$ 0.00	\$ 59.03	\$110.70	\$ 51.67	\$ 51.67	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 73.80	\$ 0.00	\$ 73.80	\$132.83	\$184.50	\$ 73.80	\$ 73.80	\$132.83	\$132.83	\$184.50
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$360.30	\$ 0.00	\$360.30	\$648.53	\$900.78	\$360.30	\$360.30	\$648.53	\$648.53	\$900.78
UHC PPO	Pre-Tax Rate	\$ 93.68	\$168.63	\$168.63	\$ 74.95	\$234.22	\$140.54	\$ 65.59	\$ 0.00	\$ 74.95	\$140.54	\$ 65.59	\$ 65.59	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 93.68	\$ 0.00	\$ 93.68	\$168.63	\$234.22	\$ 93.68	\$ 93.68	\$168.63	\$168.63	\$234.22
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$374.73	\$ 0.00	\$374.73	\$674.52	\$936.86	\$374.73	\$374.73	\$674.52	\$674.52	\$936.86
Pharmacy	Pre-Tax Rate	\$ 40.13	\$ 66.60	\$ 53.34	\$ 13.21	\$ 80.26	\$ 40.13	\$ 13.66	\$ 0.00	\$ 26.47	\$ 40.13	\$ 26.92	\$ 26.92	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 40.13	\$ 0.00	\$ 40.13	\$ 66.60	\$ 80.26	\$ 40.13	\$ 40.13	\$ 53.34	\$ 53.34	\$ 80.26
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$160.52	\$ 0.00	\$160.52	\$266.42	\$321.05	\$160.52	\$160.52	\$213.34	\$213.34	\$321.05
UCCI Dental HMO	Pre-Tax Rate	\$ 7.66	\$ 15.33	\$ 13.34	\$ 5.68	\$ 21.54	\$ 13.88	\$ 6.21	\$ 0.00	\$ 7.67	\$ 13.88	\$ 8.20	\$ 8.20	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.66	\$ 0.00	\$ 7.66	\$ 15.33	\$ 21.54	\$ 7.66	\$ 7.66	\$ 13.34	\$ 13.34	\$ 21.54
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.65	\$ 0.00	\$ 7.65	\$ 15.33	\$ 21.53	\$ 7.65	\$ 7.65	\$ 13.34	\$ 13.34	\$ 21.53
UCCI Dental PPO	Pre-Tax Rate	\$ 11.64	\$ 23.27	\$ 22.24	\$ 10.60	\$ 43.60	\$ 31.96	\$ 20.33	\$ 0.00	\$ 11.63	\$ 31.96	\$ 21.36	\$ 21.36	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.64	\$ 0.00	\$ 11.64	\$ 23.27	\$ 43.60	\$ 11.64	\$ 11.64	\$ 22.24	\$ 22.24	\$ 43.60
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.63	\$ 0.00	\$ 11.63	\$ 23.27	\$ 43.60	\$ 11.63	\$ 11.63	\$ 22.24	\$ 22.24	\$ 43.60

DP = Domestic Partner GC = Grandchild LW = Legal Ward

Rate Tables for Taxable Dependent Coverage

January 2014 to December 2014 Monthly Employee (SLEOLA) Premium Rates

		Active Only	Active & Spouse	Active & Child, no GC/LWs	Active & Child, with one GC/LW	Active & Family, no GC/LWs	Active & Family, with one GC/LW	Active & Family, with two GC/LWs	Active & Family, with 3+ GC/LWs	Active & Domestic Partner	Active & Child + DP with no GC/LWs	Active & Child + DP with one GC/LW	Active + Domestic Partner & DP's Child	Active & Family + DP & DP's Family
Aetna EPO	Pre-Tax Rate	\$ 74.70	\$149.40	\$149.40	\$ 74.70	\$187.10	\$112.40	\$ 37.70	\$ 0.00	\$ 74.70	\$112.40	\$ 37.70	\$ 37.70	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 74.70	\$ 0.00	\$ 74.70	\$149.40	\$187.10	\$ 74.70	\$ 74.70	\$149.40	\$149.40	\$187.10
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$298.79	\$ 0.00	\$298.79	\$597.58	\$748.40	\$298.79	\$298.79	\$597.58	\$597.58	\$748.40
Aetna POS	Pre-Tax Rate	\$ 93.33	\$168.00	\$168.00	\$ 74.67	\$233.32	\$139.99	\$ 65.32	\$ 0.00	\$ 74.67	\$139.99	\$ 65.32	\$ 65.32	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 93.33	\$ 0.00	\$ 93.33	\$168.00	\$233.32	\$ 93.33	\$ 93.33	\$168.00	\$168.00	\$233.32
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$330.91	\$ 0.00	\$330.91	\$595.62	\$827.24	\$330.91	\$330.91	\$595.62	\$595.62	\$827.24
CareFirst EPO	Pre-Tax Rate	\$ 85.14	\$178.67	\$178.67	\$ 93.53	\$221.35	\$136.21	\$ 42.68	\$ 0.00	\$ 93.53	\$136.21	\$ 42.68	\$ 42.68	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 85.14	\$ 0.00	\$ 85.14	\$178.67	\$221.35	\$ 85.14	\$ 85.14	\$178.67	\$178.67	\$221.35
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$340.56	\$ 0.00	\$340.56	\$714.70	\$885.42	\$340.56	\$340.56	\$714.70	\$714.70	\$885.42
CareFirst POS	Pre-Tax Rate	\$ 88.65	\$159.58	\$159.58	\$ 70.93	\$221.63	\$132.98	\$ 62.05	\$ 0.00	\$ 70.93	\$132.98	\$ 62.05	\$ 62.05	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 88.65	\$ 0.00	\$ 88.65	\$159.58	\$221.63	\$ 88.65	\$ 88.65	\$159.58	\$159.58	\$221.63
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$314.31	\$ 0.00	\$314.31	\$565.77	\$785.80	\$314.31	\$314.31	\$565.77	\$565.77	\$785.80
CareFirst PPO	Pre-Tax Rate	\$126.07	\$226.92	\$226.92	\$100.85	\$315.18	\$189.11	\$ 88.26	\$ 0.00	\$100.85	\$189.11	\$ 88.26	\$ 88.26	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$126.07	\$ 0.00	\$126.07	\$226.92	\$315.18	\$126.07	\$126.07	\$226.92	\$226.92	\$315.18
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$378.20	\$ 0.00	\$378.20	\$680.76	\$945.55	\$378.20	\$378.20	\$680.76	\$680.76	\$945.55
UHC EPO	Pre-Tax Rate	\$ 85.65	\$178.13	\$178.13	\$ 92.48	\$212.40	\$126.75	\$ 34.27	\$ 0.00	\$ 92.48	\$126.75	\$ 34.27	\$ 34.27	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 85.65	\$ 0.00	\$ 85.65	\$178.13	\$212.40	\$ 85.65	\$ 85.65	\$178.13	\$178.13	\$212.40
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$342.61	\$ 0.00	\$342.61	\$712.54	\$849.60	\$342.61	\$342.61	\$712.54	\$712.54	\$849.60
UHC POS	Pre-Tax Rate	\$101.14	\$182.05	\$182.05	\$ 80.91	\$252.86	\$151.72	\$ 70.81	\$ 0.00	\$ 80.91	\$151.72	\$ 70.81	\$ 70.81	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$101.14	\$ 0.00	\$101.14	\$182.05	\$252.86	\$101.14	\$101.14	\$182.05	\$182.05	\$252.86
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$358.60	\$ 0.00	\$358.60	\$645.44	\$896.51	\$358.60	\$358.60	\$645.44	\$645.44	\$896.51
UHC PPO	Pre-Tax Rate	\$124.02	\$223.23	\$223.23	\$ 99.21	\$310.06	\$186.04	\$ 86.83	\$ 0.00	\$ 99.21	\$186.04	\$ 86.83	\$ 86.83	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$124.02	\$ 0.00	\$124.02	\$223.23	\$310.06	\$124.02	\$124.02	\$223.23	\$223.23	\$310.06
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$372.05	\$ 0.00	\$372.05	\$669.70	\$930.19	\$372.05	\$372.05	\$669.70	\$669.70	\$930.19
Pharmacy	Pre-Tax Rate	\$ 43.83	\$ 72.74	\$ 58.25	\$ 14.42	\$ 87.66	\$ 43.83	\$ 14.92	\$ 0.00	\$ 28.91	\$ 43.83	\$ 29.41	\$ 29.41	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 43.83	\$ 0.00	\$ 43.83	\$ 72.74	\$ 87.66	\$ 43.83	\$ 43.83	\$ 58.25	\$ 58.25	\$ 87.66
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$175.31	\$ 0.00	\$175.31	\$290.95	\$350.62	\$175.31	\$175.31	\$232.98	\$232.98	\$350.62
UCCI Dental HMO	Pre-Tax Rate	\$ 7.66	\$ 15.33	\$ 13.34	\$ 5.68	\$ 21.54	\$ 13.88	\$ 6.21	\$ 0.00	\$ 7.67	\$ 13.88	\$ 8.20	\$ 8.20	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.66	\$ 0.00	\$ 7.66	\$ 15.33	\$ 21.54	\$ 7.66	\$ 7.66	\$ 13.34	\$ 13.34	\$ 21.54
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.65	\$ 0.00	\$ 7.65	\$ 15.33	\$ 21.53	\$ 7.65	\$ 7.65	\$ 13.34	\$ 13.34	\$ 21.53
UCCI Dental PPO	Pre-Tax Rate	\$ 11.64	\$ 23.27	\$ 22.24	\$ 10.60	\$ 43.60	\$ 31.96	\$ 20.33	\$ 0.00	\$ 11.63	\$ 31.96	\$ 21.36	\$ 21.36	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.64	\$ 0.00	\$ 11.64	\$ 23.27	\$ 43.60	\$ 11.64	\$ 11.64	\$ 22.24	\$ 22.24	\$ 43.60
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.63	\$ 0.00	\$ 11.63	\$ 23.27	\$ 43.60	\$ 11.63	\$ 11.63	\$ 22.24	\$ 22.24	\$ 43.60

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Aetna EPO	Pre-Tax Rate	\$ 27.89	\$ 55.77	\$ 55.77	\$ 27.88	\$ 69.84	\$ 41.95	\$ 14.07	\$ 0.00	\$ 27.88	\$ 41.95	\$ 14.07	\$ 14.07	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 27.89	\$ 0.00	\$ 27.89	\$ 55.77	\$ 69.84	\$ 27.89	\$ 27.89	\$ 55.77	\$ 55.77	\$ 69.84
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$158.00	\$ 0.00	\$158.00	\$316.01	\$395.76	\$158.00	\$158.00	\$316.01	\$316.01	\$395.76
Aetna POS	Pre-Tax Rate	\$ 34.05	\$ 61.29	\$ 61.29	\$ 27.24	\$ 85.12	\$ 51.07	\$ 23.83	\$ 0.00	\$ 27.24	\$ 51.07	\$ 23.83	\$ 23.83	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 34.05	\$ 0.00	\$ 34.05	\$ 61.29	\$ 85.12	\$ 34.05	\$ 34.05	\$ 61.29	\$ 61.29	\$ 85.12
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$166.25	\$ 0.00	\$166.25	\$299.24	\$415.59	\$166.25	\$166.25	\$299.24	\$299.24	\$415.59
CareFirst EPO	Pre-Tax Rate	\$ 31.78	\$ 66.70	\$ 66.70	\$ 34.92	\$ 82.63	\$ 50.85	\$ 15.93	\$ 0.00	\$ 34.92	\$ 50.85	\$ 15.93	\$ 15.93	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 31.78	\$ 0.00	\$ 31.78	\$ 66.70	\$ 82.63	\$ 31.78	\$ 31.78	\$ 66.70	\$ 66.70	\$ 82.63
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$180.10	\$ 0.00	\$180.10	\$377.94	\$468.22	\$180.10	\$180.10	\$377.94	\$377.94	\$468.22
CareFirst POS	Pre-Tax Rate	\$ 32.34	\$ 58.22	\$ 58.22	\$ 25.88	\$ 80.86	\$ 48.52	\$ 22.64	\$ 0.00	\$ 25.88	\$ 48.52	\$ 22.64	\$ 22.64	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 32.34	\$ 0.00	\$ 32.34	\$ 58.22	\$ 80.86	\$ 32.34	\$ 32.34	\$ 58.22	\$ 58.22	\$ 80.86
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$157.91	\$ 0.00	\$157.91	\$284.24	\$394.76	\$157.91	\$157.91	\$284.24	\$284.24	\$394.76
CareFirst PPO	Pre-Tax Rate	\$ 47.62	\$ 85.71	\$ 85.71	\$ 38.09	\$119.05	\$ 71.43	\$ 33.34	\$ 0.00	\$ 38.09	\$ 71.43	\$ 33.34	\$ 33.34	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 47.62	\$ 0.00	\$ 47.62	\$ 85.71	\$119.05	\$ 47.62	\$ 47.62	\$ 85.71	\$ 85.71	\$119.05
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$190.46	\$ 0.00	\$190.46	\$342.83	\$476.17	\$190.46	\$190.46	\$342.83	\$342.83	\$476.17
UHC EPO	Pre-Tax Rate	\$ 31.97	\$ 66.50	\$ 66.50	\$ 34.53	\$ 79.29	\$ 47.32	\$ 12.79	\$ 0.00	\$ 34.53	\$ 47.32	\$ 12.79	\$ 12.79	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 31.97	\$ 0.00	\$ 31.97	\$ 66.50	\$ 79.29	\$ 31.97	\$ 31.97	\$ 66.50	\$ 66.50	\$ 79.29
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$181.18	\$ 0.00	\$181.18	\$376.79	\$449.27	\$181.18	\$181.18	\$376.79	\$376.79	\$449.27
UHC POS	Pre-Tax Rate	\$ 36.90	\$ 66.42	\$ 66.42	\$ 29.52	\$ 92.25	\$ 55.35	\$ 25.83	\$ 0.00	\$ 29.52	\$ 55.35	\$ 25.83	\$ 25.83	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 36.90	\$ 0.00	\$ 36.90	\$ 66.42	\$ 92.25	\$ 36.90	\$ 36.90	\$ 66.42	\$ 66.42	\$ 92.25
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$180.15	\$ 0.00	\$180.15	\$324.26	\$450.39	\$180.15	\$180.15	\$324.26	\$324.26	\$450.39
UHC PPO	Pre-Tax Rate	\$ 46.84	\$ 84.32	\$ 84.32	\$ 37.48	\$117.11	\$ 70.27	\$ 32.79	\$ 0.00	\$ 37.48	\$ 70.27	\$ 32.79	\$ 32.79	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 46.84	\$ 0.00	\$ 46.84	\$ 84.32	\$117.11	\$ 46.84	\$ 46.84	\$ 84.32	\$ 84.32	\$117.11
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$187.37	\$ 0.00	\$187.37	\$337.26	\$468.43	\$187.37	\$187.37	\$337.26	\$337.26	\$468.43
Pharmacy	Pre-Tax Rate	\$ 20.06	\$ 33.30	\$ 26.67	\$ 6.61	\$ 40.13	\$ 20.07	\$ 6.83	\$ 0.00	\$ 13.24	\$ 20.07	\$ 13.46	\$ 13.46	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 20.06	\$ 0.00	\$ 20.06	\$ 33.30	\$ 40.13	\$ 20.06	\$ 20.06	\$ 26.67	\$ 26.67	\$ 40.13
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 80.26	\$ 0.00	\$ 80.26	\$133.21	\$160.52	\$ 80.26	\$ 80.26	\$106.67	\$106.67	\$160.52
UCCI Dental HMO	Pre-Tax Rate	\$ 3.83	\$ 7.67	\$ 6.66	\$ 2.83	\$ 10.78	\$ 6.95	\$ 3.11	\$ 0.00	\$ 3.84	\$ 6.95	\$ 4.12	\$ 4.12	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3.83	\$ 0.00	\$ 3.83	\$ 7.67	\$ 10.78	\$ 3.83	\$ 3.83	\$ 6.66	\$ 6.66	\$ 10.78
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3.83	\$ 0.00	\$ 3.83	\$ 7.66	\$ 10.77	\$ 3.83	\$ 3.83	\$ 6.66	\$ 6.66	\$ 10.77
UCCI Dental PPO	Pre-Tax Rate	\$ 5.82	\$ 11.64	\$ 11.12	\$ 5.30	\$ 21.80	\$ 15.98	\$ 10.16	\$ 0.00	\$ 5.82	\$ 15.98	\$ 10.68	\$ 10.68	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 5.82	\$ 0.00	\$ 5.82	\$ 11.64	\$ 21.80	\$ 5.82	\$ 5.82	\$ 11.12	\$ 11.12	\$ 21.80
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 5.82	\$ 0.00	\$ 5.82	\$ 11.63	\$ 21.79	\$ 5.82	\$ 5.82	\$ 11.12	\$ 11.12	\$ 21.79

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Aetna EPO	Pre-Tax Rate	\$ 37.35	\$ 74.70	\$ 74.70	\$ 37.35	\$ 93.55	\$ 56.20	\$ 18.85	\$ 0.00	\$ 37.35	\$ 56.20	\$ 18.85	\$ 18.85	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 37.35	\$ 0.00	\$ 37.35	\$ 74.70	\$ 93.55	\$ 37.35	\$ 37.35	\$ 74.70	\$ 74.70	\$ 93.55
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$149.40	\$ 0.00	\$149.40	\$298.79	\$374.20	\$149.40	\$149.40	\$298.79	\$298.79	\$374.20
Aetna POS	Pre-Tax Rate	\$ 46.67	\$ 84.00	\$ 84.00	\$ 37.33	\$116.66	\$ 69.99	\$ 32.66	\$ 0.00	\$ 37.33	\$ 69.99	\$ 32.66	\$ 32.66	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 46.67	\$ 0.00	\$ 46.67	\$ 84.00	\$116.66	\$ 46.67	\$ 46.67	\$ 84.00	\$ 84.00	\$116.66
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$165.45	\$ 0.00	\$165.45	\$297.81	\$413.62	\$165.45	\$165.45	\$297.81	\$297.81	\$413.62
CareFirst EPO	Pre-Tax Rate	\$ 42.57	\$ 89.34	\$ 89.34	\$ 46.77	\$110.68	\$ 68.11	\$ 21.34	\$ 0.00	\$ 46.77	\$ 68.11	\$ 21.34	\$ 21.34	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 42.57	\$ 0.00	\$ 42.57	\$ 89.34	\$110.68	\$ 42.57	\$ 42.57	\$ 89.34	\$ 89.34	\$110.68
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$170.28	\$ 0.00	\$170.28	\$357.35	\$442.71	\$170.28	\$170.28	\$357.35	\$357.35	\$442.71
CareFirst POS	Pre-Tax Rate	\$ 44.33	\$ 79.79	\$ 79.79	\$ 35.46	\$110.82	\$ 66.49	\$ 31.03	\$ 0.00	\$ 35.46	\$ 66.49	\$ 31.03	\$ 31.03	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 44.33	\$ 0.00	\$ 44.33	\$ 79.79	\$110.82	\$ 44.33	\$ 44.33	\$ 79.79	\$ 79.79	\$110.82
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$157.15	\$ 0.00	\$157.15	\$282.89	\$392.90	\$157.15	\$157.15	\$282.89	\$282.89	\$392.90
CareFirst PPO	Pre-Tax Rate	\$ 63.04	\$113.46	\$113.46	\$ 50.42	\$157.59	\$ 94.55	\$ 44.13	\$ 0.00	\$ 50.42	\$ 94.55	\$ 44.13	\$ 44.13	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 63.04	\$ 0.00	\$ 63.04	\$113.46	\$157.59	\$ 63.04	\$ 63.04	\$113.46	\$113.46	\$157.59
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$189.10	\$ 0.00	\$189.10	\$340.38	\$472.78	\$189.10	\$189.10	\$340.38	\$340.38	\$472.78
UHC EPO	Pre-Tax Rate	\$ 42.83	\$ 89.07	\$ 89.07	\$ 46.24	\$106.20	\$ 63.37	\$ 17.13	\$ 0.00	\$ 46.24	\$ 63.37	\$ 17.13	\$ 17.13	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 42.83	\$ 0.00	\$ 42.83	\$ 89.07	\$106.20	\$ 42.83	\$ 42.83	\$ 89.07	\$ 89.07	\$106.20
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$171.30	\$ 0.00	\$171.30	\$356.27	\$424.80	\$171.30	\$171.30	\$356.27	\$356.27	\$424.80
UHC POS	Pre-Tax Rate	\$ 50.57	\$ 91.03	\$ 91.03	\$ 40.46	\$126.43	\$ 75.86	\$ 35.40	\$ 0.00	\$ 40.46	\$ 75.86	\$ 35.40	\$ 35.40	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 50.57	\$ 0.00	\$ 50.57	\$ 91.03	\$126.43	\$ 50.57	\$ 50.57	\$ 91.03	\$ 91.03	\$126.43
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$179.30	\$ 0.00	\$179.30	\$322.72	\$448.26	\$179.30	\$179.30	\$322.72	\$322.72	\$448.26
UHC PPO	Pre-Tax Rate	\$ 62.01	\$111.62	\$111.62	\$ 49.61	\$155.03	\$ 93.02	\$ 43.41	\$ 0.00	\$ 49.61	\$ 93.02	\$ 43.41	\$ 43.41	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 62.01	\$ 0.00	\$ 62.01	\$111.62	\$155.03	\$ 62.01	\$ 62.01	\$111.62	\$111.62	\$155.03
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$186.03	\$ 0.00	\$186.03	\$334.85	\$465.10	\$186.03	\$186.03	\$334.85	\$334.85	\$465.10
Pharmacy	Pre-Tax Rate	\$ 21.91	\$ 36.37	\$ 29.12	\$ 7.21	\$ 43.83	\$ 21.92	\$ 7.46	\$ 0.00	\$ 14.46	\$ 21.92	\$ 14.71	\$ 14.71	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 21.91	\$ 0.00	\$ 21.91	\$ 36.37	\$ 43.83	\$ 21.91	\$ 21.91	\$ 29.12	\$ 29.12	\$ 43.83
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 87.66	\$ 0.00	\$ 87.66	\$145.48	\$175.31	\$ 87.66	\$ 87.66	\$116.50	\$116.50	\$175.31
UCCI Dental HMO	Pre-Tax Rate	\$ 3.83	\$ 7.67	\$ 6.66	\$ 2.83	\$ 10.78	\$ 6.95	\$ 3.11	\$ 0.00	\$ 3.84	\$ 6.95	\$ 4.12	\$ 4.12	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3.83	\$ 0.00	\$ 3.83	\$ 7.67	\$ 10.78	\$ 3.83	\$ 3.83	\$ 6.66	\$ 6.66	\$ 10.78
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 3.83	\$ 0.00	\$ 3.83	\$ 7.66	\$ 10.77	\$ 3.83	\$ 3.83	\$ 6.66	\$ 6.66	\$ 10.77
UCCI Dental PPO	Pre-Tax Rate	\$ 5.82	\$ 11.64	\$ 11.12	\$ 5.30	\$ 21.80	\$ 15.98	\$ 10.16	\$ 0.00	\$ 5.82	\$ 15.98	\$ 10.68	\$ 10.68	\$ 0.00
	Post-Tax Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 5.82	\$ 0.00	\$ 5.82	\$ 11.64	\$ 21.80	\$ 5.82	\$ 5.82	\$ 11.12	\$ 11.12	\$ 21.80
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 5.82	\$ 0.00	\$ 5.82	\$ 11.63	\$ 21.79	\$ 5.82	\$ 5.82	\$ 11.12	\$ 11.12	\$ 21.79

DP = Domestic Partner GC = Grandchild LW = Legal Ward

Rate Tables for Taxable Dependent Coverage

January 2014 to December 2014 Monthly Retiree (without Medicare) Premium Rates

			Retiree & Spouse	Retiree & Child, no GC/LWs	Retiree & Child, with one GC/LW	Retiree & Family, no GC/LWs	Retiree & Family, with one GC/LW	Retiree & Family, with two GC/LWs	Retiree & Family, with 3+ GC/LWs	Retiree & Domestic Partner	Retiree & Child + DP with no GC/LWs	Retiree & Child + DP with one GC/LW	Retiree + Domestic Partner & DP's Child	Retiree & Family + DP & DP's Family
Aetna EPO	Post-Tax Rate	\$ 55.77	\$111.53	\$111.53	\$111.53	\$139.68	\$139.68	\$139.68	\$139.68	\$111.53	\$139.68	\$139.68	\$139.68	\$139.68
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$316.01	\$ 0.00	\$316.01	\$632.02	\$791.52	\$316.01	\$316.01	\$632.02	\$632.02	\$791.52
Aetna POS	Post-Tax Rate	\$ 68.10	\$122.58	\$122.58	\$122.58	\$170.24	\$170.24	\$170.24	\$170.24	\$122.58	\$170.24	\$170.24	\$170.24	\$170.24
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$332.49	\$ 0.00	\$332.49	\$598.47	\$831.17	\$332.49	\$332.49	\$598.47	\$598.47	\$831.17
CareFirst EPO	Post-Tax Rate	\$ 63.56	\$133.39	\$133.39	\$133.39	\$165.25	\$165.25	\$165.25	\$165.25	\$133.39	\$165.25	\$165.25	\$165.25	\$165.25
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$360.19	\$ 0.00	\$360.19	\$755.88	\$936.44	\$360.19	\$360.19	\$755.88	\$755.88	\$936.44
CareFirst POS	Post-Tax Rate	\$ 64.68	\$116.44	\$116.44	\$116.44	\$161.71	\$161.71	\$161.71	\$161.71	\$116.44	\$161.71	\$161.71	\$161.71	\$161.71
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$315.82	\$ 0.00	\$315.82	\$568.48	\$789.53	\$315.82	\$315.82	\$568.48	\$568.48	\$789.53
CareFirst PPO	Post-Tax Rate	\$ 95.23	\$171.42	\$171.42	\$171.42	\$238.09	\$238.09	\$238.09	\$238.09	\$171.42	\$238.09	\$238.09	\$238.09	\$238.09
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$380.93	\$ 0.00	\$380.93	\$685.66	\$952.34	\$380.93	\$380.93	\$685.66	\$685.66	\$952.34
UHC EPO	Post-Tax Rate	\$ 63.94	\$132.99	\$132.99	\$132.99	\$158.57	\$158.57	\$158.57	\$158.57	\$132.99	\$158.57	\$158.57	\$158.57	\$158.57
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$362.36	\$ 0.00	\$362.36	\$753.59	\$898.55	\$362.36	\$362.36	\$753.59	\$753.59	\$898.55
UHC POS	Post-Tax Rate	\$ 73.80	\$132.83	\$132.83	\$132.83	\$184.50	\$184.50	\$184.50	\$184.50	\$132.83	\$184.50	\$184.50	\$184.50	\$184.50
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$360.30	\$ 0.00	\$360.30	\$648.53	\$900.78	\$360.30	\$360.30	\$648.53	\$648.53	\$900.78
UHC PPO	Post-Tax Rate	\$ 93.68	\$168.63	\$168.63	\$168.63	\$234.22	\$234.22	\$234.22	\$234.22	\$168.63	\$234.22	\$234.22	\$234.22	\$234.22
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$374.73	\$ 0.00	\$374.73	\$674.52	\$936.86	\$374.73	\$374.73	\$674.52	\$674.52	\$936.86
Pharmacy	Post-Tax Rate	\$ 49.55	\$ 82.23	\$ 65.85	\$ 65.85	\$ 99.10	\$ 99.10	\$ 99.10	\$ 99.10	\$ 82.23	\$ 99.10	\$ 99.10	\$ 99.10	\$ 99.10
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$148.64	\$ 0.00	\$148.64	\$246.71	\$297.30	\$148.64	\$148.64	\$197.55	\$197.55	\$297.30
UCCI Dental HMO	Post-Tax Rate	\$ 7.66	\$ 15.33	\$ 13.34	\$ 13.34	\$ 21.54	\$ 21.54	\$ 21.54	\$ 21.54	\$ 15.33	\$ 21.54	\$ 21.54	\$ 21.54	\$ 21.54
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.65	\$ 0.00	\$ 7.65	\$ 15.33	\$ 21.53	\$ 7.65	\$ 7.65	\$ 13.34	\$ 13.34	\$ 21.53
UCCI Dental PPO	Post-Tax Rate	\$ 11.64	\$ 23.27	\$ 22.24	\$ 22.24	\$ 43.60	\$ 43.60	\$ 43.60	\$ 43.60	\$ 23.27	\$ 43.60	\$ 43.60	\$ 43.60	\$ 43.60
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.63	\$ 0.00	\$ 11.63	\$ 23.27	\$ 43.60	\$ 11.63	\$ 11.63	\$ 22.24	\$ 22.24	\$ 43.60

DP = Domestic Partner GC = Grandchild LW = Legal Ward

Rate Tables for Taxable Dependent Coverage

January 2014 to December 2014 Monthly Retiree (With Medicare) Premium Rates

		Retiree Only with Medicare	Retiree+1, 1 without Medicare, no GC/LW	Retiree+1, 1 GC/LW without Medicare	Retiree+1, both with Medicare	Retiree with Medicare, DP with Medicare	Retiree without Medicare, DP with Medicare	Retiree with Medicare, DP without Medicare	Retiree+2, 1 with Medicare, no GC/LW	Retiree+2, 1 with Medicare, +1 GC/LW	Retiree+2, 2 with Medicare, no GC/LW	Retiree+2, 2 with Medicare, +1 GC/LW	Retiree+2 or more, All with Medicare	Retiree plus 3 or more, at least 1 without Medicare			
														no GC/LW	1 GC/LW	2 GC/LW	3+ GC/LW
Aetna EPO	Post-Tax Rate	\$ 33.47	\$ 89.24	\$ 89.24	\$ 66.94	\$ 66.94	\$ 89.24	\$ 89.24	\$145.00	\$145.00	\$122.71	\$122.71	\$100.41	\$156.18	\$156.18	\$156.18	\$156.18
	Imputed Income	\$ 0.00	\$ 0.00	\$316.01	\$ 0.00	\$189.67	\$189.67	\$316.01	\$ 0.00	\$316.01	\$ 0.00	\$316.01	\$ 0.00	\$ 0.00	\$316.01	\$632.02	\$791.52
Aetna POS	Post-Tax Rate	\$ 34.04	\$102.13	\$102.13	\$ 68.10	\$ 68.10	\$102.13	\$102.13	\$156.62	\$156.62	\$136.19	\$136.19	\$102.13	\$170.24	\$170.24	\$170.24	\$170.24
	Imputed Income	\$ 0.00	\$ 0.00	\$332.49	\$ 0.00	\$166.18	\$166.18	\$332.49	\$ 0.00	\$332.49	\$ 0.00	\$332.49	\$ 0.00	\$ 0.00	\$332.49	\$598.47	\$831.17
CareFirst EPO	Post-Tax Rate	\$ 31.33	\$ 94.38	\$ 94.38	\$ 68.85	\$ 68.85	\$ 94.38	\$ 94.38	\$157.43	\$157.43	\$100.41	\$100.41	\$ 86.12	\$156.68	\$156.68	\$156.68	\$156.68
	Imputed Income	\$ 0.00	\$ 0.00	\$360.19	\$ 0.00	\$177.55	\$177.55	\$360.19	\$ 0.00	\$360.19	\$ 0.00	\$360.19	\$ 0.00	\$ 0.00	\$360.19	\$755.88	\$936.44
CareFirst POS	Post-Tax Rate	\$ 32.34	\$ 97.03	\$ 97.03	\$ 64.68	\$ 64.68	\$ 97.03	\$ 97.03	\$148.77	\$148.77	\$129.36	\$129.36	\$ 97.03	\$161.71	\$161.71	\$161.71	\$161.71
	Imputed Income	\$ 0.00	\$ 0.00	\$315.82	\$ 0.00	\$157.87	\$157.87	\$315.82	\$ 0.00	\$315.82	\$ 0.00	\$315.82	\$ 0.00	\$ 0.00	\$315.82	\$568.48	\$789.53
CareFirst PPO	Post-Tax Rate	\$ 47.62	\$142.83	\$142.83	\$ 95.23	\$ 95.23	\$142.83	\$142.83	\$219.02	\$219.02	\$190.46	\$190.46	\$142.83	\$238.09	\$238.09	\$238.09	\$238.09
	Imputed Income	\$ 0.00	\$ 0.00	\$380.93	\$ 0.00	\$190.49	\$190.49	\$380.93	\$ 0.00	\$380.93	\$ 0.00	\$380.93	\$ 0.00	\$ 0.00	\$380.93	\$685.66	\$952.34
UHC EPO	Post-Tax Rate	\$ 42.23	\$106.17	\$106.17	\$ 84.45	\$ 84.45	\$106.17	\$106.17	\$158.57	\$158.57	\$144.98	\$144.98	\$126.67	\$158.57	\$158.57	\$158.57	\$158.57
	Imputed Income	\$ 0.00	\$ 0.00	\$362.36	\$ 0.00	\$239.30	\$239.30	\$362.36	\$ 0.00	\$362.36	\$ 0.00	\$362.36	\$ 0.00	\$ 0.00	\$362.36	\$753.59	\$898.55
UHC POS	Post-Tax Rate	\$ 36.89	\$110.69	\$110.69	\$ 73.80	\$ 73.80	\$110.69	\$110.69	\$169.73	\$169.73	\$147.59	\$147.59	\$110.69	\$184.50	\$184.50	\$184.50	\$184.50
	Imputed Income	\$ 0.00	\$ 0.00	\$360.30	\$ 0.00	\$180.13	\$180.13	\$360.30	\$ 0.00	\$360.30	\$ 0.00	\$360.30	\$ 0.00	\$ 0.00	\$360.30	\$648.53	\$900.78
UHC PPO	Post-Tax Rate	\$ 46.85	\$140.52	\$140.52	\$ 93.68	\$ 93.68	\$140.52	\$140.52	\$215.46	\$215.46	\$187.36	\$187.36	\$140.52	\$234.22	\$234.22	\$234.22	\$234.22
	Imputed Income	\$ 0.00	\$ 0.00	\$374.73	\$ 0.00	\$187.38	\$187.38	\$374.73	\$ 0.00	\$374.73	\$ 0.00	\$374.73	\$ 0.00	\$ 0.00	\$374.73	\$674.52	\$936.86
Pharmacy	Post-Tax Rate	\$ 35.65	\$ 65.23	\$ 65.23	\$ 59.10	\$ 59.10	\$ 65.23	\$ 65.23	\$ 85.20	\$ 85.20	\$ 72.69	\$ 72.69	\$ 71.30	\$ 76.86	\$ 76.86	\$ 76.86	\$ 76.86
	Imputed Income	\$ 0.00	\$ 0.00	\$148.64	\$ 0.00	\$106.95	\$106.95	\$148.64	\$ 0.00	\$148.64	\$ 0.00	\$148.64	\$ 0.00	\$ 0.00	\$148.64	\$246.71	\$297.30

		Retiree Only	Retiree & Spouse	Retiree & Child, no GC/LWs	Retiree & Child, with one GC/LW	Retiree & Family, no GC/LWs	Retiree & Family, with one GC/LW	Retiree & Family, with two GC/LWs	Retiree & Family, with 3+ GC/LWs	Retiree & Domestic Partner	Retiree & Child + DP with no GC/LWs	Retiree & Child + DP with one GC/LW	Retiree + Domestic Partner & DP's Child	Retiree & Family + DP & DP's Family
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 7.65	\$ 0.00	\$ 7.65	\$ 15.33	\$ 21.53	\$ 7.65	\$ 7.65	\$ 13.34	\$ 13.34	\$ 21.53
UCCI Dental PPO	Post-Tax Rate	\$ 11.64	\$ 23.27	\$ 22.24	\$ 22.24	\$ 43.60	\$ 43.60	\$ 43.60	\$ 43.60	\$ 23.27	\$ 43.60	\$ 43.60	\$ 43.60	\$ 43.60
	Imputed Income	\$ 0.00	\$ 0.00	\$ 0.00	\$ 11.63	\$ 0.00	\$ 11.63	\$ 23.27	\$ 43.60	\$ 11.63	\$ 11.63	\$ 22.24	\$ 22.24	\$ 43.60

DP = Domestic Partner GC = Grandchild LW = Legal Ward