



MIAMI BEACH

2012 PREMIUM COSTS

| HUMANA MEDICAL PLAN | | | | |
|--|---------------|-----------|---------------|-----------|
| Bi-weekly deductions in before-tax dollars | | | | |
| | EMPLOYEE ONLY | | FAMILY | |
| | Employee Pays | City Pays | Employee Pays | City Pays |
| Standard HMO | \$67.36 | \$164.92 | \$236.13 | \$339.80 |
| Premium HMO | \$190.87 | \$190.87 | \$473.20 | \$473.20 |
| Standard PPO | \$130.85 | \$320.36 | \$454.00 | \$653.32 |
| Premium PPO | \$381.95 | \$381.95 | \$937.23 | \$937.23 |
| POS | \$212.53 | \$212.53 | \$527.43 | \$527.43 |

| METLIFE DENTAL PLAN | | | | | |
|--|---------------|-----------|---------------|---------------|-----------|
| Bi-weekly deductions in before-tax dollars | | | | | |
| Safeguard DHMO | Employee Pays | City Pays | MetLife PPO | Employee Pays | City Pays |
| Employee Only | \$3.09 | \$3.09 | Employee Only | \$9.39 | \$9.39 |
| Employee + 1 | \$5.40 | \$5.40 | Employee + 1 | \$18.09 | \$18.09 |
| Family | \$8.49 | \$8.49 | Family | \$27.74 | \$27.74 |

| DISABILITY INSURANCE | | | |
|---|---------------------------------------|---|---|
| Bi-weekly deductions in after-tax dollars | | | |
| Short-Term Disability | | Long-Term Disability (maximum benefit is \$10,000 monthly) | |
| Cost per each \$10 of weekly earnings (Annual Salary divided by 52) | | Cost per each \$100 of monthly earnings (Annual Salary divided by 12) | |
| Your age | Cost per each \$10 of weekly earnings | Your age | Cost per each \$100 of monthly earnings |
| Under 25 | \$0.50 | Under 25 | \$0.11 |
| 25 - 29 | \$0.54 | 25 - 29 | \$0.15 |
| 30 - 34 | \$0.50 | 30 - 34 | \$0.24 |
| 35 - 39 | \$0.47 | 35 - 39 | \$0.37 |
| 40 - 44 | \$0.52 | 40 - 44 | \$0.51 |
| 45 - 49 | \$0.58 | 45 - 49 | \$0.76 |
| 50 - 54 | \$0.62 | 50 - 54 | \$1.05 |
| 55 - 59 | \$0.92 | 55 - 59 | \$1.34 |
| 60 - 64 | \$1.18 | 60 - 64 | \$1.35 |
| 65 over | \$1.34 | 65 - 69 | \$1.76 |
| | | 70 - 74 | \$2.11 |
| | | 75 - 79 | \$2.11 |

| LEGAL PLANS | |
|---|--------|
| Bi-weekly deductions in after-tax dollars | |
| Preferred Legal Plan | \$4.98 |
| US Legal Plan | \$9.38 |

| SUPPLEMENTAL LIFE INSURANCE | |
|---|------------------------------|
| Bi-weekly deductions in after-tax dollars | |
| Your Age | Cost per \$1,000 of coverage |
| Under 25 | \$0.091 |
| 25 - 29 | \$0.086 |
| 30 - 34 | \$0.100 |
| 35 - 39 | \$0.130 |
| 40 - 44 | \$0.190 |
| 45 - 49 | \$0.295 |
| 50 - 54 | \$0.480 |
| 55 - 59 | \$0.765 |
| 60 - 64 | \$1.014 |
| 65 - 69 | \$1.583 |
| 70 Over | \$2.750 |

| DEPENDENT LIFE INSURANCE | | |
|--|-------------|-------------------|
| Employees elect coverage for Spouse which includes \$10,000 benefit for each child | | |
| Bi-weekly deductions in after-tax dollars | | |
| Your Supplemental Life Insurance Election | Each Child | Bi-weekly Premium |
| \$20,000.00 | \$10,000.00 | \$1.00 |
| \$30,000.00 | \$10,000.00 | \$1.50 |
| \$40,000.00 | \$10,000.00 | \$2.00 |
| \$50,000.00 | \$10,000.00 | \$2.50 |