25 - 26 MED RATES						
CODES						
	PPO FOR ALL EE'S					
		MONTHLY EE	EE PER CK	SEDOL PAYS	SEDOL PER CK	TOTAL PREMIUM
BMED PPO-S	PPO – SINGLE	$0.00	**$0.00**	$1,080.06	$540.03	$1,080.06
BMED PPO-D	PPO – DUAL	$1,080.06	**$540.03**	$1,080.06	$540.03	$2,160.12
BMED PPO-F	PPO – FAMILY	$2,160.12	**$1,080.06**	$1,080.06	$540.03	$3,240.18
	SSSA EE'S HIRED BEFORE 07/01/13					
	HMO'S FOR ALL OTHER EE'S HIRED AFTER 07/01/11 - SSSA EE'S HIRED AFTER 07/01/13					
DIV 7 T2		MONTHLY EE	EE PER CK	SEDOL PAYS	SEDOL PER CK	TOTAL PREMIUM
BT2 HMO-S	HMO – SINGLE	$0.00	**$0.00**	$1,029.12	$514.56	$1,029.12
BT2 HMO-D	HMO – DUAL	$604.11	**$302.06**	$1,454.12	$727.06	$2,058.23
BT2 HMO-F	HMO – FAMILY	$1,633.23	**$816.62**	$1,454.12	$727.06	$3,087.35
BT2 BLU-S	HMO BLUE – SINGLE	$0.00	**$0.00**	$998.24	$499.12	$998.24
BT2 BLU-D	HMO BLUE – DUAL	$573.25	**$286.63**	$1,423.24	$711.62	$1,996.49
BT2 BLUE-F	HMOB – FAMILY	$1,571.49	**$785.75**	$1,423.24	$711.62	$2,994.73