

SEIU LOCAL 32 RATES FOR 2009

MEDICAL RATES FOR UNION EMPLOYEES – BASE SALARY						
Coverage Level	CareFirst PPO		CIGNA HMO		CIGNA POS	
	Monthly	Biweekly	Monthly	Biweekly	Monthly	Biweekly
Employee Only	\$0.00	\$0.00	\$104.73	\$48.34	\$67.34	\$31.08
Employee + One	\$131.81	\$60.84	\$322.92	\$149.04	\$217.78	\$100.51
Employee + Family	\$263.74	\$110.19	\$551.08	\$254.34	\$379.54	\$175.17

DENTAL RATES FOR UNION EMPLOYEES						
Coverage Level	Aetna High Option		Aetna Low Option		Aetna DMO	
	Monthly Premiums	Biweekly Premiums	Monthly Premiums	Biweekly Premiums	Monthly Premiums	Biweekly Premiums
Employee Only	\$41.06	\$20.53	\$24.55	\$12.28	\$17.64	\$8.82
Employee + One	\$89.04	\$44.52	\$52.19	\$26.10	\$40.34	\$20.17
Employee + Family	\$107.73	\$53.87	\$63.16	\$31.58	\$48.79	\$24.40

NOTE: Biweekly deductions for dental coverage will be taken over 24 pay periods.

SUPPLEMENTAL GROUP TERM LIFE FOR UNION EMPLOYEES			
Employee and Spouse and Domestic Partner *		Child *	
Age Band	Monthly Rate per \$1,000 of Coverage	Monthly Rate per \$1,000 of Coverage	
<19	\$.040	\$.103	
20 – 24	\$.050		
25 – 29	\$.050		*NOTE: The premium paid for child coverage is based on the cost of coverage for one child, regardless of how many children you have.
30 – 34	\$.050		
35 – 39	\$.080		
40 - 44	\$.120		
45 – 49	\$.220		
50 – 54	\$.390		
55 – 59	\$.660		
60– 64	\$.900		
65 – 69	\$1.620		
70 - 74	\$2.150		
75+	\$2.440		*NOTE: Employee and Spouse , your rate will increase as you age and move to the next age band.