



CITY OF WACO

GROUP HEALTH PLAN, DENTAL AND VISION RATES

EFFECTIVE OCTOBER 1, 2009 thru SEPTEMBER 30, 2010

Blue Cross Blue Shield of TX Group Health EPO Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$497.92	\$497.92	\$0.00
Employee + Spouse	\$767.64	\$497.92	\$269.72
Employee + Child(ren)	\$621.56	\$497.92	\$123.64
Employee + Family	\$875.06	\$497.92	\$377.14
CIGNA Voluntary Dental Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$18.60	\$0.00	\$18.60
Employee + One	\$37.18	\$0.00	\$37.18
Employee + Family	\$53.00	\$0.00	\$53.00
OCD OF AMERICA Voluntary Dental Discount Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$0.00	\$0.00	\$0.00
Employee + One	\$8.00	\$0.00	\$8.00
Employee + Family	\$12.00	\$0.00	\$12.00
UNITED HEALTHCARE Voluntary Vision Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$5.70	\$0.00	\$5.70
Employee + Spouse	\$10.84	\$0.00	\$10.84
Employee + Child(ren)	\$11.40	\$0.00	\$11.40
Employee + Family	\$17.50	\$0.00	\$17.50