



CITY OF WACO
GROUP HEALTH PLAN, DENTAL AND VISION RATES
EFFECTIVE OCTOBER 1, 2008 thru SEPTEMBER 30, 2009

Blue Cross Blue Shield of TX Group Health EPO Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$469.76	\$469.76	\$0.00
Employee + Spouse	\$739.48	\$469.76	\$269.72
Employee + Child(ren)	\$593.40	\$469.76	\$123.64
Employee + Family	\$846.90	\$469.76	\$377.14

SAFEGUARD Voluntary Dental Plan	Monthly Rate	City of Waco Portion	Employee Portion
Employee Only	\$21.00	\$0.00	\$21.00
Employee + One	\$42.00	\$0.00	\$42.00
Employee + Family	\$59.86	\$0.00	\$59.86

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

SPECTERA 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