

**EGYPTIAN AREA SCHOOLS EMPLOYEE BENEFIT TRUST – GOLD PLAN**  
**HEALTH, VISION, DENTAL RATES (MONTHLY)**

***RATES FOR ACTIVE EMPLOYEES, RETIRED EMPLOYEES & SURVIVING DEPENDENTS***

***NOTE: THE FOLLOWING RATES APPLY TO ACTIVE EMPLOYEES, RETIRED EMPLOYEES AND SURVIVING DEPENDENTS OF A DECEASED EMPLOYEE.***

Active Employee rates include \$1.20 for \$10,000 Basic Life Insurance. Surviving Dependents/Retirees are not eligible for Basic Life Insurance and therefore the rates exclude the charge for Basic Life.

**EGYPTIAN HEALTH PLAN ADMINISTERED BY MERITAIN HEALTH**

<b>ACTIVE EMPLOYEES</b>		<b>SURVIVING DEPS/RETIRES GOLD</b>
<b>MEDICAL &amp; \$10,000 BASIC LIFE - GOLD PLAN</b>		
<b>COVERAGE TYPE</b>	<b>Eff. 9-1-12</b>	<b>Eff. 9-1-12</b>
Employee	\$620	\$618.80
Employee + Spouse	\$1,278	\$1,276.80
Employee + Child or Children	\$1,232	\$1,230.80
Family	\$1,374	\$1,372.80
Spouse only – no employee	N/A	\$658.00
Child or Children – no employee	N/A	\$612.00
Spouse & Child or Children – no employee	N/A	\$754.00

**UNIVIEW ADMINISTERED BY UNIVIEW**

<b>VISION</b>	
<b>COVERAGE TYPE</b>	<b>Eff. 9-1-12</b>
Employee	\$7.24
Employee + 1 dependent	\$10.36
Employee + 2 or more dependents	\$18.76

**DELTA DENTAL VOLUNTARY DENTAL PLAN**  
**ADMINISTERED BY DELTA DENTAL**

<b>DENTAL PLAN</b>		
	<b>Eff. 9-1-12</b>	
<b>COVERAGE TYPE</b>	<b>HIGH PLAN</b>	<b>LOW PLAN</b>
Employee	\$30.74	\$13.68
Employee + 1 dependent	\$56.44	\$25.12
Employee + 2 or more dependents	\$82.00	\$47.60
<b>SURVIVING DEPENDENTS OF EMPLOYEE</b>		
1 Dependent-no employee	\$30.74	\$13.68
2 Dependents-no employee	\$56.44	\$25.12
3 Dependents-no employee	\$82.00	\$47.60