

Belmont University Premium Rates Plan Year 2010

All premiums are payroll deducted on a pre-tax basis.

Monthly Employee Rates

for employees who are paid monthly - based on 12 premiums per year

	Employee Only	Employee + One	Family
Preferred Provider Plan	\$80.00	\$333.90	\$445.20
High Deductible Health Plan	\$40.00	\$275.60	\$376.30
Dental	\$10.00	\$45.00	\$65.00
Vision Options	\$3.00	\$4.60	\$8.00

Biweekly Employee Rates

for employees who are paid bi-weekly - based on 26 premiums per year

	Employee Only	Employee + One	Family
Preferred Provider Plan	\$36.92	\$154.11	\$205.48
High Deductible Health Plan	\$18.46	\$127.20	\$173.68
Dental	\$4.62	\$20.77	\$30.00
Vision Options	\$1.38	\$2.12	\$3.69

The rates listed below are for employees who earn the lesser of \$12.00/hour or \$24,960 per year.

Monthly Employee Rates

for employees who are paid monthly - based on 12 premiums per year

	Employee Only	Employee + One	Family
Preferred Provider Plan	\$40.00	\$293.90	\$405.20
High Deductible Health Plan	\$0.00	\$235.60	\$336.30
Dental	\$0.00	\$45.00	\$65.00
Vision Options	\$0.00	\$4.60	\$8.00

Biweekly Employee Rates

for employees who are paid bi-weekly - based on 26 premiums per year

	Employee Only	Employee + One	Family
Preferred Provider Plan	\$18.46	\$135.65	\$187.02
High Deductible Health Plan	\$0.00	\$108.74	\$155.22
Dental	\$0.00	\$20.77	\$30.00
Vision Options	\$0.00	\$2.12	\$3.69