



**STATE OF RHODE ISLAND
AND
PROVIDENCE PLANTATIONS**

FY 2010 BIWEEKLY HEALTH CO-SHARES

January 1, 2010 through June 30, 2010

Applies to Faculty, Non-classified, Non-Union

<u>Coverage Level</u>	<u>Percentage</u>	<u>Medical</u>	<u>Dental</u>	<u>Vision</u>	<u>Total 7/1/09</u>
<i>Individual :</i>					
Under \$80,000	13%	\$30.10	\$1.80	\$0.42	\$32.32
Over \$80,000	15%	\$34.73	\$2.08	\$0.48	\$37.29
<i>Family :</i>					
Under \$50,000	10%	\$64.91	\$3.88	\$0.68	\$69.47
\$50,000 to \$80,000	13%	\$84.38	\$5.04	\$0.88	\$90.30
\$80,000 and above	15%	\$97.37	\$5.84	\$1.02	\$104.23

Applies to all Classified Employees

<u>Coverage Level</u>	<u>Percentage</u>	<u>Medical</u>	<u>Dental</u>	<u>Vision</u>	<u>Total 07/01/09</u>
<i>Individual :</i>					
Less than \$45,000	15%	\$34.73	\$2.08	\$0.48	\$37.29
\$45,000 to less than \$90,000	20%	\$46.31	\$2.77	\$0.64	\$49.72
\$90,000 and above	25%	\$57.89	\$3.46	\$0.80	\$62.15
<i>Family :</i>					
Less than \$45,000	13.5%	\$87.63	\$5.23	\$0.92	\$93.78
\$45,000 to less than \$90,000	20%	\$129.82	\$7.75	\$1.36	\$138.93
\$90,000 and above	25%	\$162.28	\$9.69	\$1.70	\$173.67

Part Time Employee (Based on Annualized Total Rate)

<u>Coverage Level</u>	<u>Percentage</u>	<u>Medical</u>	<u>Dental</u>	<u>Vision</u>	<u>Total 07/01/09</u>
<i>Individual :</i>					
Less than \$55,000	15%	\$34.73	\$2.08	\$0.48	\$37.29
\$55,000 Less than \$90,000	20%	\$46.31	\$2.77	\$0.64	\$49.72
\$90,000 and above	35%	\$81.04	\$4.85	\$1.12	\$87.01
<i>Family :</i>					
Less than \$55,000	15%	\$97.37	\$5.81	\$1.02	\$104.20
\$55,000 Less than \$90,000	20%	\$129.82	\$7.75	\$1.36	\$138.93
\$90,000 and above	35%	\$227.19	\$13.57	\$2.38	\$243.14