

**Floors, Inc.  
2008-2009 Benefits Costs**

(Cobra rates do not include 2% admin fee)

*ATV/TEL*

<u>Medical-United Healthcare</u>	<u>Base Plan</u>		<u>Buy Up</u>		<u>Cobra Cost</u>	
	<u>Base Plan</u>	<u>Buy Up</u>	<u>Base Plan</u>	<u>Buy Up</u>	<u>Cobra Cost</u>	<u>Cobra Cost</u>
Cost Per Pay Period (24)						
Employee Only:	\$50.00	\$106.82	\$422.79	\$536.43		
Employee & Spouse:	\$303.67	\$428.66	\$930.13	\$1,180.12		
Employee & Child(ren):	\$261.38	\$375.02	\$845.56	\$1,072.83		
Employee & Family:	\$599.62	\$804.16	\$1,522.04	\$1,931.12		

<u>Dental Select</u>	<u>Silver</u>		<u>Co-Pay</u>		<u>Indemnity</u>	
	Per Pay Period (24)					
Employee Only:	\$0.00	\$6.88	\$13.68			
Employee + One:	\$3.50	\$14.48	\$30.86			
Employee + Family:	\$5.50	\$20.11	\$47.46			

Life Insurance--Unimeria (a United Healthcare Company)  
 \$20,000 Life & AD & D Free--Company Paid  
 Voluntary Life See Attached Schedule

<u>Vision-VBA</u>	<u>Packet of benefit summaries available upon request.</u>	
Per Pay Period (24)	\$4.75	
Employee Only:	\$8.25	
Employee + One:	\$11.00	

<u>All State</u>	<u>Accident/Short Term Disability</u>		
	<u>Accident Only</u>	<u>Accident &amp; Disability</u>	<u>Accident &amp; Disability</u>
<u>Cancer Dread Disease</u>			
Per Pay Period (24)			
Employee Only:	\$9.48	\$12.74	\$16.88
Family:	\$16.31	\$22.15	\$29.72
	<u>With ICU Rider</u>		
Employee Only:	\$12.48	\$15.73	\$19.88
Family:	\$22.31	\$28.14	\$35.71