

BNA 12/8/09

<u>3 Tier Monthly Employee Premiums</u>			
(Based on total annual premium costs of benefits to BNA)			
			Premiums
Employee Only	25%		\$144.10
Employee Plus 1 Dependent	30%		\$341.83
Family	35%		\$612.38
<u>Spousal Premium Surcharge</u>			
Employee Spouses who are eligible for medical benefit coverage under their employer plans but who elect coverage under the BNA Plan will pay a monthly premium surcharge in the amount of \$150.			
<u>Co-Insurance for Medical Services -- In Network</u>			
Employee Pays: 20% of costs after meeting annual deductible			
Company Pays: 80% of costs			
<u>Annual Deductibles -- In Network</u>			
Employee Only		\$300	
Employee Plus 1 Dependent		\$600	
Family		\$900	
<u>Maximum Annual Out of Pocket -- In Network</u>			
(After meeting annual OOP costs - Company will pay 100%)			
Employee Only		4% of salary base	
Employee Plus 1 Dependent		6% of salary base	
Family		8% of salary base	
<u>Co-Insurance for Medical Services -- Out of Network</u>			
Employee Pays: 35% of costs after meeting annual deductible			
Company Pays: 65% of costs			
<u>Annual Deductibles -- Out of Network</u>			
Employee Only		\$400	
Employee Plus 1 Dependent		\$800	
Family		\$ 2,400	
<u>Maximum Annual Out of Pocket -- Out of Network</u>			
(After meeting annual OOP costs - Company will pay 100%)			
Employee Only		4% of salary base	
Employee Plus 1 Dependent		6% of salary base	
Family		8% of salary base	

## BNA Benefits Proposal

Network Plans

All current Coverage under the Kaiser HMO Plan will be terminated.  
 All BNA Healthcare coverage will be under the Aetna PPO Plan

RX - Prescription Drugs Co-Payments -- Retail

Generic	\$20
Preferred Brand	\$35
Non-Preferred Brand	\$50

RX - Prescription Drugs Co-Payments -- Mail Order

Generic	\$55
Preferred Brand	\$95
Non-Preferred Brand	\$135

Office Visit Co-Payments

Primary Care Physician	\$25
Specialist	\$35

Emergency Room Visit Co-Payments -- In Network

\$100

These changes will become effective as soon as administratively possible.

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