

# AIMS COMMUNITY COLLEGE

## MONTHLY PREMIUM RATE SHEET - Effective 7-01-2009

### **MEDICAL INSURANCE - Anthem BlueCross/BlueShield**

Note: The State Board for Community Colleges and Occupational Education System (SBCCOE) Employee Benefit Trust is contributing \$10 per enrolled employee per month towards the medical insurance premium for the 2009-10 plan year.

**Triple Option Plan**  
(same rates regardless of option chosen)

**HMO Colorado Plan (HMO)**  
**HMO Colorado Point-of-Service Plan (POS)**  
**BluePreferred Plan (PPO)**

	Total Monthly Premium	SBCCOE Monthly Contribution	Aims College Monthly Contribution	Employee Monthly Contribution
Employee Only	\$ 438.00	\$ 10.00	\$ 355.00	\$ 73.00
Employee Plus Family	\$ 1,138.00	\$ 10.00	\$ 819.00	\$ 309.00

### **DENTAL INSURANCE - DentaBenefits**

(Mutual of Omaha/United Concordia)

	Option I			Option II		
	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
Employee Only	\$ 35.00	\$ 28.00	\$ 7.00	\$ 20.00	\$ 16.00	\$ 4.00
Employee Plus Family	\$ 78.00	\$ 56.00	\$ 22.00	\$ 55.00	\$ 40.00	\$ 15.00

### **VISION (Voluntary) - VSP**

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
Employee Only	\$7.89	\$0.00	\$7.89
Employee Plus One	14.20	\$0.00	14.20
Employee Plus Family	21.29	\$0.00	21.29

### **BASIC TERM LIFE/AD&D INS.**

**UNUM**

(\$ .13/\$1,000 Benefit Amount)

2X Annual Contract (Automatic)

(Maximum Benefit Amt. \$300,000)

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
\$ .13/\$1,000	\$ .13/\$1,000	\$ .13/\$1,000	\$0

### **Dependent Term Life, UNUM**

(Voluntary)

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
Amount	\$5,000	\$2	\$0
	\$10,000	\$4	\$0
		\$0	\$2
		\$0	\$4

### **LONG TERM DISABILITY (LTD)**

**UNUM (\$ .20/\$100 monthly salary)**

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
\$ .20/\$100	\$ .20/\$100	\$ .20/\$100	\$0

### **PERA**

% of PERA Salary

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
For year 2009	20.95%	12.95%	8.00%
Effective Jan '10	21.85%	13.85%	8.00%

### **FLEX SPENDING ADMIN FEE**

**PayFlex**

Flex Medical/Dental  
Flex Child/Dependent

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
One Plan or Two Plans	\$ 4.20	\$ 4.20	\$0
Flex Child/Dependent Only	\$ 2.95	\$ 2.95	\$0

### **FICA MED. (if applicable)**

% of FICA Salary

	Total Monthly Premium	Aims College Monthly Contribution	Employee Monthly Contribution
	2.90%	1.45%	1.45%