2018 Rates: Version 5 - 10/4/2017

2018 Rates: Version 5 - 10 Portsmouth	Employee	Company	Total
Active Employee	Monthly Cost	Monthly Cost	Monthly Cost
Medical/Rx	Monthly 303t	Monthly 303t	Monthly Cost
Salaried - Plan A			
	184.36	737.63	921.99
Single Dual	390.92	1,563.69	1,954.61
Family	571.60	2,286.54	2,858.14
Salaried / USW - CDHP	+		
	95.92	678.88	774.80
Single Dual	201.44	1,425.63	1,627.07
Family	287.76	2,036.62	2,324.38
Family	201.16	2,036.62	2,324.30
USW - Plan C			
	408.68	1,226.04	1,634.72
Single	805.63	2,416.91	·
Dual			3,222.54
Family Vision	1,133.98	3,401.94	4,535.92
	I	T	
Salaried	2.04	0.00	40.04
Single	2.04	8.32	10.36
Dual	3.00	12.04	15.04
Family	5.36	21.56	26.92
11014/			
USW	0.50	7.77	40.00
Single	2.59	7.77	10.36
Dual	3.76	11.28	15.04
Family	6.73	20.19	26.92
Dental			
Salaried		10.00	
Single	12.03	18.06	30.09
Dual	24.90	37.36	62.26
Family	37.85	56.79	94.64
USW			
Single	7.52	22.57	30.09
Family	22.55	67.66	90.21
Portsmouth Retiree	Retiree	Company	Total
(Pre-Age 65)			
	Monthly Cost	Monthly Cost	Monthly Cost
Medical/Rx	Monthly Cost	Monthly Cost	Monthly Cost
Medical/Rx Salaried/USW - Plan E			
Medical/Rx Salaried/USW - Plan E Single	316.46	738.42	1,054.88
Medical/Rx Salaried/USW - Plan E Single Dual	316.46 670.90	738.42 1,565.44	1,054.88 2,236.3 ⁴
Medical/Rx Salaried/USW - Plan E Single Dual Family	316.46	738.42	1,054.88 2,236.3 ⁴
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision	316.46 670.90	738.42 1,565.44	1,054.88 2,236.3 ⁴
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW	316.46 670.90 981.03	738.42 1,565.44 2,289.07	1,054.88 2,236.34 3,270.10
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single	316.46 670.90 981.03	738.42 1,565.44 2,289.07	1,054.88 2,236.34 3,270.10
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual	316.46 670.90 981.03 3.10 4.51	738.42 1,565.44 2,289.07 7.26 10.53	1,054.88 2,236.34 3,270.10 10.36 15.04
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family	316.46 670.90 981.03	738.42 1,565.44 2,289.07	1,054.88 2,236.34 3,270.10 10.36 15.04
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dual Family Dental	316.46 670.90 981.03 3.10 4.51	738.42 1,565.44 2,289.07 7.26 10.53	1,054.88 2,236.34 3,270.10 10.36 15.04
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Single Single Single Single Single	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Salaried Single Dual Family	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Single Single Single Single Single	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Salaried Family Family	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92
Medical/Rx Salaried/USW - Plan E Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family USW	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85 18.06 37.36 56.79	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92 30.09 62.26 94.64
Medical/Rx Salaried/USW - Plan E Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Salaried Single Dual Family	316.46 670.90 981.03 3.10 4.51 8.07	738.42 1,565.44 2,289.07 7.26 10.53 18.85	1,054.88 2,236.34 3,270.10 10.36 15.04 26.92 30.09 62.26 94.64

Medical/Rx Salaried - Plan A Single Dual Family Salaried - CDHP Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried	
Single Dual Family Salaried - CDHP Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family	
Dual Family Salaried - CDHP Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Single Dual Family Vision Salaried/USW Single Dual Family Dental Family Dental Family Dental Family	
Dual Family Salaried - CDHP Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Single Dual Family Vision Salaried/USW Single Dual Family Dental Family Dental Family Dental Family	940.42
Salaried - CDHP Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family	1,993.70
Single Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Family Single Family	2,915.30
Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Single Dual Family	
Dual Family USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Single Dual Family	790.29
USW - Plan C Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family	1,659.61
Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Family Family Family Family	2,370.86
Single Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Family Family Family Family	
Dual Family Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Dental Family Family Salaried Single Dual Family	1,667.41
Vision Salaried/USW Single Dual Family Dental Salaried Single Dual Family Family	3,286.99
Salaried/USW Single Dual Family Dental Salaried Single Dual Family Family	4,626.63
Single Dual Family Dental Salaried Single Dual Family	
Dual Family Dental Salaried Single Dual Family	
Dental Salaried Single Dual Family	10.56
Dental Salaried Single Dual Family	15.34
Salaried Single Dual Family	27.45
Single Dual Family	
Dual Family	
Family	30.69
	63.50
USW	96.53
Single	30.69
Family	92.01

ETTP Salaried/USW Life Rates	
Employee Basic Life (Rate per \$1,000 per month) - Employee and E	mployer Paid
Bargaining Unit Rate - Employer Paid	\$0.280
Employee Cost Share - Salaried	\$0.140
Employer Cost Share - Salaried	\$0.140
Employee Supplemental Life (Rate per \$1,000 per month) - Employee	*
< 30	\$0.060
30-34	\$0.080
35-39	\$0.090
40-44	\$0.100
45-49	\$0.190
50-54	\$0.300
55-59	\$0.505
60-64	\$0.800
65-69	\$1.270
70-74	\$2.060
75-79	\$3.340
80-84	\$5.410
85-89	\$8.760
Optional Dependent Life - Spouse (Rate per \$1,000 per month) - Em	ployee Paid - Salaried
< 30	\$0.060
30-34	\$0.080
35-39	\$0.110
40-44	\$0.170
45-49	\$0.270
50-54	\$0.420
55-59	\$0.660
60-64	\$1.070
65+	\$1.720
Optional Dependent Life - Child - Rate per month for \$10,000 cover	age - Employee Paid - Salaried
Per Employee per Month	\$0.990