

**CSI INSURANCE PLAN AND TRUST FUND**  
**ACTIVE EMPLOYEE MONTHLY PREMIUM RATES**  
**EFFECTIVE SEPTEMBER 1, 2009**

**LIMITED BENEFIT PLAN**

Basic Life Accidental Death and Dismemberment	Monthly Premium
Employee Only	\$3.25
Employee with Dependents	\$5.25

**OPTIONAL VISION PLAN**

Optional Vision Plan	Monthly Premium
Employee Only	\$ 8.50
Employee + One	\$12.75
Employee + Family	\$22.75

Long Term Disability	66 2/3% Benefit to a max of \$9,000	60% Benefit to a max of \$5,000
Employee Only	\$0.28/\$100 compensation (.28 x \$30,000/100)/12 = \$7.00/month	\$0.21/\$100 compensation (.21 x \$30,000/100)/12 = \$5.25/month

**HEALTH INSURANCE PLANS**

Priority Health HBCI 1, HBCI 2, HMO 100, HMO 80, HRA, HSA
Rates for these plans are available by calling the CSI Insurance Plan Office at 877-274-8796, ext. 233. More information is available at <a href="http://www.CSionline.org/benefits">www.CSionline.org/benefits</a> .

**DENTAL**

Rate Category 1	Delta Premier (Current Plan)	Delta Dental PPO (Standard)	States			
Employee Only	\$ 40	\$ 39				
Employee and Child(ren)	\$ 88	\$ 85	Alaska	Indiana	Pennsylvania	
Employee and Spouse	\$ 76	\$ 73	California	New Jersey	Washington	
Family	\$143	\$138	Georgia	New York		

Rate Category 2			States			
Employee Only	\$ 33	\$ 27				
Employee and Child(ren)	\$ 72	\$ 60	Arizona	Minnesota	Texas	
Employee and Spouse	\$ 61	\$ 50	Florida	Ohio	Virginia	
Family	\$117	\$ 98	Massachusetts	Tennessee		

Rate Category 3			States			
Employee Only	\$ 31	\$ 25	Colorado	Mississippi	New Mexico	Utah
Employee and Child(ren)	\$ 69	\$ 56	Illinois	Missouri	North Carolina	Wisconsin
Employee and Spouse	\$ 58	\$ 46	Iowa	Montana	South Carolina	West Virginia
Family	\$112	\$ 91	Michigan	Nebraska	South Dakota	

