

*Transit Employees'*



**HEALTH AND WELFARE PLAN**



2701 WHITNEY PLACE • FORESTVILLE, MARYLAND 20747  
PHONE: (301) 568-2294 • FAX: (301) 568-7302

**Authority and Member H&W Contribution Rates Effective January 1, 2011**

**ACTIVE PARTICIPANTS**

		2011		2011	
		Full-Time		Part Time	
		<u>Member</u>	<u>Authority</u>	<u>Member</u>	<u>Authority</u>
Blue Choice HMO Medical	Single	64.10	371.56	156.99	278.66
CIGNA Dental	Family	166.91	936.11	400.93	702.09
Blue Choice HMO Medical	Single	67.22	380.35	162.31	285.26
CareFirst Dental	Family	174.74	956.85	413.94	717.64
Blue Choice HMO Medical	Single	75.37	380.35	170.46	285.26
CareFirst Dental with Orth	Family	195.72	956.85	434.92	717.64
CareFirst Medical	Single	128.93	548.01	265.93	411.00
CIGNA Dental	Family	315.83	1,313.56	644.22	985.17
CareFirst Medical & CareFirst Dental	Single	132.05	556.80	271.25	417.60
	Family	323.66	1,334.30	657.23	1,000.72
CareFirst Medical & CareFirst Dental with Orth	Single	140.20	556.80	279.40	417.60
	Family	344.64	1,334.30	678.21	1,000.72
Dental with Ortho	Single	8.15			
	Family	20.98			
KAISER Medical	Single	76.38	429.15	183.66	321.86
CIGNA Dental	Family	204.43	1,112.97	482.67	834.73
KAISER Medical	Single	79.50	437.94	188.98	328.46
CareFirst Dental	Family	212.26	1,133.71	495.68	850.28
KAISER Medical	Single	87.65	437.94	197.13	328.46
CareFirst Dental with Orth	Family	233.24	1,133.71	516.66	850.28