

# ALYESKA PIPELINE SERVICE COMPANY

## Medical Plan Monthly Costs

for plan year effective 3/1/2021 to 2/28/2022

### ACTIVE EMPLOYEE MEDICAL PLAN COSTS

#### CONSUMER CHOICE MEDICAL PLAN

	<u>Monthly Rate</u>
Employee	\$232.00
Employee + 1 (spouse or child)	\$465.00
Employee + 2 or more dependents	\$641.00
*Employee + Domestic Partner	\$465.00
*Employee + Child(ren) + Domestic Partner	\$641.00

*\*Employee will be taxed on a portion of their medical premiums if electing coverage for a domestic partner.*

### COBRA COSTS

#### CONSUMER CHOICE MEDICAL PLAN

	<u>Monthly Rate</u>
Employee	\$929.00
Employee + 1 (spouse or child)	\$1,859.00
Employee + 2 or more dependents	\$2,566.00
Spouse only	\$929.00
Child only	\$929.00

Cobra rates above do not include the additional 2% administration charge

### RETIREE MEDICAL PLAN COSTS

#### Subsidized pre age 65

	<u>Monthly Rate</u>
Retiree only (or spouse only, or child only)	\$352.00
Retiree + 1 (spouse or child)	\$652.00
Retiree + 2 or more dependents	\$789.00

#### Unsubsidized rate for participants pre age 65

	<u>Monthly Rate</u>
Retiree only (or spouse only, or child only)	\$1,409.00
Retiree + 1 (spouse or child)	\$2,608.00
Retiree + 2 or more dependents	\$3,156.00

# ALYESKA PIPELINE SERVICE COMPANY

## Dental Plan Monthly Costs

for plan year effective 3/1/2021 to 2/28/2022

### ACTIVE EMPLOYEE DENTAL PLAN COSTS

	<u>Monthly Rate</u>
Employee	\$17.00
Employee + 1 (spouse or child)	\$34.00
Employee + 2 or more dependents	\$60.00
*Employee + Domestic Partner	\$34.00
*Employee + Child(ren) + Domestic Partner	\$60.00

*\*Employee will be taxed on a portion of their medical premiums if electing coverage for a domestic partner.*

### COBRA COSTS

	<u>Monthly Rate</u>
Employee	\$68.00
Employee + 1 (spouse or child)	\$136.00
Employee + 2 or more dependents	\$238.00
Spouse or child only	\$68.00

Cobra rates above do not include the additional 2% administration charge

### RETIREE DENTAL PLAN COSTS

<u>Subsidized rates for participants pre age 65</u>	<u>Monthly Rate</u>
Retiree only (or spouse only, or child only)	\$17.00
Retiree + 1 (spouse or child)	\$34.00
Retiree + 2 or more dependents	\$60.00

<u>Unsubsidized rates for participants pre age 65</u>	<u>Monthly Rate</u>
Retiree only (or spouse only, or child only)	\$68.00
Retiree + 1 (spouse or child)	\$136.00
Retiree + 2 or more dependents	\$238.00