LEGALLY DOMICILED ADULT COVERAGE

ANNUAL IMPUTED INCOME and POST-TAX EMPLOYEE CONTRIBUTION WORKSHEET

FY13 (JULY 1, 2012 - JUNE 30, 2013)

CareFirst BCBS PPO (Medical)

Coverage Level	Total Annual Premium	Annual Employee Contributions	Post Tax Employee Contribution	Annual Employer Contribution	Annual Imputed Income	Total Taxable Benefit	Monthly Imputed Income	Imputed Income SM Per Pay	Imputed Income SS Per Pay	Post Tax EE Contribution SM Per Pay	Post Tax EE Contribution SS Per Pay
EE Only	$6,340.30	$1,268.06		$5,072.24							
EE + LDA	$12,571.80	$5,028.72	$3,760.66	$7,543.08	$2,470.84	$6,231.50	**$205.90**	**$102.95**	**$95.03**	**$156.69**	**$144.64**
EE + Fam + LDA	$18,874.00	$7,549.60	$0.00	$11,324.40	$6,231.50	$6,231.50	**$519.29**	**$259.65**	**$239.67**	**$0.00**	**$0.00**

BlueChoice HMO (Medical)

Coverage Level	Total Annual Premium	Annual Employee Contributions	Post Tax Employee Contribution	Annual Employer Contribution	Annual Imputed Income	Total Taxable Benefit	Monthly Imputed Income	Imputed Income SM Per Pay	Imputed income SS Per Pay	Post Tax EE Contribution SM Per Pay	Post Tax EE Contribution SS Per Pay
EE Only	$6,050.40	$1,210.08		$4,840.32							
EE + LDA	$12,136.80	$4,854.72	$3,644.64	$7,282.08	$2,441.76	$6,086.40	**$203.48**	**$101.74**	**$93.91**	**$151.86**	**$140.18**
EE + Fam + LDA	$17,305.40	$6,922.16	$0.00	$10,383.24	$6,086.40	$6,086.40	**$507.20**	**$253.60**	**$234.09**	**$0.00**	**$0.00**

Metlife Dental PPO

Coverage Level	Total Annual Premium	Annual Employee Contributions	Post Tax Employee Contribution	Post Tax EE Contribution SM Per Pay	Post Tax EE Contribution SS Per Pay
EE Only	$286.92	$286.92			
EE + LDA	$574.80	$574.80	$287.88	**$12.00**	$11.07
EE + Fam + LDA	$999.60	$999.60	$0.00	**$0.00**	$0.00

Metlife Dental Copay

Coverage Level	Total Annual Premium	Annual Employee Contributions	Post Tax Employee Contribution	Post Tax EE Contribution SM Per Pay	Post Tax EE Contribution SS Per Pay
EE Only	$186.36	$186.36			
EE + LDA	$390.96	$390.96	$204.60	**$8.53**	$7.87
EE + Fam + LDA	$702.60	$702.60	$0.00	**$0.00**	$0.00

VSP Buy Up

Coverage Level	Total Annual Premium	Annual Employee Contributions	Post Tax Employee Contribution	Post Tax EE Contribution SM Per Pay	Post Tax EE Contribution SS Per Pay
EE Only	$98.91	$98.91			
EE + LDA	$146.66	$146.66	$47.75	**$1.99**	$1.84
EE + Fam + LDA	$270.77	$270.77	$0.00	**$0.00**	$0.00