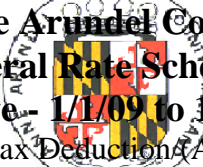


## Appendix III

  
**Anne Arundel County**  
**General Rate Schedule**  
**Effective 1/1/09 to 12/31/09**  
 Employee Pre-Tax Deduction & Addition To Pay)

### Pay Period Rates

Health and Dental Options	Individual	Parent & Child	Husband & Wife	Family
<b>CareFirst Triple Option with No Dental Coverage</b>	49.53	89.86	107.58	139.85
<b>CareFirst Triple Option with CIGNA Dental Care (DMO)</b>	50.23	90.88	108.88	141.42
<b>CareFirst Triple Option with CIGNA Dental PPO</b>	51.38	91.71	109.43	141.70
<b>Blue Choice HMO with No Dental Coverage</b>	17.34	32.45	39.05	51.09
<b>Blue Choice HMO with CIGNA Dental Care (DMO)</b>	18.04	33.47	40.35	52.66
<b>Blue Choice HMO with CIGNA Dental PPO</b>	19.19	34.30	40.90	52.94
<b>CIGNA Open Access Plus In-Network with No Dental Coverage</b>	14.95	28.34	34.05	44.56
<b>CIGNA Open Access Plus In-Network with CIGNA Dental Care (DMO)</b>	15.65	29.36	35.35	46.13
<b>CIGNA Open Access Plus In-Network with CIGNA Dental PPO</b>	16.80	30.19	35.90	46.41
<b>CIGNA Dental Care (DMO) with No Health</b>	(19.61)	(18.97)	(18.42)	(17.86)
<b>CIGNA Dental PPO with No Health</b>	(17.31)	(17.31)	(17.31)	(17.31)
<b>No Coverage (Opt Out)</b>	(21.00)	(21.00)	(21.00)	(21.00)
<b>No Coverage (Opt Out) AFSCME Local 2563</b>	(28.85)	(28.85)	(28.85)	(28.85)

This schedule is intended to provide a convenient cost comparison of various health plan options (**there is no charge for vision care**). Amounts in ( ) indicate an addition to pay. Pay period rates mean 26 times/year.