

2011 JPS Physician Group Rate Sheet

| MEDICAL PLAN PREMIUMS (Deductions are Semi-Monthly) | | |
|--|--------------------|--------------------|
| FULL-TIME | SELECT PLAN | CHOICE PLAN |
| Employee Only | \$ 38.89 | \$ 0.00 |
| Employee + 1 or 2 | 154.07 | 115.55 |
| Employee + 3 or 4 | 257.83 | 193.38 |
| Employee + 5 or more | 366.31 | 274.73 |
| PART-TIME | SELECT PLAN | CHOICE PLAN |
| Employee Only | \$ 68.98 | \$ 51.73 |
| Employee + 1 or 2 | 308.14 | 231.10 |
| Employee + 3 or 4 | 515.66 | 386.75 |
| Employee + 5 or more | 732.61 | 549.46 |
| DENTAL PLAN PREMIUMS (Deductions are Semi-Monthly) | | |
| FULL-TIME | DEDUCTION | |
| Employee Only | \$ 9.45 | |
| Employee + 1 or 2 | 22.65 | |
| Employee + 3 or 4 | 40.15 | |
| Employee + 5 or more | 57.37 | |
| PART-TIME | DEDUCTION | |
| Employee Only | \$ 9.45 | |
| Employee + 1 or 2 | 22.65 | |
| Employee + 3 or 4 | 40.15 | |
| Employee + 5 or more | 57.37 | |

| VISION PLAN PREMIUMS (Deductions are Semi-Monthly) | |
|---|------------------|
| SIGNATURE PLUS+ PLAN | DEDUCTION |
| Employee Only | \$ 7.31 |
| Employee + Spouse | 11.41 |
| Employee + Child(ren) | 11.65 |
| Employee + Family | 18.79 |
| SIGNATURE PLAN | DEDUCTION |
| Employee Only | \$ 4.40 |
| Employee + Spouse | 6.87 |
| Employee + Child(ren) | 7.02 |
| Employee + Family | 11.30 |
| CHOICE PLAN | DEDUCTION |
| Employee Only | \$ 2.50 |
| Employee + Spouse | 3.90 |
| Employee + Child(ren) | 3.98 |
| Employee + Family | 6.42 |
| ACCESS PLAN | DEDUCTION |
| Employee Only | FREE |
| Employee + Spouse | FREE |
| Employee + Child(ren) | FREE |
| Employee + Family | FREE |

The Hartford

Group Term Supplemental Life & Short Term Disability Rates

MODE OF RATES: MONTHLY PER \$1,000 - EFFECTIVE: JANUARY 2011

SUPPLEMENTAL LIFE RATES

| AGE BANDS | EMPLOYEE & SPOUSE RATES PER \$1,000 |
|-----------|-------------------------------------|
| < 30 | \$ 0.06 |
| 30 - 34 | \$ 0.08 |
| 35 - 39 | \$ 0.10 |
| 40 - 44 | \$ 0.15 |
| 45 - 49 | \$ 0.25 |
| 50 - 54 | \$ 0.38 |
| 55 - 59 | \$ 0.58 |
| 60 - 64 | \$ 0.89 |
| 65 - 69 | \$ 1.49 |
| 70 - 74 | \$ 2.69 |
| 75 > | \$ 5.47 |

DEPENDENT CHILD LIFE RATE

| | |
|--------------------------|----------|
| MONTHLY RATE PER \$1,000 | \$ 0.202 |
|--------------------------|----------|

SHORT TERM DISABILITY RATE

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|--------------------------|---------|
| MONTHLY RATE PER \$1,000 | \$ 0.80 |
|--------------------------|---------|