True-Gap Plan®

Tiered Premium Table

| _ | • | _ | | 4 |
|---|---|---|---|---|
| • | ı | o | r | |

Employee Only
Employee & Spouse
Employee & Child
Family

| \$7,500/\$5,000/\$500 | | | | |
|-----------------------|--|--|--|--|
| Total Premium | | | | |
| \$119.83 | | | | |
| \$208.39 | | | | |
| \$194.04 | | | | |
| \$279.87 | | | | |

Tier 2

| \$5,000/\$5,000/\$500 | | | | |
|-----------------------|--|--|--|--|
| Total Premium | | | | |
| \$108.41 | | | | |
| \$185.60 | | | | |
| \$173.62 | | | | |
| \$249.03 | | | | |

Tier 3

Employee Only
Employee & Spouse
Employee & Child
Family

| \$3,500/\$3,500/\$500 | | | | |
|-----------------------|--|--|--|--|
| Total Premium | | | | |
| \$83.58 | | | | |
| \$139.61 | | | | |
| \$130.93 | | | | |
| \$185.51 | | | | |

Tier 4

| \$2,500/\$2,500/\$500 | | | | |
|-----------------------|--|--|--|--|
| Total Premium | | | | |
| \$68.25 | | | | |
| \$106.92 | | | | |
| \$102.81 | | | | |
| \$146.06 | | | | |

Benefit amounts in blue shaded boxes represent Inpatient/Outpatient Surgery/Ambulance

