

City of Hollywood Health and Dental Plan  
Rates - Effective January 1, 2003

MEDICAL - Monthly Rates*	Retired before 1987			Retired after 1987			Retired after 10-01-02		
	Retiree Only	Retiree + 1 Dependent	Retiree + 2 or More Dependents	Retiree Only	Retiree + 1 Dependent	Retiree + 2 or More Dependents	Retiree Only	Retiree + 1 Dependent	Retiree + 2 or More Dependents
Confidential	N/A	N/A	N/A	0.00	324.64	564.77	0.00	324.64	564.77
Executive	444.72	769.36	1,009.49	0.00	0.00	0.00	0.00	0.00	0.00
Fire	444.72	769.36	1,009.49	0.00	324.64	564.77	32.50	357.14	597.27
General	444.72	769.36	1,009.49	0.00	324.64	564.77	0.00	324.64	564.77
Grant	444.72	769.36	1,009.49	0.00	324.64	564.77	0.00	324.64	564.77
Management	444.72	769.36	1,009.49	0.00	0.00	0.00	0.00	0.00	0.00
Police	444.72	769.36	1,009.49	0.00	324.64	564.77	0.00	324.64	564.77
Professional	N/A	N/A	N/A	0.00	0.00	0.00	0.00	0.00	0.00
Supervisory	N/A	N/A	N/A	0.00	0.00	0.00	0.00	0.00	0.00
Surviving Spouse	N/A	N/A	N/A	**444.72	**769.36	**1009.49	**444.72	**769.36	**1009.49
Surviving Spouse of Mgmt. or Exec.	N/A	N/A	N/A	0.00	0.00	0.00	0.00	0.00	0.00

\* Stepchild medical - There is an additional charge of \$199.09 per month to add a Stepchild that was not covered under the plan on June 30, 2001.

\*\* Benefits effective July 1, 1999 for Retirees that were covered by a Collective Bargaining Agreement.

DENTAL - Monthly Rates	Comprehensive Dental			Premium Dental		
	Single Only	Participant +1 Dependent	Participant +2 or More Dependents	Single Only	Participant +1 Dependent	Participant +2 or More Dependents
All Retirees	21.49	36.32	50.02	46.44	76.2	103.67