

**EL CAMINO COMMUNITY COLLEGE DISTRICT
MONTHLY (12 MONTHS) FRINGE BENEFITS PREMIUM/EMPLOYEE
CONTRIBUTIONS
JANUARY 1, 2009 THROUGH DECEMBER 31, 2009**

DENTAL PLANS

DELTA DENTAL PREMIER	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$69.72	\$118.53	\$140.00
EMPLOYEE COST	\$0.00	\$20.92	\$30.12
TOTAL PREMIUM	\$69.72	\$139.45	\$170.12

DELTA CARE (PMI)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$19.22	\$31.73	\$46.80
EMPLOYEE COST	\$0.00	\$0.00	\$0.00
TOTAL PREMIUM	\$19.22	\$31.73	\$46.80

The District pays Delta Care (PMI) premiums. There are no employee contributions.

VISION PLAN

VISION SERVICE PLAN	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$8.09	\$13.94	\$18.78
EMPLOYEE COST	\$0.00	\$2.52	\$4.59
TOTAL PREMIUM	\$8.09	\$16.46	\$23.37