

**EL CAMINO COMMUNITY COLLEGE
TENTHLY (10 MONTHS) FRINGE BENEFITS PREMIUM/EMPLOYEE
CONTRIBUTIONS
JANUARY 1, 2008 THROUGH DECEMBER 31, 2008**

DENTAL PLANS

DELTA DENTAL PREMIER	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$83.66	\$142.24	\$168.00
EMPLOYEE COST	\$0.00	\$25.10	\$36.14
TOTAL PREMIUM	\$83.66	\$167.34	\$204.14

DELTA CARE (PMI)	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$22.28	\$36.76	\$54.26
EMPLOYEE COST	\$0.00	\$0.00	\$0.00
TOTAL PREMIUM	\$22.28	\$36.76	\$54.26

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

VISION PLAN

VISION SERVICE PLAN	EMPLOYEE ONLY	TWO-PARTY	FAMILY
DISTRICT COST	\$9.21	\$15.86	\$21.38
EMPLOYEE COST	\$0.00	\$2.86	\$5.22
TOTAL PREMIUM	\$9.21	\$18.72	\$26.60