

Business Services Corporation
Proposed Health Insurance Rates
Rates Below are for Companies with Two (2) or more Employees
January 1st, 2010

COVERAGE TIER	MONTHLY RATE	MONTHLY ADMIN FEE	TOTAL
BLUE SHIELD Community Blue HMO 206 PLUS PLANS		Rates good till 01.01.2011	
Individual	508.07	0.00	508.07
Employee/Spouse	1,041.55	0.00	1,041.55
Parent/Child	1,041.55	0.00	1,041.55
Family or Parent/Children	1,387.05	0.00	1,387.05
BLUE SHIELD POS 7100 PLAN		Rates good till 01.01.2011	
Individual	300.81	0.00	300.81
Employee/Spouse	616.65	0.00	616.65
Parent/Child	616.65	0.00	616.65
Family or Parent/Children	845.88	0.00	845.88