

Retirees Under age 65 after 7/1/04

	2025 Full Monthly Premium	Bentley Monthly Contribution	Your Monthly Contribution
HMO Plan - Medical			
Employee	\$970.72	\$138.52	\$832.20
Employee + Child(ren)	\$2,135.58	\$535.67	\$1,599.91
Employee + Spouse/Domestic Partner	\$2,766.52	\$535.67	\$2,230.85
Employee + Family	\$2,912.14	\$535.67	\$2,376.47
Best Buy HMO - Medical			
Employee	\$773.36	\$138.52	\$634.84
Employee + Child(ren)	\$1,701.38	\$535.66	\$1,165.72
Employee + Spouse/Domestic Partner	\$2,204.06	\$535.66	\$1,668.40
Employee + Family	\$2,320.08	\$535.66	\$1,784.42
High Deductible Plan - Medical			
Employee	\$710.90	\$138.52	\$572.38
Employee + Child(ren)	\$1,564.02	\$535.66	\$1,028.36
Employee + Spouse/Domestic Partner	\$2,026.08	\$535.66	\$1,490.42
Employee + Family	\$2,132.76	\$535.66	\$1,597.10
Standard Plan - Dental			
Employee	\$50.18	\$0.00	\$50.18
Employee + Child(ren)	\$110.40	\$0.00	\$110.40
Employee + Spouse/Domestic Partner	\$143.00	\$0.00	\$143.00
Employee + Family	\$150.53	\$0.00	\$150.53
High Plan - Dental			
Employee	\$55.61	\$0.00	\$55.61
Employee + Child(ren)	\$122.36	\$0.00	\$122.36
Employee + Spouse/Domestic Partner	\$158.51	\$0.00	\$158.51
Employee + Family	\$166.85	\$0.00	\$166.85
Eyemed Vision			
Employee	\$5.34	\$0.00	\$5.34
Employee + Child(ren)	\$11.73	\$0.00	\$11.73
Employee + Spouse/Domestic Partner	\$15.20	\$0.00	\$15.20
Employee + Family	\$16.01	\$0.00	\$16.01