

2012 Double Contribution Rates Southern Health Services, Inc.

Care HMO		<u>Bi-Weekly</u>	<u>Monthly</u>
Employee and Spouse	Cardholder	\$0.00	\$0.00
	Spouse	\$0.00	\$0.00
Employee and Family	Cardholder	\$25.19	\$50.38
	Spouse	\$10.90	\$21.80
Value HMO			
Employee and Spouse	Cardholder	\$0.00	\$0.00
	Spouse	\$0.00	\$0.00
Employee and Family	Cardholder	\$0.00	\$0.00
	Spouse	\$0.00	\$0.00
Care POS			
Employee and Spouse	Cardholder	\$0.00	\$0.00
	Spouse	\$0.00	\$0.00
Employee and Family	Cardholder	\$45.88	\$91.76
	Spouse	\$21.80	\$43.60
Value PPO			
Employee and Spouse	Cardholder	\$0.00	\$0.00
	Spouse	\$0.00	\$0.00
Employee and Family	Cardholder	\$25.19	\$50.38
	Spouse	\$10.90	\$21.80

- * Employee and Spouse (no children)
- * Employee and Family (One or more children)