


STOCKDALE SOLAR LLC

Dental Benefits and Premiums

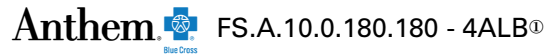
Anthem  P 100/90 Unltd/No Ortho 4F93 ①

Benefits	In-Network	Out-of-Network
General:		
Deductible	\$50 Ind/\$150 Family	\$50 Ind/\$150 Family
Deductible Waived for Preventive	Yes	Yes
Annual Maximum Benefit	Unlimited	Unlimited
Network Reimbursement	Not Applicable	90th-Fair Health
Preventive/Diagnostic Services:		
X-Rays	100%	100%
Teeth Cleaning	100%	100%
Oral Surgery:		
Extraction Uncomplicated	90%	80%
Restorative:		
Resin Filling	90%	80%
Periodontics:		
Basic or Major	Basic	Basic
Gingivectomy - Per Quadrant	90%	80%
Scaling and Root Planing	90%	80%
Endodontics:		
Basic or Major	Basic	Basic
Molar Root Canal	90%	80%
Crowns:		
Porcelain w/Noble Metal	60%	50%
Orthodontics:		
Adult	Not Available	Not Available
Child	Not Available	Not Available
Prosthetics:		
Complete Upper or Lower Denture	60%	50%
Implants	60%	50%
Waiting Periods:		
Basic	None	None
Major	None	None
Ortho	Not Applicable	Not Applicable
Waiting Period Waiver	Not Applicable	Not Applicable

Cost Breakdown

Coverage	# of EE's	Rates
Employee Only		\$13.92
Employee & Spouse		\$28.41
Employee & Children		\$29.83
Employee & Family		\$45.36
Rates shown are bi-weekly payroll rates.		

① This plan is rated based on the # of eligible employees. See Quote Details page for # of eligible entered for this quote.

STOCKDALE SOLAR LLC**Vision Benefits and Premiums**

Benefit	In Network	Out of Network
Provider Network	Blue View Vision	
Deductible	\$0	\$0
Exam	\$10 Copay	Up to \$42
Single Vision	100%	Up to \$40
Bifocals	100%	Up to \$60
Trifocals	100%	Up to \$80
Frames	Up to \$180	Up to \$45
Contacts		
Medically Necessary	100%	Up to \$210
Elective	Up to \$180	Up to \$95
Benefit Frequency		
Vision Exam	1 every 12 Months	1 every 12 Months
Lenses	1 every 12 Months	1 every 12 Months
Frames	1 every 12 Months	1 every 12 Months

Cost Breakdown

Coverage	# of EE's	Rates
Employee Only		\$2.61
Employee & Spouse		\$5.23
Employee & Children		\$4.82
Employee & Family		\$7.58
Rates shown are Bi-weekly payroll rates.		

① This plan is rated based on the # of eligible employees. See Quote Details page for # of eligible entered for this quote.