

2010 Benefit Summary:
 Metropolitan Council
 Management Association (MANA)

Contract expires	12/31/2009- Benefits subject to change during contract negotiation
Medical plan options	<ul style="list-style-type: none"> • HealthPartners Open Access (copay plan) • HealthPartners Empower HRA (high deductible health plan with VEBA account)
Employee medical premiums (monthly)	<p>Note: These are interim rates. Final rates will be determined when the new contract is ratified.</p> <p>Full-time employees: Open Access:</p> <ul style="list-style-type: none"> • Single \$70.58 • Family \$440.44 <p>HRA:</p> <ul style="list-style-type: none"> • Single \$23.72 • Family \$189.46 <p>Part-time employees (30-37 hours per week: 75%): Open Access:</p> <ul style="list-style-type: none"> • Single \$224.18 • Family \$758.44 <p>HRA:</p> <ul style="list-style-type: none"> • Single \$147.38 • Family \$466.26 <p>Part-time employees (20-29 hours per week: 50%): Open Access:</p> <ul style="list-style-type: none"> • Single \$377.78 • Family \$1,076.44 <p>HRA:</p> <ul style="list-style-type: none"> • Single \$271.04 • Family \$743.04
Medical plan	<p>HealthPartners Open Access In Network Benefits</p> <ul style="list-style-type: none"> • \$10 office visit copay • \$40 emergency room copay • \$10 prescription drug copay (retail) • \$20 formulary mail order prescription copay • \$500 single out-of-pocket maximum • \$1,500 family out-of-pocket maximum • Unlimited lifetime maximum benefit

	<p>HealthPartners Empower HRA In Network Benefits</p> <ul style="list-style-type: none"> • Single deductible: \$1,000 Single employer HRA contribution: \$1,000 • Family deductible: \$2,000 Family employer HRA contribution: \$2,000 • Preventive care, prenatal care, immunizations: 100% (no deductible) • All other covered services: 80% after deductible • Single out-of-pocket maximum: \$2,500 (includes deductible) • Family out-of-pocket maximum: \$5,000 (includes deductible) • \$2,000,000 lifetime maximum benefit
<p>Dental plan</p>	<p>HealthPartners Distinctions Dental Plan</p> <p>Benefit Level 1 (HealthPartners Dental Clinic or Park Dental)</p> <ul style="list-style-type: none"> • No deductible • Preventive and basic care: 100% • Major care: 80% • Calendar year maximum: \$2,000 • Orthodontic: 50% up to \$2,000 lifetime maximum <p>Benefit Level 2 (HealthPartners Open Access Providers)</p> <ul style="list-style-type: none"> • Preventive care: 100% • Deductible: \$10 per person; \$30 per family • Basic care: 100% after deductible • Major care: 80% after deductible • Calendar year maximum: \$1,500 • Orthodontic: 50% up to \$1,500 lifetime maximum <p>Benefit Level 3 (Out of Network)</p> <ul style="list-style-type: none"> • Preventive care: 100% • Deductible: \$25 per person; \$75 per family • Basic care: 80% after deductible • Major care: 50% after deductible • Calendar year maximum: \$1,000 • Orthodontic: 50% up to \$1,500 lifetime maximum
<p>Employee dental premiums (monthly)</p>	<p>Note: These are interim rates. Final rates will be determined when the new contract is ratified.</p> <p>Full Time Employees:</p> <ul style="list-style-type: none"> • Single: \$1.90 • Family: \$39.84

	<p>Part-time employees (30-37 hours per week: 75%):</p> <ul style="list-style-type: none"> • Single: \$11.86 • Family: \$57.58 <p>Part-time employees (20-29 hours per week: 50%):</p> <ul style="list-style-type: none"> • Single: \$21.84 • Family: \$75.32
Waiting period	First of the month following date of hire for vision coverage. No waiting period (immediate coverage) for all other coverage.
Full-time definition	38 hours per week
Part-time definition	20-29 hours per week: 50% 30-37 hours per week: 75%
Part-time employees eligible for:	Medical, dental, life, salary continuance, long term disability, annual leave
Basic life insurance/AD&D (employer paid)	2 times salary up to \$100,000
Employee supplemental life insurance (employee paid)	\$5,000 increments up to \$500,000
Group universal life insurance (optional life insurance-employee paid)	Yes
Dependent life insurance (employee paid)	Spouse: \$5,000 increments up to \$100,000. Children: \$1,000, \$2,000, or \$5,000
Long term disability (employer paid)	90 day elimination period; 2/3 of earnings, up to \$5,000 maximum payable per month
Flexible spending account	<ul style="list-style-type: none"> • Medical care • Dependent care • Parking expenses
Health care savings plan	Post employment healthcare savings plan. Employee contributes 0.25% of gross wages.
Deferred compensation	Tax deferred savings for use after employment Contribution maximums for 2010: <ul style="list-style-type: none"> • Under age 50: \$16,500 • Age 50 and over: \$22,000 • Catch-up maximum: \$33,000
Employee assistance program (employer paid)	Online and telephonic assistance

Minnesota State Retirement Program	Employee and employer both contribute 4.75% of employee wages toward pension savings. Contributions increase 5% on July 1, 2010.
Bus and light rail pass	The Council offers a free all-you-can-ride bus and light rail pass to all Council employees. This pass is good for free rides for the employee on all regularly scheduled bus and rail routes.
Paid-time off (full time employees)	<p>Holidays</p> <ul style="list-style-type: none"> • New Year's Day • Martin Luther King Day • Presidents Day • Memorial Day • Independence Day • Labor Day • Veterans Day • Thanksgiving Day • Friday after Thanksgiving Day • Christmas Day • Two Floating Holidays <p>Annual leave</p> <ul style="list-style-type: none"> • First 2 years of employment: 5 hours per payroll period • 3rd year of employment: 6 hours per payroll period • After 3 years through 6 years of employment: 8 hours per payroll period • After 6 years through 12 years of employment: 9 hours per payroll period • After 12 years of employment: 10 hours per payroll period <p>Salary continuance</p> <ul style="list-style-type: none"> • Through 5 years service credit: 200 hours at full salary; 280 hours at 60% of salary • 6 years through 10 years service credit: 400 hours at full salary; 80 hours at 60% of salary • 11 or more years service credit: 480 hours at full salary

Important note: This guide is intended as a brief summary of benefits only. Please see your labor agreement, plan brochures and Plan Document for additional information. If there is any discrepancy, the information in the labor agreement, plan brochures and Plan Document will take precedence over this document.