ALYESKA PIPELINE SERVICE COMPANY Medical Plan Monthly Costs

for plan year effective 3/1/2023 to 2/28/2024

ACTIVE EMPLOYEE MEDICAL PLAN COSTS

CONSUMER CHOICE MEDICAL PLAN

Retiree + 2 or more dependents

	Monthly Rate
Employee	\$237.00
Employee + 1 (spouse or child)	\$474.00
Employee + 2 or more dependents	\$654.00
*Employee + Domestic Partner	\$474.00
*Employee + Child(ren) + Domestic Partner	\$654.00

^{*}Employee will be taxed on a portion of their medical premiums if electing coverage for a domestic partner.

COBRA COSTS

CONSUMER CHOICE MEDICAL PLAN	Monthly Rate
Employee	\$948.00
Employee + 1 (spouse or child)	\$1,896.00
Employee + 2 or more dependents	\$2,617.00
Spouse only	\$948.00
Child only	\$948.00

Cobra rates above do not include the additional 2% administration charge

\$2,677.00

RETIREE MEDICAL PLAN COSTS		
Subsidized pre age 65	Monthly Rate	
Retiree only (or spouse only, or child only)	\$299.00	
Retiree + 1 (spouse or child)	\$553.00	
Retiree + 2 or more dependents	\$669.00	
Unsubsidized rate for participants pre age 65	Monthly Rate	
Retiree only (or spouse only, or child only)	\$1,195.00	
Retiree + 1 (spouse or child)	\$2,211.00	

ALYESKA PIPELINE SERVICE COMPANY Dental Plan Monthly Costs

for plan year effective 3/1/2023 to 2/28/2024

ACTIVE EMPLOYEE DENTAL PLAN COSTS

	Monthly Rate
Employee	\$17.00
Employee + 1 (spouse or child)	\$34.00
Employee + 2 or more dependents	\$60.00
*Employee + Domestic Partner	\$34.00
*Employee + Child(ren) + Domestic Partner	\$60.00

^{*}Employee will be taxed on a portion of their medical premiums if electing coverage for a domestic partner.

COBRA COSTS

	Monthly Rate
Employee	\$68.00
Employee + 1 (spouse or child)	\$136.00
Employee + 2 or more dependents	\$238.00
Spouse or child only	\$68.00

Cobra rates above do not include the additional 2% administration charge

RETIREE DENTAL PLAN COSTS

Subsidized rates for participants pre age 65	Monthly Rate
Retiree only (or spouse only, or child only)	\$17.00
Retiree + 1 (spouse or child)	\$34.00
Retiree + 2 or more dependents	\$60.00
Unsubsidized rates for participants pre age 65	Monthly Rate
Retiree only (or spouse only, or child only)	\$68.00
Retiree + 1 (spouse or child)	\$136.00
Retiree + 2 or more dependents	\$238.00