ALYESKA PIPELINE SERVICE COMPANY Medical Plan Monthly Costs

for plan year effective 3/1/2025 to 2/28/2026

ACTIVE EMPLOYEE MEDICAL PLAN COSTS

CONSUMER CHOICE MEDICAL PLAN

	Monthly Rate
Employee	\$274.00
Employee + 1 (spouse or child)	\$547.00
Employee + 2 or more dependents	\$755.00
*Employee + Domestic Partner	\$547.00
*Employee + Child(ren) + Domestic Partner	\$755.00

^{*}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	\$1,267.00
Employee + 1 (spouse or child)	\$2,534.00
Employee + 2 or more dependents	\$3,497.00
Spouse only	\$1,267.00
Child only	\$1,267.00

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

RETIREE MEDICAL PLAN COSTS

Subsidized pre age 65	Monthly Rate
Retiree only (or spouse only, or child only)	\$274.00
Retiree + 1 (spouse or child)	\$547.00
Retiree + 2 or more dependents	\$755.00
Unsubsidized rate for participants pre age 65	Monthly Rate
Retiree only (or spouse only, or child only)	\$1,267.00
Retiree + 1 (spouse or child)	\$2,534.00
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Retiree + 2 or more dependents	\$3,497.00

ALYESKA PIPELINE SERVICE COMPANY Dental Plan Monthly Costs

for plan year effective 3/1/2025 to 2/28/2026

ACTIVE EMPLOYEE DENTAL PLAN COSTS

	Monthly Rate
Employee	\$16.00
Employee + 1 (spouse or child)	\$32.00
Employee + 2 or more dependents	\$56.00
*Employee + Domestic Partner	\$32.00
*Employee + Child(ren) + Domestic Partner	\$56.00

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

COBRA COSTS

	Monthly Rate
Employee	\$63.00
Employee + 1 (spouse or child)	\$127.00
Employee + 2 or more dependents	\$222.00
Spouse or child only	\$63.00

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)	\$16.00
Retiree + 1 (spouse or child)	\$32.00
Retiree + 2 or more dependents	\$56.00
Unsubsidized rates for participants pre age 65	Monthly Rate
Retiree only (or spouse only, or child only)	\$63.00
Retiree + 1 (spouse or child)	\$127.00
Retiree + 2 or more dependents	\$222.00