

Crystal Industries, Inc.  
Premium contribution Summary  
Bi-weekly Payroll (26 pay periods annually)  
June 1, 2023 through May 31, 2024

| Providence Connect 9100 Bronze |            |                  |                  |                    |
|--------------------------------|------------|------------------|------------------|--------------------|
|                                | Total      | Employer monthly | Employee monthly | Employee bi-weekly |
|                                | Premium    | Contribution     | Contribution     | Contribution       |
| Single                         | \$391.65   | \$391.65         | \$0.00           | \$0.00             |
| Single + Spouse                | \$783.30   | \$391.65         | \$391.65         | \$180.76           |
| Family                         | \$1,116.20 | \$391.65         | \$724.55         | \$334.41           |
| Single + Children              | \$724.55   | \$391.65         | \$332.90         | \$153.65           |

| Providence Total Enhanced 5500 Gold |            |                  |                  |                    |
|-------------------------------------|------------|------------------|------------------|--------------------|
|                                     | Total      | Employer monthly | Employee monthly | Employee bi-weekly |
|                                     | Premium    | Contribution     | Contribution     | Contribution       |
| Single                              | \$555.20   | \$391.65         | \$163.55         | \$75.49            |
| Single + Spouse                     | \$1,110.40 | \$391.65         | \$718.75         | \$331.73           |
| Family                              | \$1,582.30 | \$391.65         | \$1,190.65       | \$549.53           |
| Single + Children                   | \$1,027.10 | \$391.65         | \$635.45         | \$293.29           |

| Providence Total Enhanced 500 Platinum |            |                  |                  |                    |
|--|------------|------------------|------------------|--------------------|
|  | Total      | Employer monthly | Employee monthly | Employee bi-weekly |
|  | Premium    | Contribution     | Contribution     | Contribution       |
| Single                                 | \$746.20   | \$391.65         | \$354.55         | \$163.64           |
| Single + Spouse                        | \$1,492.40 | \$391.65         | \$1,100.75       | \$508.04           |
| Family                                 | \$2,126.65 | \$391.65         | \$1,735.00       | \$800.77           |
| Single + Children                      | \$1,380.45 | \$391.65         | \$988.80         | \$456.37           |

| Companion Life Dental PPO 1500 Voluntary |          |                  |                  |                    |
|--|----------|------------------|------------------|--------------------|
|  | Total    | Employer monthly | Employee monthly | Employee bi-weekly |
|  | Premium  | Contribution     | Contribution     | Contribution       |
| Single                                   | \$44.35  | \$0.00           | \$44.35          | \$20.47            |
| Single + Spouse                          | \$88.70  | \$0.00           | \$88.70          | \$40.94            |
| Family                                   | \$142.05 | \$0.00           | \$142.05         | \$65.57            |
| Single + Children                        | \$95.65  | \$0.00           | \$95.65          | \$44.15            |

Some monthly employee premium contributions are not divisible by two, so a .01 rounding is included in employer cost

This page is provided as a guide to employee premium contributions. Confirm rates used with carrier contracted rates

Employee contributions may be taken on a pre-tax basis provided compliance and eligibility criteria are met

Employer pays 100% for employee only on the Bronze level health plan. Dental plan is voluntary and is 100% employee paid.