

Local Annuitant Health Plan

January 1, 2004 Premium Rates

LAHP Classic Blue Coverage

Single Coverage	\$ 141.80
Family Coverage	\$ 281.70

LAHP Copay Plan (under age 65)

Single Coverage	\$ 721.50
Family Coverage LAHP Copay plan	\$ 1,441.10

Enrolled in Medicare

Single	\$ 502.80
Husband and Wife	\$ 1,003.70

Single Non Medicare plus Single Medicare	\$ 1,222.40
--	-------------

Other

Single Classic Blue plus Single Copay Plan	\$ 861.40
--	-----------

Includes a \$1.90 administrative fee.