IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI, DENISE MILLER, and MICHELLE JOHNSON,

Plaintiffs,

Case No. 2:12-cv-10038

vs.

Hon. David M. Lawson Mag. Michael J. Hluchaniuk

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

\mathbf{T}		idant	
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INDEX TO EXHIBITS TO PLAINTIFFS' UNOPPOSED MOTION TO FILE ADDITIONAL MATERIALS IN SUPPORT OF THEIR MOTION FOR PRELIMINARY INJUNCTION

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1	Declaration of Mary Lannoye	
2.A	Deposition of Marilyn Schlack, President of Kalamazoo Valley Community College	
2.B	Deposition of Sandra Bohnet, Vice President of Human Resources at Kalamazoo Valley Community College	
2.C	KVCC, Dr. Marilyn J. Schlack, and Sandy Bohnet's Documents Produced in Response to Plaintiff's Document Requests	
2.D	Kalamazoo Valley Community College Household Member Program	
2. E	COBRA 2011	
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2:12-cv-10038-DML-MJH Doc # 47-1 Filed 06/13/12 Pg 2 of 2 Pg ID 2079

Employees by Assigned Position
Frngs—Compiled Expenses—FY 10 & 11
COBRA
Defendant's Answers to Plaintiffs' Interrogatories
State Correspondence About OEAI Benefits
Taxation of Other Eligible Adult Individual (OEAI) Benefits
Civil Service Commission Meeting Minutes of December 8, 2010
Insurance Enrollment Analyses
Defendant's Answers to Plaintiffs' Requests for Admissions
Defendant's Supplemental Answers to Plaintiffs' Interrogatories Number 1 and 15
Defendant's Supplemental Response to Interrogatory No. 10
Defendant's Answers to Plaintiffs' Second Set of Interrogatories
Defendant's Second Supplemental Response to Plaintiffs' Interrogatory No. 9

Exhibit 1

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI, DENISE MILLER and MICHELLE JOHNSON,

Plaintiffs,

VS.

RICHARD SNYDER, in his official capacity as Governor of the state of Michigan,

Defendant.

Case No. 2:12-cv-10038-DML-MJH

<u>DECLARATION OF MARY LANNOYE</u> IN SUPPORT OF PLAINTIFFS' MOTION FOR PRELIMINARY INJUNCTION

- I, MARY LANNOYE, hereby declare under penalty of perjury:
- 1. I am the Controller/Administrator for Ingham County (the "County"). I have worked for the County since May 2010. In my capacity as Controller/Administrator, I am the chief financial and administrative officer of the county. Previously, I served as Director of the Office of the State Budget for the State of Michigan from 1998 to 2001 and from 2003 to 2006. I have personal knowledge of the facts contained in this Declaration except where they are stated to be upon information and belief. As to those facts that are stated to be upon information and belief, I believe them to be true.

INDIVIDUALS RECEIVING BENEFITS FROM INGHAM COUNTY

2. Ingham County as of January 1, 2012 had a total of 993 employees eligible to participate

in group health insurance plan(s) through the County, either on an individual basis or on a family basis in the case of employees who enroll family members in the group plans.

- 3. 758 County employees have elected to participate in the County's group health insurance plans. A total of 1,940 individuals are insured through the group health plans made available to County employees and their families.
- 4. Ingham County began providing health care benefits to same-sex domestic partners of its Managerial/Confidential employees and several of its bargaining units in 2003. In order to comply with the Michigan Supreme Court's ruling in *National Pride at Work v. Governor*, the County terminated domestic partner coverage as of July 31, 2008. In August of 2008 Ingham County instituted a policy of offering "Other Qualified Adult" benefits to its employees. This benefits program allowed each eligible employee to enroll someone other than a spouse, a dependent as defined by the Internal Revenue Service, or a child, in the County's health care plans. This other enrolled individual was referred to as an Other Qualified Adult ("OQA").
- 5. In order to qualify for this benefit, the OQA and the County employee both were required to meet a number of criteria. Specifically, the OQA was required to be at least 21 years of age, mentally competent to consent to a contract, ineligible to inherit from the County employee under Michigan's laws of intestate succession, ineligible for coverage under any other County employee or retiree medical benefits plan, and ineligible for coverage under any other comparable medical plan (such as Medicare or another employer). Both the OQA and associated employee were also required to be unmarried, to attest that they had shared a residence for at least 18 consecutive months immediately prior to the start of coverage, and to not be related to a degree close enough to preclude their marriage in Michigan. Finally, the OQA and employee were required to prove their financial interdependence with one another.

- 6. As of January 1, 2012, the language specifically authorizing the OQA benefit was not included in the following collective bargaining agreements: Fraternal Order of Police (FOP), Animal Control, FOP Supervisors, FOP Corrections, Michigan Nurses Association, Friend of the Court Crew Leaders, and Ingham County Employee Association Park Rangers. The total number of employees eligible for health insurance in these CBAs is 161.
- 7. Of the 832 employees explicitly authorized to add OQAs to their health insurance benefits, only 3 had done so as of January 1, 2012. The participation rate, meaning the number of employees who had enrolled OQAs relative to the total number of County employees specifically eligible to do so, was only 0.004%.
- 8. Of the 3 OQAs County employees enrolled in health insurance coverage, 2 were of the same sex as those employees. In other words, out of 832 County employees specifically eligible to enroll OQAs in health insurance benefits, only 2 or .002%, enrolled OQAs of the same sex in their plans.
- 9. Ingham County conducted an open enrollment period for its employee benefit plans in November 2011, and entered into contracts with its health insurers for calendar year 2012 based on the results of that open enrollment period. Accordingly, if Public Act 297 of 2011 remains in effect, the contracts through which County employees are currently receiving OQA benefits will all expire as of December 31, 2012, and OQA benefits will be terminated as of that date.

ADMINISTRATIVE COSTS OF OQA BENEFITS

10. When Ingham County began offering domestic partner benefits in 2003 and then replaced that program with OQA benefits in 2008, it was required to invest staff time in administrative tasks related to the initiation of the new benefits program. This included time spent creating the requisite forms and other documents necessary to institute the benefits programs, notification to

the County's employees and human resources and financial services personnel who oversee the administration of benefits, and changes to the payroll system so that the benefits could be appropriately accounted for and reported as imputed taxable income to the employee. However, the staff time required to make these changes was minimal, and did not result in appreciable expense to the County. In addition, similar minimal administrative costs may be incurred in order to once again change the existing benefits system if the County is forced to discontinue the OQA program at the end of this year.

11. Like the initiation costs expended in 2003 and updated in 2008, the administrative costs associated with Ingham County's provision of OQA benefits are *de minimis*. Given the small numbers of participants, the staff time spent processing applications for OQA benefits and administering the program on an ongoing basis have been insignificant.

COST OF INSURANCE BENEFITS FOR OQAS

- 12. Currently, Ingham County provides health care benefits to the vast majority of its employees and their families through a single insurance carrier, Physicians Health Plan of Mid-Michigan ("PHP"). In addition, 13 Sheriff's Office employees and their families are covered through a different carrier and plan, COPS Trust. Overall, county employees contribute just over 20% of the health care premiums.
- 13. The total cost to Ingham County of providing health coverage to employees and other beneficiaries for the year 2012 will be approximately \$8,386,000. The projected average total cost to the County of providing health coverage will be approximately \$11,063 per covered person for 2012. The total projected cost to the County of providing health insurance to 3 OQAs for the year 2012 will be \$16,157 or .002% of total expenditures on health insurance for the year.
 - 14. The County offers 3 different plan options though our main insurer, PHP. The insurer

calculates insurance premiums for Ingham County's insurance plans by category, and the premiums paid by the County are calculated based on the total number of covered employees and other beneficiaries. The County's cost to provide health insurance in our highest cost plan to one employee is \$5,847. The County's cost to provide coverage to an employee plus one additional person in that plan is \$12,819. The County's cost to provide coverage to an employee and multiple family members in that plan is \$15,032. The insurer does not distinguish among different enrollment categories or demographic groups in setting these rates, and thus charges the same premium for an OQA as it does for a spouse.

15. Ingham County has additionally allowed employees to enroll OQAs in dental insurance and vision insurance benefit plans if they so choose. However, the County is self-insured for dental and vision coverage, and charges back its employer costs based on one set rate, not dependent on the addition of OQAs or other family members to coverage. In other words, employees' decision to enroll OQAs in dental and vision insurance plans has no impact on the budgeted costs of those plans to the County.

16. Ingham County reports the value of benefits provided to an employee's OQA as income imputed to the employee for purposes of state and federal taxes. In other words, employees who enroll OQAs in the County's benefits plans pay state and federal taxes on the value of their OQAs' benefits.

SOURCE OF FUNDS FOR OQA BENEFITS

17. In 2010 the County collected approximately \$148.35 million in revenues (excluding interfund transfers and the Medical Care Facility). These County revenues included the following: \$21.6 million, or 14.6%, from state sources; \$15.4 million or 10.4%, from federal sources; \$8.6 million or 5.8%, Medicaid & Medicare; \$66.8 million, or 45%, from local property

taxes; \$21.1 million, or 14.2%, in Charges for Services; and \$14.9 million, or 10%, from other sources. In 2010 the county did not receive revenue sharing payments from the state but rather transferred an equivalent amount from the county's revenue sharing reserve fund to the general fund. If the county had received the same amount of revenue sharing (\$4.6 million) in 2010 as it will in 2012 the aforementioned percentages would have changed as follows: state sources 17%; federal sources 10%; Medicaid & Medicare payments 5.6%; local taxes 43.7%; charges for services 14%; and other revenues 10%. The sources of funding for benefits provided to each County employee (and other individuals covered through that employee) vary depending on the employee's role in County government. It is possible to trace the specific sources of funding for individual employees' benefits. In 2012, funding sources for coverage of the three OQAs currently enrolled in County benefits include the following: 8% state sources; 6.7% other revenue; 6.6% charge for services; 32% federal sources; 3.7% Medicaid/Medicare; and 43% local taxes.

BENEFITS TO INGHAM COUNTY OF PROVIDING OQA COVERAGE

- 18. In February 2008, the Ingham County Board of Commissioners passed a resolution initiating the OQA benefits program. A copy of the resolution is attached as Exhibit "A."
- 19. In their February 2008 resolution, the County Commissioners noted that the County is committed to providing its residents access to health care, and that extending coverage to the OQAs of employees furthered this goal.
- 20. In November 2011, the Ingham County Board of Commissioners passed a resolution urging Governor Rick Snyder to veto then-pending bills HB 4770 and HB 4771. A copy of this resolution is attached as Exhibit "B." HB 4770, otherwise known as the Domestic Partner

Benefits Restriction Act, was later signed by the Governor and took effect as Public Act 297 of 2011.

- 21. In their November 2011 resolution, the County Commissioners noted that "the extension of benefits to domestic partners is an increasing trend in the private and public sector both nationally and internationally..." They also opined that the proposed legislation would create difficulty "recruiting the new employees with the appropriate level of skill, training, and experience necessary to replace those lost in the exodus that would result from this legislation..."
- 22. The County Commissioners further stated in their November 2011 resolution that "the intention of this legislation represents nothing less than an unconscionable attack on the rights of Michigan's gay and lesbian citizens, by purposefully and disproportionately affecting the ability of individuals of a minority sexual orientation to access affordable healthcare and other benefits…"
- 23. In addition, the County Commissioners predicted in their November 2011 resolution that "if this legislation were signed into law, Ingham County would be construed to be a less desirable employer to potential employees."
- 24. Ingham County recruits employees for many positions that private sector employers recruit for as well. Administrative assistants, information technology professionals and administrators, human resources professionals, maintenance workers, nurses, doctors, attorneys, and numerous other types of workers are employed both by the County and by private sector employers in Michigan.
- 25. Providing OQA benefits helps the County to retain qualified individuals once it has hired them. As of late 2011, 3 employees were taking advantage of the OQA benefits, of whom up to 2 may have been providing coverage to their same-sex domestic partners. The loss of this

benefit is, in effect, a loss of income for these employees' families, and in some cases may leave employees' family members without access to any health insurance coverage. There is a risk that these employees will seek other employment that can provide better benefits for the employees and their families.

26. Other major employers in Ingham County that currently make benefits available to the same-sex domestic partners of some or all of their employees include General Motors, the State of Michigan, and Michigan State University.

27. Ingham County perceives OQA benefits as an effective investment. The County does not wish to terminate these benefits, although it may be forced to cease providing benefits to employees' OQAs as a consequence of Public Act 297 of 2011.

28. Ending OQA benefits for Ingham County employees would not impact the amount of State money the County receives. Any cost savings associated with an involuntary termination of OQA benefits to the 3 employees resulting from Public Act 297 of 2011 would accrue to the County or potentially to the federal government, not to the State. Ingham County would prefer to continue investing in OQA benefits rather than accrue these negligible, putative cost savings.

In accordance with 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct. Executed this 2/day of March, 2012.

MARY LANNOYE

Exhibit 1.A

ADOPTED - NOVEMBER 8, 2011 Agenda Item No. 6

Introduced by the County Services Committee of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION CALLING FOR THE GOVERNOR TO REFUSE TO ENACT THE PUBLIC EMPLOYEE DOMESTIC PARTNER BENEFITS RESTRICTION ACT

RESOLUTION #11-340

WHEREAS, the Michigan House of Representatives and Senate recently passed HB 4770, the Public Employee Domestic Partner Benefits Restriction Act, and HB 4771, an amendment to 1947 PA 336; and

WHEREAS, the extension of benefits to domestic partners is an increasing trend in the private and public sector both nationally and internationally; and

WHEREAS, prohibiting the collective bargaining for domestic partner benefits would affect a hostile, anti-union environment that would be prohibitive for recruiting the new employees with the appropriate level of skill, training, and experience necessary to replace those lost in the exodus that would result from this legislation; and

WHEREAS, the intention of this legislation represents nothing less than an unconscionable attack on the rights of Michigan's gay and lesbian citizens, by purposefully and disproportionately affecting the ability of individuals of a minority sexual orientation to access affordable healthcare and other benefits; and

WHEREAS, if this legislation were signed into law, Ingham County's policies regarding its employees and the benefits packages that it extends to them would be affected; and

WHEREAS, if this legislation were signed into law, Ingham County would be construed to be a less desirable employer to potential employees.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners calls on Governor Rick Snyder to veto the Public Employee Domestic Partner Benefits Restriction Act.

BE IT FURTHER RESOLVED, that the County Clerk shall send copies of this resolution to Governor Rick Snyder, the Ingham County State Legislative Delegation, and the Michigan Association of Counties.

COUNTY SERVICES: Yeas: De Leon, Copedge, Celentino, Schor, Dragonetti

Nays: Vickers Absent: None Approved 11/01/11

Exhibit 1.B

ADOPTED - FEBRUARY 26, 2008 Agenda Item No. 10

Introduced by the County Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

RESOLUTION AUTHORIZING OFFERING OTHER QUALIFIED ADULT BENEFITS TO MANAGERIAL/CONFIDENTIAL EMPLOYEES RESOLUTION #08-042

WHEREAS, Ingham County is committed to providing access to healthcare to its residents; and

WHEREAS, flexibility in providing benefits to non-traditional households contributes to meeting this goal; and

WHEREAS, the Controller, Benefits and Insurance staff and the County Attorney have developed eligibility criteria which clearly defines the requirements for participation.

THEREFORE BE IT RESOLVED, that Other Qualified Adult (OQA) benefits for Managerial/Confidential employees be provided no later than August 1, 2008.

BE IT FURTHER RESOLVED, that the Managerial/Confidential Personnel Manual shall be updated to incorporate a revised Health Insurance Program.

BE IT FURTHER RESOLVED, a special open enrollment period shall be held to allow eligible dependents to enroll into the health plan of their choice.

BE IT FURTHER RESOLVED, that the Board Chairperson and County Clerk are authorized to sign appropriate documents after review as to form by the County Attorney, as needed.

COUNTY SERVICES: Yeas: Nolan, De Leon, Copedge, Soule, Grebner

Nays: Severino Absent: None Approved 2/19/08

FINANCE: Yeas: Grebner, Hertel, Weatherwax-Grant

Nays: Dougan Absent: Celentino, Schor Approved 2/20/08

Exhibit 2.A

	Page 1			
1	MARILYN SCHLACK, Ed.D			
2	IN THE DISTRICT COURT OF THE UNITED STATES			
3	FOR THE EASTERN DISTRICT OF MICHIGAN			
4	SOUTHERN DIVISION			
5				
6	THERESA BASSETT and CAROL			
7	KENNEDY, PETER WAYS and JOE			
8	BREAKEY, JOLINDA JACH and			
9	BARBARA RAMBER, DOAK BLOSS and			
10	GERARDO ASCHERI, DENISE MILLER,			
11	AND MICHELLE JOHNSON,			
12	Plaintiffs,			
13	vs. Case No. 2:12-cv-10038			
14	Hon. David M. Lawson			
15	RICHARD SNYDER, in his official			
16	capacity as Governor of the			
17	State of Michigan,			
18	Defendant.			
19				
20	The Videotaped Deposition of MARILYN SCHLACK, Ed.D.,			
21	Taken at 259 East Michigan Avenue, Suite 208,			
22	Kalamazoo, Michigan,			
23	Commencing at 10:05 a.m.,			
24	Friday, May 25, 2012,			
25	Before Rebecca L. Russo, CSR-2759, RMR, CRR.			

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Page 2
1
                            MARILYN SCHLACK, Ed.D
2
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          Appearing on behalf of the Plaintiffs.
18
19
    AMANDA C. GOAD (Via Telephone)
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23
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25
          Appearing on behalf of the Plaintiffs.
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Page 3
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    269.552.3400
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     jcooper@coopermartin.com
          Appearing on behalf of Kalamazoo Valley Community
19
20
          College and the Witness.
21
22
    ALSO PRESENT:
23
    Rachel Bierl - Video Technician
24
25
```

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1	MARILYN SCHLACK,	Ed.D	
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13	EXHIBIT	PAGE	
14	(Exhibit attached to transcript.)		
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16	DEPOSITION EXHIBIT 1	17	
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25			

Page 5 1 MARILYN SCHLACK, Ed.D 2 Kalamazoo, Michigan 3 Friday, May 25, 2012 10:05 a.m. 5 6 This is the start of VIDEO TECHNICIAN: tape labeled number one of the videotaped deposition of Marilyn Schlack, Ed.D., in the matter of Theresa Bassett, et al, versus Richard Snyder, in the United 10 States District Court for the Western District of 11 Michigan, Case Number 2:12-cv-10038. 12 This deposition is being held at 259 East 13 Michigan Avenue, Suite 208, Kalamazoo, Michigan, on 14 Friday, May 25th, 2012, at approximately 10:05 a.m. 15 My name is Rachel Bierl, from TSG 16 Reporting, Incorporated, and I am the legal video 17 specialist. The court reporter is Becky Russo, in 18 association with TSG Reporting. 19 Will counsel please introduce yourselves? 20 Amy Crawford, from the law MS. CRAWFORD: 21 firm of Kirkland & Ellis, representing the plaintiff, 22 Theresa Bassett, and the other plaintiffs in this 23 action. 24 MR. KNIGHT: John Knight, from the ACLU 25 Foundation, representing the plaintiffs.

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Page 6
1
                            MARILYN SCHLACK, Ed.D
2
                                 Amanda Goad, appearing
                     MS. GOAD:
3
          telephonically for the plaintiffs and also with the
          ACLU Foundation.
5
                     MR. DONNELLY: Mark Donnelly, from the
6
          Attorney General's office, on behalf of the defendant.
7
                     MR. COOPER: John Cooper, of Cooper Martin
          & Kennedy, as counsel for KVCC and Dr. Schlack.
                     VIDEO TECHNICIAN: Will the court reporter
10
          please swear in the witness?
11
                       MARILYN SCHLACK, Ed.D.,
12
          was thereupon called as a witness herein, and after
13
          having first been duly sworn to testify to the truth,
14
          the whole truth and nothing but the truth, was
15
          examined and testified as follows:
16
                              EXAMINATION
17
    BY MS. CRAWFORD:
18
    Ο.
          Good morning.
19
    Α.
          Good morning.
20
          Could you please state your name?
    Ο.
21
          Marilyn Schlack.
    Α.
22
          And is it Dr. Schlack?
    Q.
23
          I'd prefer Marilyn.
    Α.
24
          Okay. And what is your address?
     Q.
25
          At home?
    Α.
```

1 MARILYN SCHLACK, Ed.D

- 2 A. Anywhere from 300 to maybe 600, depending on what our
- enrollment looks like and what our need is. That
- includes adjuncts.
- ⁵ Q. What are KVCC's objectives as an employer?
- ⁶ A. We take pride in investing in our employees, and, in
- fact, yesterday we spent the day in a staff
- development workshop, looking at positive evaluation.
- 9 We have a wonderful wellness program for our
- employees, as well as our students. We are a
- talent-based organization. And employees are very,
- very important to us.
- Q. Do you have a role in hiring or retaining faculty
- members?
- ¹⁵ A. Only peripherally.
- 16 O. And can you describe that role?
- 17 A. Well, if the position's in the budget and I approve
- it, then they can post the position. The faculty
- themselves form a committee and they select -- after
- we've gone through a vetting process, they recommend
- three to five candidates to the dean and ultimately to
- the vice-president, and then the person is hired. I
- meet them after they're hired.
- Q. Are you familiar with KVCC's objectives with respect
- to attracting and retaining talented faculty members?

- 1 MARILYN SCHLACK, Ed.D
- ² A. Ask the question again.
- ³ Q. Are you familiar with KVCC's objectives with respect
- 4 to --
- ⁵ A. I'm aware of them, sorry.
- ⁶ Q. That's okay. Can you describe what those objectives
- ⁷ are?
- 8 A. Our objectives -- well, they may vary, Amy, just a
- 9 little bit depending on the department, and I'll tell
- you why, because, for example, we've had trouble
- hiring an advanced-level chemistry instructor, and so
- we're going to look for some very specific experiences
- in the advanced chemical -- chemistry field that we
- might not look for in an English faculty member, where
- we will bring someone in with less experience.
- So our objectives really are, one, to be
- honest, they can't smoke. We do not hire smokers.
- Two, that they -- we try to work on
- diversity.
- Three, that they come to us with an
- experience that complements what we're looking for in
- that particular position.
- And four, that they are student-centered.
- Q. So with these objectives in mind, is it fair to say
- that KVCC is looking to attract a talented workforce

- 1 MARILYN SCHLACK, Ed.D
- that has these various characteristics that you
- 3 mentioned?
- ⁴ A. Yes.
- ⁵ Q. Do you have any role in the crafting of KVCC's
- 6 benefits plans?
- A. Oh, you know, I don't know how you would define role.
- 8 Am I actively involved? No. Does it ultimately come
- 9 to me? Yes.
- 10 Q. So you may oversee implementation of benefits plans or
- at least you're familiar with the benefits plans that
- 12 are offered?
- 13 A. I'm certainly aware, yes.
- 14 Q. And do you have a role in overseeing the finances of
- 15 KVCC?
- ¹⁶ A. Absolutely.
- 17 Q. And you mentioned the budget.
- 18 A. Yes.
- 19 Q. Can you expand on your role with respect to overseeing
- the finances?
- A. Well, that's an accountability of mine. We go over
- that budget, and I'm accountable for that. So I do --
- I manage that budget in terms of the broader picture.
- I depend on those that are working with their budgets
- to work within what we've allowed them to spend. If

- 1 MARILYN SCHLACK, Ed.D
- KVCC's group health insurance benefits, right?
- 3 A. That's my understanding. Again, I -- these are not
- 4 numbers I have at my fingertips.
- ⁵ O. How is KVCC funded?
- A. About 22 percent of our money comes from tuition and
- fees, about 19 percent comes from local property
- 8 taxes, about 11 or 12 percent comes from state aid,
- and then miscellaneous, which means nothing, a little
- bit of interest, 20,000 here and few thousand there.
- 0. Can you turn to Exhibit B of Exhibit 1?
- 12 A. Yes.
- Q. And if you would look at page 2 of Exhibit B, do you
- know what, what this is?
- ¹⁵ A. I do.
- 16 Q. What is this document, generally?
- 17 A. This is our public document for the budget.
- 18 Q. And this page at the top says General Fund and
- Revenues, do you see that?
- ²⁰ A. I do.
- Q. And does this set forth the information that you were
- describing that you were giving us an overview of a
- moment ago?
- A. In terms of what our revenues sources are?
- 25 O. Yes.

- 1 MARILYN SCHLACK, Ed.D
- 2 BY MS. CRAWFORD:
- 3 Q. Okay. So looking at the property tax figure of
- 4 \$19,350,000, you referenced -- you testified that
- 5 property taxes refer to local property tax revenue?
- 6 A. Yes.
- ⁷ Q. And the line item State aid, can you describe what
- 8 that is?
- ⁹ A. The State allocates a certain amount of money for each
- community college, and that's the amount allocated for
- us for the current year.
- 12 Q. And do you know how that number is determined?
- ¹³ A. No. It varies.
- 14 Q. And does KVCC have to submit information to the State
- in order to receive a certain allotment?
- 16 A. It's not that simple. We do submit information to the
- State as part of our State aid allocation, but there
- is no formula for us to receive State aid because of
- the information submitted at this point.
- The governor did have some outcome measures
- and we do report on that, and there is a little bump
- for those that meet those outcomes. There has been.
- I don't know about next year.
- Q. Do you report to the State information about the
- number of individuals -- individual employees at KVCC

- 1 MARILYN SCHLACK, Ed.D
- who receive health insurance benefits through KVCC?
- 3 A. I'm not aware that we do.
- ⁴ Q. So is it fair to say that State aid represents roughly
- 5 20 percent of revenues as budgeted in the 2011 and 12
- 6 budget?
- ⁷ A. Yes.
- Q. Can you turn to the next page? On page 3 do you see
- the line item that refers to salaries and fringes?
- 10 A. Yes, I do.
- 11 Q. Do you know what the costs are to KVCC of providing
- specifically health insurance benefits to its
- employees?
- 14 A. As I stated earlier, we're self-insured. That varies
- from year to year, so I cannot give you that specific
- number.
- 17 Q. Would you please turn to Exhibit C?
- ¹⁸ A. I can.
- 19 Q. At the top of the page it says FRNGS Compiled
- 20 Expenses --
- ²¹ A. Right.
- 22 Q. -- FY 10 and 11. Do you see that?
- ²³ A. I do.
- Q. Do you know how this document was compiled?
- ²⁵ A. Sandy did.

- 1 MARILYN SCHLACK, Ed.D
- ² A. I do.
- ³ Q. Do you know what that refers to?
- ⁴ A. Well, this is our core plan. I don't know how to go
- beyond that.
- ⁶ Q. Are there variations to the core plan?
- 7 A. Yes.
- 8 Q. Do you know whether KVCC has produced documents
- 9 related to variations on the core plan?
- 10 A. I do not.
- 11 O. Do you know what --
- MS. CRAWFORD: Let's go off the record one
- second.
- 14 VIDEO TECHNICIAN: The time is now
- 10:42 a.m. We are off the record.
- 16 (Off the record at 10:42 a.m.
- 17 (Back on the record at 10:44 a.m.)
- VIDEO TECHNICIAN: We are back on the
- record. The time is 10:44 a.m.
- 20 BY MS. CRAWFORD:
- 0. KVCC incurs costs for health insurance benefits
- provided to its employees, right?
- ²³ A. Yes.
- Q. Do you know from what source those expenses are paid?
- ²⁵ A. The general fund. Is that your question?

- 1 MARILYN SCHLACK, Ed.D
- 2 Q. Yes.
- 3 A. Yes.
- 4 Q. So when we look at the revenues of KVCC, which of
- those revenues go to the general fund?
- ⁶ A. All of them.
- ⁷ Q. So the health insurance costs of KVCC are paid from
- 8 the general fund without regard to the revenue, to any
- 9 specific revenue source?
- 10 A. Why don't you restate your question, Amy.
- 11 O. The expenses that KVCC incurs for health insurance
- benefits are paid from the general fund, without any
- reference to any specific source of revenue?
- 14 A. Yes.
- 15 Q. I think you mentioned that not all of the employees
- who are eligible for health insurance coverage
- actually receive health insurance coverage, is that
- 18 right?
- 19 A. That's right.
- Q. If more people took advantage of the health insurance
- that KVCC offers its employees, would the State
- provide more money to KVCC to pay for those benefits?
- ²³ A. No.
- MR. DONNELLY: Foundation.
- Go ahead, you can answer.

- 1 MARILYN SCHLACK, Ed.D
- ² A. No.
- 3 BY MS. CRAWFORD:
- 4 Q. And what's the basis for your answer?
- 5 A. The State doesn't pay us for the decisions we make as
- to how we're gonna manage the college. We're one of
- the few colleges that has and we were one of the first
- 8 to be self-employed, or self-insured -- sorry,
- 9 self-employed -- and it's up to us to decide how we're
- gonna manage our general fund budget. Our goal is to
- stay within our revenues and then make sure that our
- expenses meet the revenue sources.
- 13 Q. So the State doesn't have input in -- or rather the
- State doesn't add funding or subtract funding based on
- the number of employees that receive coverage?
- 16 A. Yes, that's true.
- 17 Q. And if a person drops coverage, in turn, those
- revenues don't go back to the State, right?
- ¹⁹ A. Yes.
- Q. I just want to make sure I didn't get caught in a
- double negative, but it's correct that when a person
- discontinues coverage, revenue does not go back to the
- State, is that correct?
- A. Revenues do not go back to the State.
- Q. Now, at some point KVCC began to offer household

- 1 MARILYN SCHLACK, Ed.D
- THE WITNESS: Yeah. We started May --
- excuse me just a minute, May 1st of '11. Yes, fall of
- ⁴ '11.
- 5 BY MS. CRAWFORD:
- Q. And during the time period from May 1st, 2011, through
- the fall of 2011, when household member benefits were
- offered by KVCC, is it your testimony that only one
- 9 individual signed up for those benefits?
- 10 A. Yes.
- 11 Q. Now, you said that -- it was your testimony that you
- would support the continuation of benefits so long as
- 13 State law allowed it and there was interest on the
- part of employees, right?
- 15 A. May I ask for a -- are you asking me as an individual
- or as president of the college?
- 17 Q. Well, that's exactly the point I'm getting to. So my
- first question is, you, as president, supported
- offering these benefits?
- ²⁰ A. Yes.
- Q. And you would support continuing to offer these
- benefits?
- ²³ A. As president, yes.
- Q. And did the board of trustees give permission to offer
- these benefits?

1 MARILYN SCHLACK, Ed.D

- 2 A. The board of trustees gave me the authority to oversee
- our benefits program. I informed them of the plan,
- but they did not take action. They didn't object. I
- mean, it just wasn't one of the things they do. It's
- not a policy, it's, it's an addition to our plan.
- ⁷ Q. So the board of trustees essentially tacitly approved
- of your decision to offer household member benefits as
- 9 part of KVCC's health insurance plans?
- 10 A. Yes.
- 11 Q. They certainly didn't express disagreement with your
- decision to offer household member benefits?
- ¹³ A. No.
- 14 Q. And as president of the college, it was your testimony
- that KVCC, the college, would continue to offer
- benefits, household member benefits, provided that
- there was interest on the part of employees and State
- law allowed it?
- ¹⁹ A. Yes.
- Q. Let's look at the requirements and stipulations
- section of this document.
- MR. COOPER: Which document, Amy?
- MS. CRAWFORD: Oh, Exhibit G.
- 24 BY MS. CRAWFORD:
- ²⁵ Q. Are you there?

- 1 MARILYN SCHLACK, Ed.D
- MR. COOPER: Yes.
- 3 A. Yes.
- 4 BY MS. CRAWFORD:
- ⁵ Q. And I don't want to read all of this language, but
- this indicates that, under the household member
- program, a benefits-eligible Kalamazoo Valley
- 8 Community College employee who does not already enroll
- a spouse in the health or other benefit plans may
- enroll one adult individual for benefit coverage but
- only if all of the following eligible criteria are
- met. Do you see that?
- ¹³ A. I do.
- Q. So within that paragraph, it provides that employees
- who have a spouse enrolled already in the health
- benefit plans may not enroll a household member,
- 17 right?
- ¹⁸ A. Yes.
- 19 Q. And the plan only allows benefits-eligible employees
- to enroll a single adult for coverage, is that right?
- 21 A. Yes.
- Q. And under the eligible criteria, one of the criteria
- is that the KVCC employee is eligible for KVCC's
- benefits, right?
- 25 A. Yes.

- 1 MARILYN SCHLACK, Ed.D
- O. And it's also true that the household member under
- this policy at the time of the proposed enrollment
- 4 must reside in the same residence as the
- benefits-eligible employee?
- 6 A. Yes.
- ⁷ Q. And they must have, the household member must have
- 8 resided in the same residence for the previous 18
- 9 continuous months?
- 10 A. Yes.
- 11 Q. But the household member may not be a tenant, is that
- 12 right?
- 13 A. Yes.
- 14 Q. And the household member may not be an IRS dependent?
- 15 A. That's right.
- 16 Q. And this indicates that if a benefits-eligible KVCC
- employee chooses to cover an eligible household member
- and that household member has coverage through his or
- her employee, then the KVCC health benefit plan will
- 20 be secondary?
- MR. COOPER: Amy, you misstated, his or her
- employer. You misstated employee.
- MS. CRAWFORD: Oh, okay, strike that.
- 24 BY MS. CRAWFORD:
- Q. If a benefits-eligible KVCC employee chooses to cover

1 MARILYN SCHLACK, Ed.D

- an eligible household member and the household member
- has coverage through his or her employer, then the
- 4 KVCC benefit plan will be secondary, is that right?
- ⁵ A. Yes.
- 6 Q. And this indicates that the household member is not
- 7 eligible for benefits through COBRA?
- ⁸ A. Yes.
- 9 Q. It also indicates that pre-tax dollars set aside
- through a flexible spending account can't be used to
- pay the co-premium for household members or the
- uninsured health care expenses for a household member
- or members, right?
- 14 A. Yes.
- 0. So, reading this, does it indicate to you that there's
- no opportunity for the eligible KVCC employee who
- chooses to enroll a household member to set aside
- pre-tax dollars for expenses -- or the premium of the
- household member? Is that correct?
- A. To pay the co-premium, yes.
- Q. For the uninsured health care expenses?
- ²² A. Yes.
- Q. So household members don't have the same opportunity
- to reduce their tax burden as, say, an eligible
- employee who's covering a spouse who could put money

- 1 MARILYN SCHLACK, Ed.D
- in a -- pre-tax dollars aside in a flexible spending
- 3 account?
- ⁴ A. I can't answer that.
- ⁵ Q. Okay. Skipping down to the second-to-the-last
- paragraph from the bottom, where it says the following
- individuals are not eligible for participation in this
- program, do you see that?
- ⁹ A. I do.
- 10 Q. This indicates that children of benefits-eligible
- employees and their descendents are not eligible for
- household member benefits, right?
- 13 A. Yes.
- 14 Q. And parents of benefits-eligible employees are not
- eligible, either?
- ¹⁶ A. Yes.
- 17 Q. And neither are parents' other descendents or
- grandparents and their descendents?
- ¹⁹ A. Yes.
- Q. Nor are renters, boarders, or tenants eligible for
- household member coverage, is that right?
- ²² A. Yes.
- Q. Could you please turn to Exhibit H? Are you familiar
- with this document?
- A. I've seen it, but I'm not sure I can offer much toward

- 1 MARILYN SCHLACK, Ed.D
- it, but go ahead.
- 3 O. That's all I wanted to know.
- In terms of the actual cost of household
- member benefits that KVCC incurred during the period
- that it offered those benefits, is Ms. Bohnet, in your
- view, the better person to inquire with?
- MR. COOPER: She's not the better person,
- but she has more information. She's an equally-fine
- person.
- THE WITNESS: Yes.
- 12 BY MS. CRAWFORD:
- 13 Q. How about the administrative costs, if any, of setting
- up household member benefits, would Ms. Bohnet be the
- person to answer that?
- ¹⁶ A. Yes.
- 17 Q. Why did KVCC decide to implement its household member
- 18 program in 2011?
- 19 A. Are you asking me as president or as an individual?
- Q. As president.
- 21 A. The question was raised by several faculty and staff
- members if we could consider it, we'd consider it. It
- came up as a contract issue with our faculty, and we
- told them that we were not going to negotiate this
- into a contract because we didn't want to limit it to

- 1 MARILYN SCHLACK, Ed.D
- one group, and I think that started the conversation.
- 3 Q. And you say that started the conversation. What
- 4 ultimately led KVCC to -- what was the motivation for
- 5 providing the benefits?
- ⁶ A. We felt it was the fair thing to do.
- ⁷ Q. And what do you mean by that?
- 8 A. That all individuals that worked for KVCC had the
- 9 right to have insurance, and their household partner.
- 10 Q. So it was the view of KVCC that all employees should
- be able to obtain health care -- health insurance
- coverage for their household partner?
- 13 A. Yes.
- 14 O. Can household member benefits be considered an
- investment in KVCC's faculty?
- 16 A. I don't think I understand the question. You mean as
- an attraction?
- 18 O. Yes.
- ¹⁹ A. Yes.
- Q. And why do you say that?
- A. Because we would be able to attract a diverse, a more
- diverse group of individuals than we might otherwise.
- I can't prove that, Amy, but I think that's one of the
- motivators.
- Q. How would household member benefits help contribute to

- 1 MARILYN SCHLACK, Ed.D
- the goal you stated earlier of attracting a diverse
- 3 workforce?
- ⁴ A. Benefits are a big thing these days, and that's an
- important part of any employee package, is what is
- your benefit package. When you know that you're
- 7 coming to the college with a household member that
- would otherwise not be covered, it's an attraction.
- 9 Q. Now, any benefit costs money, right?
- 10 A. Yes.
- 11 Q. Do you have a sense, an estimate of how much the
- household member benefits cost KVCC during the period
- that they were provided?
- 14 A. I cannot. As I said, we only had one member for a
- very short period of time.
- 16 Q. Is it fair to say the costs of that program were not
- high?
- 18 A. Not in that short period of time they certainly
- weren't. I can't estimate beyond that.
- Q. You mentioned earlier that it's important for KVCC to
- operate within budget constraints?
- ²² A. Absolutely.
- Q. It's difficult to continue functioning if you don't
- meet your budget constraints?
- ²⁵ A. You'd have a different person sitting at the end of

- 1 MARILYN SCHLACK, Ed.D
- this table.
- ³ Q. Was there an assessment that, by KVCC, that offering
- 4 household member benefits was cost justified?
- ⁵ A. It was somewhat of a risk, because we had no idea how
- many people were gonna take advantage of it. So
- again, the question is almost moot for me, because one
- 8 person took advantage of it, and again, it was a very
- 9 short window of time.
- 10 Q. KVCC did determine to offer those benefits, even
- though it's important for it to stay within budget,
- 12 right?
- 13 A. Yes.
- Q. And, in fact, the cost of the benefits were
- essentially insignificant?
- ¹⁶ A. For that period, yes.
- 17 Q. Would KVCC prefer to offer domestic partner benefits
- or would it prefer to save the money that it would
- have spent on those benefits?
- MR. DONNELLY: Objection.
- ²¹ A. That's speculation.
- MR. DONNELLY: Yeah, that was my objection,
- speculation.
- A. I don't know how to answer that. I think we've stated
- that we had those and we felt this was an important

- 1 MARILYN SCHLACK, Ed.D
- step. We don't have it now.
- 3 BY MS. CRAWFORD:
- ⁴ Q. You would be -- as president, you'd be offering those
- benefits now if you were permitted to do so by State
- 6 law?
- MR. COOPER: It's been asked and answered,
- 8 Amy.
- 9 BY MS. CRAWFORD:
- 10 O. You can answer.
- ¹¹ A. Yes.
- 12 Q. And how did it come to pass that benefits were
- discontinued, household member benefits were
- discontinued?
- 15 A. We had a household bill -- house bill which was passed
- in December of 2011, which we knew was coming, we were
- put on notice, and that's why they were discontinued.
- 18 Q. Do you know when they were discontinued?
- 19 A. I think they were November or December. At the end of
- that open enrollment period.
- Q. And do you know when the recipient of household member
- benefits stopped receiving coverage for his or her
- household member?
- A. It had to be in January, because that's when -- our
- new open enrollment period, but again, I cannot state

- 1 MARILYN SCHLACK, Ed.D
- that accurately.
- ³ Q. So it's your testimony that the Public Employee
- 4 Domestic Partner Benefit Restriction Act is what led
- 5 KVCC to stop extending those household member
- 6 benefits?
- 7 A. Yes.
- ⁸ Q. Do you know Denise Miller?
- ⁹ A. Yes.
- 10 Q. How do you know her?
- 11 A. Faculty member of long term. I've worked on several
- committees with her. I went to Michelle and Denise's
- wedding.
- 14 Q. And how long has Professor Miller -- can I call her
- 15 Professor Miller?
- ¹⁶ A. Please do.
- 17 Q. How long has Professor Miller taught at KVCC?
- 18 A. A long time. I can't give you an exact date.
- 19 O. Is she tenured?
- ²⁰ A. Absolutely.
- Q. Are you familiar with her educational background?
- ²² A. Tam.
- Q. And what is her background?
- A. You mean in terms of degrees?
- 25 O. Yes.

- 1 MARILYN SCHLACK, Ed.D
- ² A. I can't tell you that. She has a Master's, but I can
- tell you what she teaches, her discipline. She
- 4 teaches English, composition. She writes poetry.
- 5 She's very artistic in several mediums. She owns a
- 6 vegetarian restaurant right now. I know a lot about
- 7 Denise.
- ⁸ Q. How well do you know her? Do you know her personally?
- ⁹ A. Absolutely. As I said, I went to her wedding to
- Michelle.
- 11 Q. Do you know how long Professor Miller and her partner,
- Michelle, have been together?
- 13 A. Well, they got married in, what, 2009, '10, and I
- can't remember the exact date. I know it was at the
- nature center. And they had been together about maybe
- 18 months before that, as far as my memory serves me.
- 17 Again, I cannot be that specific.
- 18 Q. Have you had the opportunity --
- MR. COOPER: The complaint alleges their
- commitment ceremony was in 2004.
- THE WITNESS: Ooh, time goes fast.
- 22 BY MS. CRAWFORD:
- Q. How would you characterize Professor Miller's job
- performance as a faculty member?
- MR. DONNELLY: Relevance. You can go

- 1 MARILYN SCHLACK, Ed.D
- ahead. It has nothing to do with the lawsuit, but you
- 3 can go ahead and answer.
- 4 BY MS. CRAWFORD:
- ⁵ O. You can answer.
- ⁶ A. She's an outstanding teacher and very committed to
- ⁷ students.
- Q. Are Professor Miller's job responsibilities different
- from other faculty members on account of the fact that
- she's a lesbian?
- 11 A. Absolutely not.
- 12 Q. So she has the same job duties and responsibilities as
- other professors at KVCC?
- ¹⁴ A. Absolutely.
- 15 O. Does Professor Miller perform her job duties according
- to KVCC's expectations?
- 17 A. Yes.
- 0. Does the fact that Professor Miller is a lesbian have
- any impact on the quality of her work performance?
- A. No. And I'm going to say that she's not the only
- lesbian or gay person that we have at KVCC, so I'm not
- going to single her out or make a statement just about
- Denise Miller.
- Q. There's nothing about the quality of being gay or
- lesbian, on the one hand, or heterosexual, on the

- 1 MARILYN SCHLACK, Ed.D
- other, that's relevant to employment at KVCC?
- ³ A. Absolutely not.
- ⁴ Q. And, just to clarify, is it your testimony that
- unmarried gay or lesbian employees have the same job
- duties and responsibilities as married employees of
- 7 KVCC?
- ⁸ A. I can't state it strongly enough, yes.
- 9 O. Whether -- someone's marital status is not relevant to
- the performance of their job duties at KVCC, is that
- 11 right?
- 12 A. Half the time we don't know. It's not one of the
- things that I'm interested in or the college is
- interested in. We're interested in productivity and
- what the results are.
- 16 O. So their marital status is irrelevant?
- ¹⁷ A. Absolutely.
- MS. CRAWFORD: I have no further questions.
- 19 THE WITNESS: Thank you.
- 20 EXAMINATION
- 21 BY MR. DONNELLY:
- Q. Marilyn, my name's Mark Donnelly. I'm with the
- 23 Attorney General's office. I have a few questions for
- you, not nearly as many, because if I understand you
- correctly, the specifics about the household member

- 1 MARILYN SCHLACK, Ed.D
- ² A. Right.
- Q. -- of your responses, just that small snapshot between
- fiscal year '10 --
- ⁵ A. Right.
- 6 Q. -- and fiscal year '11, the cost of fringe benefits
- 7 rose probably 20 percent?
- 8 A. Yes.
- 9 MS. CRAWFORD: Objection to form and
- foundation.
- 11 BY MR. DONNELLY:
- 12 Q. And would you agree with me that every dollar that
- 13 KVCC has to spend in providing health care is a dollar
- that it can't spend inside the classroom?
- 15 A. Yes.
- 16 Q. And I think it goes without saying, but you'd agree
- with me that the cost of providing health care to two
- people is more expensive than it is for providing
- health care to one person, is that correct, for the
- college?
- MS. CRAWFORD: Object to form.
- 22 A. I think we need to qualify that, because if you look
- at this, these are budgeted numbers, not actual, and,
- as I said, we're self-insured. We pay what the claims
- are. We don't pay into an insurance company's

- 1 MARILYN SCHLACK, Ed.D
- unanticipated claims. So it's hard to answer that
- question, Mark, in absolute terms.
- 4 BY MR. DONNELLY:
- ⁵ Q. Okay. Well, rather than the claims paid, and I want
- to get back to the self-insured, because that's an
- aspect that's a little bit different than some
- 8 other --
- ⁹ A. Yup.
- 10 Q. -- schools or local units of government, but it's my
- understanding that aside from the claims that are
- paid, there is premiums that are paid both by the
- employer and the employee, is that correct?
- MS. CRAWFORD: Object to form.
- 15 A. That's true now, yes, with the 80/20.
- 16 BY MR. DONNELLY:
- Q. Okay. Well, in fact, when -- are you familiar with
- when the household member benefit was in effect, the
- benefit that was -- that the, that the employee got
- for that household member was taxed as income, is that
- 21 correct?
- ²² A. Yes.
- Q. Okay. And one of the exhibits that were attached, I
- think it's, if I can find it here real fast, Exhibit H
- to your responses, which is Exhibit 1, that if I'm

Exhibit 2.B

	Page 1			
1	SANDRA BOHNET			
2	IN THE DISTRICT COURT OF THE UNITED STATES			
3	FOR THE EASTERN DISTRICT OF MICHIGAN			
4	SOUTHERN DIVISION			
5				
6	THERESA BASSETT and CAROL			
7	KENNEDY, PETER WAYS and JOE			
8	BREAKEY, JOLINDA JACH and			
9	BARBARA RAMBER, DOAK BLOSS and			
10	GERARDO ASCHERI, DENISE MILLER,			
11	AND MICHELLE JOHNSON,			
12	Plaintiffs,			
13	vs. Case No. 2:12-cv-10038			
14	Hon. David M. Lawson			
15	RICHARD SNYDER, in his official			
16	capacity as Governor of the			
17	State of Michigan,			
18	Defendant.			
19				
20	The Videotaped Deposition of SANDRA BOHNET,			
21	Taken at 259 East Michigan Avenue, Suite 208,			
22	Kalamazoo, Michigan,			
23	Commencing at 11:39 a.m.,			
24	Friday, May 25, 2012,			
25	Before Rebecca L. Russo, CSR-2759, RMR, CRR.			

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1
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20
          College and the Witness.
21
22
    ALSO PRESENT:
23
    Rachel Bierl - Video Technician
24
25
```

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1
                                SANDRA BOHNET
2
    Kalamazoo, Michigan
3
     Friday, May 25, 2012
     11:39 a.m.
5
6
                     MARKED FOR IDENTIFICATION
7
                      DEPOSITION EXHIBIT 1
                      11:39 a.m.
                      VIDEO TECHNICIAN: The time is now
10
          11:39 a.m., and we are on the record.
11
                             SANDRA BOHNET,
12
          was thereupon called as a witness herein, and after
13
          having first been duly sworn to testify to the truth,
14
          the whole truth and nothing but the truth, was
15
          examined and testified as follows:
16
                              EXAMINATION
17
    BY MS. CRAWFORD:
18
          Good morning.
     Ο.
19
          Good morning.
     Α.
20
          Would you please state your name?
     Ο.
21
          Sandra Bohnet.
    Α.
22
          And where do you work?
     Ο.
23
          Kalamazoo Valley Community College.
     Α.
24
          What is your job title there?
     Q.
25
          Vice-president for human resources.
```

- 2 A. Yes.
- ³ Q. Did Marwil & Associates have a role with respect to
- developing that program?
- 5 A. Yes.
- 6 O. What was their role?
- ⁷ A. Their role was to work with us on the design of the
- 8 plan.
- 9 Q. By the design of the plan, do you mean the
- eligibility?
- 11 A. Eligibility requirements. We needed their advice on
- whether or not members would be subject to COBRA.
- 13 Q. Who generated the idea of covering household members?
- 14 A. Employees from within the college first presented the
- 15 idea.
- 16 Q. And which employees?
- 17 A. I can say Denise Miller. Beyond that, I honestly
- don't recall.
- 19 Q. So Ms. Miller came to you?
- ²⁰ A. No, if I recall correctly, this was during a meeting,
- and I don't even believe I was at the meeting. It was
- likely a college-wide meeting.
- Q. And when was this meeting?
- A. I don't know. Prior to 2011.
- Q. Do you know anything else about the meeting?

- 1 SANDRA BOHNET
- 2 provide to the federal government?
- 3 A. Yes.
- ⁴ Q. And it's current as of November 1st, 2011?
- ⁵ A. That's correct.
- ⁶ Q. And if you look at the grand total line, is that the
- source of your testimony that eleven hundred and
- 8 sixty-five total employees worked for KVCC as of
- 9 November 1st, 2011?
- 10 A. Yes.
- 11 Q. And how many of these employees were eligible as of
- November 1st, 2011, for health insurance benefits?
- 13 A. As of November 1st, 404.
- 14 Q. And currently?
- 15 A. As of May 9th, when I completed this document, the
- 16 number was 402.
- 17 Q. And now you're referring to the response to request
- 18 number 3?
- ¹⁹ A. Yes.
- Q. Okay. On page 2 of the responses, right?
- ²¹ A. Yes.
- Q. Of the 402 full-time employees who are currently
- eligible to participate in KVCC health insurance
- plans, how many actually participate?
- ²⁵ A. 327.

- Q. And can they obtain coverage for anyone else?
- ³ A. They can obtain coverage through -- for sponsored
- dependents.
- ⁵ O. And what does that mean?
- ⁶ A. A sponsored dependent may be a
- developmentally-disabled adult, past the age of 26.
- ⁸ Q. And if you look at your response to request number 5,
- you indicate that 716 individuals are currently
- insured through group health insurance plans made
- available to KVCC employees as of May 9th, right?
- 12 A. That's correct.
- 13 Q. And so am I correct that there are 327 employees
- enrolled in the group health insurance plans, those
- 327 employees plus -- if we took 716 minus 327, we
- would have the number of spouses, children, or
- sponsored dependents who are covered under KVCC's
- plans?
- 19 A. That's correct.
- Q. And as I'm doing the math here, that would be 389.
- Does that sound about right?
- 22 A. I will trust that you're close. Without doing the
- math in my head, that sounds about right.
- Q. And when KVCC offered household member benefits, how
- many individuals were covered as household members?

- 2 A. One.
- Q. And again, it's noted here that no responsive
- documents exist in response to request number 5. Is
- 5 that also because that information is located in
- different places and you had to collect it?
- ⁷ A. That's absolutely correct.
- 8 Q. Can you turn to Exhibit C of the responses, Exhibit C
- 9 to your responses?
- 10 A. Yes.
- 11 O. What is Exhibit C?
- 12 A. Exhibit C is our expenditures for health insurance for
- the years 20 -- fiscal year 2010 and 2011.
- 0. And there are several line items here that I'd like
- you to take us through. Can you first explain what
- claims paid means?
- 17 A. Claims paid are claims paid for medical, dental,
- vision, and prescription drugs.
- 19 Q. And does this refer to premiums paid for insurance, or
- how, how is this number derived?
- 21 A. Kalamazoo Valley Community College is self-funded for
- health insurance. This represents actual dollars
- paid. We do not pay premiums.
- Q. What are MWA fees?
- ²⁵ A. That's Marwil & Associates, our health care

- 1 SANDRA BOHNET
- MR. COOPER: And the employee.
- THE WITNESS: And the employee, yes.
- 4 BY MS. CRAWFORD:
- ⁵ Q. Do you have any information about the number of
- individuals covered in fiscal year 2010 versus fiscal
- 7 year 2011?
- 8 A. The number would be very, very close. Our turnover is
- 9 very low.
- 10 Q. So the total cost to KVCC of providing health
- insurance coverage to employees and other recipients
- of benefits in fiscal year 2010 was over \$4.6 million?
- ¹³ A. Right.
- Q. And in 2011, fiscal year 2011, the total cost to KVCC
- of providing health insurance coverage to employees
- and other beneficiaries was in excess of \$5.5 million?
- ¹⁷ A. That's right.
- Q. And again, those were the costs for providing benefits
- to approximately 700 covered individuals --
- ²⁰ A. Right.
- Q. -- give or take?
- 22 A. Hmm-hmm, correct.
- Q. Can you look at Exhibit D to the responses, please?
- Are you familiar with this document?
- 25 A. I am.

- year.
- Q. And what document are you referring to for those
- 4 numbers?
- 5 A. I'm referring to Exhibit H.
- ⁶ Q. Okay. I'd like you to explain Exhibit H in a little
- more detail. Let's go ahead and look at it now. What
- is Exhibit H?
- ⁹ A. Exhibit H shows how we calculate what an employee will
- pay if they cover a household member, and what is
- reflected here is the scenario that we used for Denise
- Miller, who was our only employee who signed up for
- household member benefits. Her salary is greater than
- \$60,000 a year, or was in 2011, and this simply shows
- the calculation.
- She had selected what we call core
- coverage, which is the only coverage that we have
- available other than to opt out of the program.
- She paid a co-premium of \$28.17 per pay
- period on a pre-tax basis. She made the decision to
- add a household member. Her co-premium for the
- household member was \$8.67. That's the difference
- between the two-person co-premium of 36.84. The
- single co-premium is 28.17. That \$8.67 to add the
- household member was taxable, cannot be run as a

- 2 pre-tax deduction.
- Then we needed to calculate the fair market
- ⁴ value to provide that insurance, what would be
- 5 considered taxable income to the employee, and so we
- defined the fair market value as the cost of insurance
- to add one dependent to the plan, and this amount
- 8 would show as imputed income on the employee's
- paycheck, and the total amount would be added to the
- employee's W-2 form at the end of the year.
- 11 Q. Okay --
- 12 A. And -- yup.
- Q. -- let me just stop you there. So this is the actual
- scenario you said that applied to Denise Miller?
- 15 A. Yes.
- 16 Q. And why don't you go ahead and explain what the
- calculation you ended up with under number 5 was?
- 18 A. Okay. In order to come up with a calculation, we took
- the single monthly COBRA rate, which at that time was
- 913.98. We reduced it by two percent, which is the
- administrative fee, that equaled \$18.28. We came up,
- then, with a result of \$895.70.
- The two-person monthly COBRA rate was
- \$1,883.44, minus the two percent administrative fee,
- giving us \$1,845.77.

- We did the math on that. The result was
- 3 \$460.95, which is shown as imputed income on Denise
- 4 Miller's paycheck, and FICA, Federal, and State taxes
- 5 would be deducted.
- O. Okay. In other words, Denise Miller -- let me back
- ⁷ up. This represents a scenario for I assume an entire
- 9 year?
- ⁹ A. Yes.
- 10 Q. So how did employee -- had household member benefits
- been provided for all of 2011, it was your calculation
- that Denise Miller would have had another \$460.95 show
- up as imputed income on her paycheck, and that would
- have been taxable income?
- ¹⁵ A. Actually, that's not correct. This is on a monthly
- basis, or on a per-paycheck basis.
- Q. Okay, that makes more sense to me.
- 18 A. Yeah, not an annual figure, but a per pay period.
- 19 Q. And pay periods are monthly?
- A. We are paid semi-monthly, twice a month.
- O. So Denise Miller had an additional \$460.95 added to
- each paycheck -- or reflected on each paycheck as
- taxable income?
- ²⁴ A. Correct.
- O. And she paid FICA, Federal, and State taxes on that

- 1 SANDRA BOHNET
- amount?
- 3 A. Yes, she did.
- 4 MR. COOPER: We assume.
- 5 BY MS. CRAWFORD:
- ⁶ Q. Were those taxes automatically deducted?
- ⁷ A. It's set up in our payroll system to automatically
- 8 deduct, yes.
- ⁹ Q. So she did pay those taxes?
- 10 A. I would say yes.
- 11 Q. Let's turn back to Exhibit D to your responses. Just
- picking up where we left off, you testified that a
- single individual would cost \$924.04 as of
- January 1st, 2010, approximately?
- 15 A. That's right.
- 16 O. And what does double mean?
- 17 A. Double means two person, so it's either a -- it could
- be an employee and a dependent, it could be an
- employee and a spouse.
- Q. And what's family?
- 21 A. A family would be more than two individuals.
- Q. And this is a suggested rate that would apply to COBRA
- payments, regardless of how many actual family members
- there were?
- ²⁵ A. Absolutely, yes.

- and the result was 912.37, which was the monthly cost
- 3 that we could attribute.
- 4 Q. Did Denise Miller elect dental benefits?
- ⁵ A. I assume not.
- 6 Q. So KVCC calculated that the estimated monthly cost of
- providing household member benefits to Denise Miller
- was \$912.37?
- ⁹ A. Yes.
- 10 Q. So on an annualized basis, less than \$11,000?
- 11 A. Whatever that figure is multiplied by twelve.
- 12 Q. And that represents the total cost, estimated annual
- cost for all household member benefits -- strike that.
- Only, there was only one individual who
- took advantage of household member benefits, right?
- ¹⁶ A. Yes.
- 17 Q. So the average cost to KVCC for this program was
- 18 \$912.37 a month?
- MR. DONNELLY: Object to the form of the
- question. It's not a coverage, it's an estimate.
- A. When you're self-insured, as I said, during 2011 we
- were actually responsible for up to \$90,000 in claims
- per individual. We have no way of knowing the amount
- the household member incurred in claims. So the only
- reasonable number to use, in our opinion, is the COBRA

- 1 SANDRA BOHNET
- ² rate.
- 3 BY MS. CRAWFORD:
- 4 Q. So every covered individual could result in a cost of
- up to \$90,000 for KVCC each year?
- ⁶ A. That's correct.
- 7 O. You don't know how much the household member who
- 8 received coverage actually cost KVCC?
- ⁹ A. I do not.
- 10 Q. And it's certainly the case that not every employee
- who's covered costs KVCC \$90,000 a year?
- 12 A. Correct.
- 13 Q. And neither do their spouses or their children?
- ¹⁴ A. Correct.
- Q. So the \$912.37 represents the estimated cost for a
- spouse or a household member?
- 17 A. That's a fair statement.
- 18 Q. Do you know what budgeted fringe benefit expenses are
- for fiscal year 2012?
- A. Are you referring to a document?
- Q. No, I'm just asking.
- A. I don't, off the top of my head.
- Q. Are the costs for health insurance coverage paid from
- 24 KVCC's general fund?
- 25 A. Yes, they are.

- Q. And they're paid from the general fund, and therefore
- aren't connected to a specific source of revenue?
- ⁴ A. That's correct.
- ⁵ Q. If more people took advantage of the health insurance
- that KVCC offered to employees, would the State
- provide more money to KVCC to pay for those benefits?
- MR. DONNELLY: Object, foundation.
- 9 MR. COOPER: Sandy, I'm advising you to not
- engage in speculation or conjecture. So if you know
- how the State comes up with the figures that it does,
- you can reliably answer Amy. If you don't know, you
- should tell her that.
- THE WITNESS: Okay.
- 15 A. Could you repeat the question, Amy?
- 16 BY MS. CRAWFORD:
- 17 Q. Yeah. I don't think that's what my question really
- asked. The question is -- let me back up, okay?
- Just give a verbal answer.
- ²⁰ A. Okay.
- Q. Do you have an understanding of how KVCC's health
- insurance costs are paid for?
- ²³ A. Yes.
- Q. And they're paid from general funds?
- 25 A. Yes.

- MR. DONNELLY: Foundation.
- ³ A. What money, Amy?
- 4 BY MS. CRAWFORD:
- ⁵ Q. Okay, fair enough. Do you have any sense that any
- funds that might have come from the State to the
- general fund are returned to the State as a result of
- 8 an individual discontinuing benefits?
- ⁹ A. I don't have any knowledge on that.
- 10 Q. And you testified before that the most that KVCC could
- pay per year for a covered individual would be \$90,000
- for health insurance benefits?
- ¹³ A. Correct.
- 14 Q. That's certainly an unusual claim experience, is that
- 15 right?
- 16 A. Define unusual.
- 17 Q. Well, we talked about in Exhibit D -- or I'll point
- you to Exhibit E. Again, Exhibit E represents KVCC's
- estimated costs of providing benefits on a per-person
- 20 basis --
- ²¹ A. Okay.
- 22 Q. -- correct?
- ²³ A. Yes.
- Q. So KVCC estimated at the beginning of 2011 that
- medical, vision, and prescription drug coverage for a

- 1 SANDRA BOHNET
- single individual is \$866.10, right?
- ³ A. Per month, that's correct.
- ⁴ Q. And that estimate is based on some projection of the
- 5 total expenses that KVCC will have, and divided by the
- 6 number of single individuals?
- 7 A. That's correct.
- ⁸ Q. And then with respect to the \$912.37 monthly cost for
- a spouse or a household member, do you recall
- testifying about that amount?
- ¹¹ A. I do.
- 12 Q. That represents KVCC's estimate of the actual cost of
- a spouse or a household member per month for 2011
- based on total expenses for those individuals, divided
- by the number of individuals in that category, right?
- 16 A. That's correct.
- 17 Q. And the same is true with respect to your estimate for
- family coverage?
- 19 A. That's correct.
- Q. And, in that sense, the estimate is like an average?
- 21 A. That's a fair statement.
- Q. And it's based on the actual claims experience of the
- total group of covered individuals?
- ²⁴ A. That's correct.
- Q. In Exhibit F, if you could turn to that, is it fair to

- program become effective?
- ³ A. The program became effective May 1st, 2011.
- 4 Q. And when did it cease to be effective?
- ⁵ A. December 31st, 2011.
- 6 Q. So when -- you mentioned that a single individual was
- 7 covered under the household member benefits, right?
- ⁸ A. Yes.
- 9 Q. And Denise Miller was a covered employee?
- 10 A. Yes.
- 11 Q. And her partner was the household member?
- 12 A. Yes.
- 13 Q. And when did the health insurance coverage of Denise
- Miller's household member cease?
- ¹⁵ A. December 31st, 2011.
- 16 Q. And was Denise Miller's partner eligible for COBRA?
- ¹⁷ A. No.
- 18 Q. Let me ask you about the last bullet under
- requirements and stipulations. There's -- it states
- pre-tax dollars set aside through a flexible spending
- account cannot be used to pay the co-premium for a
- household member or members or the uninsured health
- care expenses for a household member or members. Do
- you see that?
- 25 A. I do.

- O. What does that mean?
- 3 A. We have flexible spending accounts that allow us to
- 4 pay for certain expenses with pre-tax dollars.
- ⁵ O. And what is the restriction here?
- ⁶ A. The restriction, we were advised by Marwil &
- Associates that pre-tax dollars could not be used by
- household members to pay co-premiums for -- or
- ⁹ uninsured health care expenses.
- 10 Q. So an employee who had a household member could pay
- for the employee's own health care expenses through a
- 12 flexible spending account?
- 13 A. Could pay for expenses not covered through the plan
- through that account.
- 15 Q. But the employee could not pay for expenses not
- covered by the plan that were incurred by the
- household member?
- 18 A. That's correct.
- 19 Q. And under the household member program, if the
- household member had other insurance, the KVCC
- insurance was secondary?
- ²² A. That's correct.
- Q. And that's consistent with KVCC's policy with respect
- to married individuals?
- 25 A. Yes.

2:12-cv-10038-DML-MJH Doc # 47-3 Filed 06/13/12 Pg 56 of 97 Pg ID 2148 Page 45 1 SANDRA BOHNET 2 eight months? 3 That would be correct. Α. MR. COOPER: Seven, May --5 MS. CRAWFORD: May, June ... 6 Sorry, eight. That was MR. COOPER: 7 helpful on my part, wasn't it? Excuse the interruption. BY MS. CRAWFORD: 10 When Denise Miller stopped receiving household member Ο. 11 benefits, you're not aware of any refund going to the 12 State? 13 I'm not aware. Α. 14 Did KVCC incur any administrative costs to start up 15 the household member benefit program? 16 Α. Just time. 17 Do you know how much time? Ο. 18 I don't. Α. 19 Whose time? Ο. 20 Α. Mine. 21 Anybody else's? Ο. 22 At the college? No. Α.

- 23 Was that time spent creating documentation? Q.
- 24 Α. Yes.
- 25 Anything else? Ο.

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- ² A. No.
- ³ Q. Did you spend more than five hours on this, on the
- 4 household member benefit plan?
- ⁵ A. Honestly, Amy, I couldn't say. I don't know offhand.
- 6 O. More than ten? No idea?
- ⁷ A. I really don't, I'm sorry.
- ⁸ Q. Are you salaried?
- ⁹ A. Yes.
- 10 Q. So the college didn't incur additional expense for the
- time you spent on these -- this benefit plan?
- 12 A. That's correct.
- 13 Q. Fair to say those costs were negligible?
- 14 A. It was done during the course of my employment, so --
- as you said, I'm salary.
- Q. And were there any ongoing administrative costs from
- offering household member benefits?
- ¹⁸ A. No.
- 19 Q. And you're testifying as a representative of KVCC
- today, right?
- 21 A. I am.
- Q. I understand the provision of the household member
- benefit program was a pilot program?
- 24 A. Yes.
- Q. And it was intended to have a duration of May 1st,

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- 1 SANDRA BOHNET
- 2 2011, to December 31st, 2013?
- ³ A. Correct.
- ⁴ Q. And why were benefits discontinued?
- ⁵ A. Because of action taken at the State level that
- 6 prevented the college from continuing the program.
- ⁷ O. Are you referring to the Act that's exhibited as
- Exhibit I to your responses?
- ⁹ A. Yes.
- 10 Q. Do you know of any other reason why those benefits
- were discontinued?
- 12 A. No, I don't.
- 13 Q. Would KVCC have continued to offer the benefits today
- if it weren't for the Act?
- 15 A. I think it's safe to say we would have continued with
- the pilot program as defined in Exhibit G.
- 17 O. So it's fair to say KVCC would prefer to offer the
- domestic partner benefits or the household member
- benefits that it had put in place rather than
- experience whatever cost savings resulted from not
- 21 providing that one individual household member
- benefits?
- 23 A. We would have preferred to keep our plan in place
- through the pilot program, December 31st, 2013.
- Q. Why is that?

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- A. I think it's based on numbers and I think it's based
- on dollars.
- ⁴ Q. There's a balance between providing benefits that are
- important to employees and controlling costs?
- ⁶ A. I think that's true.
- ⁷ Q. Is it fair to say that the household member program
- 8 that was in place last year was consistent with that
- 9 balance?
- 10 A. Explain what you mean.
- 11 Q. Well, you --
- 12 A. I don't know what that program cost us while it was in
- effect, because, as I said, we do not have access to
- individual claims.
- 15 Q. Do you have any reason to believe that the program was
- inconsistent with the desire to provide important
- fringe benefits to employees and control costs?
- 18 A. I don't have any reason to believe that, no.
- MS. CRAWFORD: Why don't we just take a
- two-minute break, go off the record?
- VIDEO TECHNICIAN: The time is now
- 12:46 p.m. We are off the record.
- 23 (Off the record at 12:46 p.m.)
- 24 (Back on the record at 12:53 p.m.)
- VIDEO TECHNICIAN: We're back on the

Page 50 1 SANDRA BOHNET 2 record. The time is 12:53 p.m. This marks the 3 beginning of tape number two. MS. CRAWFORD: I have no further questions. 5 EXAMINATION 6 BY MR. DONNELLY: 7 Ms. Bohnet, my name's Mark Donnelly, and we met a little bit earlier. I just have a few questions, just to clarify some of your previous testimony. 10 First of all, when this household member 11 benefit went into effect, it covered heterosexual 12 people? 13 Yes. Α. 14 It covered gays and lesbians? Ο. 15 Α. Yes. 16 Ο. I mean, there was no, there was no difference --17 Α. Correct. 18 -- is that right? Ο. 19 Α. Right. 20 But the benefit also -- it didn't require that anybody Ο. 21 be in any type of particular committed relationship in 22 order to receive the benefit, is that correct? 23 Α. That's correct. 24 MS. CRAWFORD: Object to form. 25 BY MR. DONNELLY:

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1 SANDRA BOHNET

- Q. And with respect to the administrative costs of
- 3 rolling out this particular pilot program, you
- indicated it was simply a matter of your time, is that
- 5 correct?
- ⁶ A. Yes, I did.
- ⁷ Q. Were there not also fees paid -- I think you mentioned
- 8 that you had to consult with an outside firm to help
- you draft up the program, is that correct?
- 10 A. I did, but that is part of our normal annual fee that
- is identified in one of the exhibits.
- 12 Q. Okay. So there was no additional cost to them?
- 13 A. No additional cost.
- 14 Q. They're kind of on retainer --
- 15 A. They are.
- 16 Q. -- and whatever, whatever assignments you have for
- them, it comes out of that fee?
- ¹⁸ A. That's correct.
- 19 Q. Okay. I think you've explained this fairly well, but
- I want to -- well, before I ask that question, if I
- understand you correctly, this program came into
- effect because of Denise Miller's request?
- MS. CRAWFORD: Objection to form, and it
- misstates her testimony.
- 25 BY MR. DONNELLY:

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1 SANDRA BOHNET

- ² Q. You can go ahead and answer.
- A. Not just Denise Miller, but other employees had
- 4 expressed an interest.
- ⁵ Q. Okay. But once the program was rolled out, none of
- those other employees signed up for it, is that
- 7 correct?
- ⁸ A. That's correct.
- 9 Q. And is it unusual as a -- in your experience as the HR
- director there, to have a specific fringe benefit
- program that benefits only one employee?
- MS. CRAWFORD: Objection to form, and
- vaque.
- 14 A. You know, we can never predict what the outcome is
- going to be when we introduce a program.
- 16 BY MR. DONNELLY:
- 17 O. I understand that.
- 18 A. So whether it was one person or more, I really did not
- have a sense for how many people.
- 20 Q. No, I understand that. Let me ask it this way. Are
- there any other fringe benefit programs, that you're
- aware of, that benefits only one employee at the
- college?
- 24 A. No, I'm not aware.
- Q. If I understand what you've testified to, the actual

Exhibit 2.C

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI, DENISE MILLER, AND MICHELLE JOHNSON,

Plaintiffs,

Case No. 2:12-cv-10038

VS.

Hon. David M. Lawson Mag. Judge Michael J. Hluchaniuk

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

KVCC, DR. MARILYN J. SCHLACK, AND SANDY BOHNET'S DOCUMENTS PRODUCED IN RESPONSE TO PLAINTIFF'S DOCUMENT REQUESTS

1. All documents or communications sufficient to show the total number of employees who work for Kalamazoo Valley Community College.

See Integrated Post-Secondary Education Data System ("IPEDS") report dated November 1, 2011, attached as Exhibit A.

2. All documents or communications sufficient to show KVCC's annual budget and the sources of funds that make up its budget, including but not limited to funding provided by the State of Michigan.

COOPER,
MARTIN
& KENNEDY
ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 Calamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453 See KVCC's 2011-12 budget for the fiscal year ending June 30, 2012, attached as Exhibit B.

 All documents or communications sufficient to show the total number of KVCC employees who are eligible to participate in group health insurance plans through KVCC.

See Exhibit A; however, this number has changed to 402 employees as of May 9, 2012.

- 4. All documents or communications sufficient to show the total number of KVCC employees who participate in group health insurance plans through KVCC.

 KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist; however, it is noted that 327 employees are enrolled in group health insurance plans through KVCC as of May 9, 2012.
- 5. All documents or communications sufficient to show the total number of individuals currently insured through the group health insurance plans made available to KVCC employees and their families.

KVCC does not have any such document in its possession, custody, or control, and no responsive documents are known to exist; however, it is noted that there are 716 individuals currently insured through group health insurance plans made available to KVCC employees and their families by KVCC as of May 9, 2012.

COOPER,
MARTIN
& KENNEDY
ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 (alamazoo, Michigan 49007 Tel: (269) 552-3400 Fay: (269) 381-5453 6. All documents or communications sufficient to show the total cost to KVCC of providing health coverage to employees and other beneficiaries for the years 2010 and 2011.

See Exhibit C.

7. All documents or communications sufficient to show KVCC's average cost for the years 2010 and 2011 of providing health insurance to (a) an employee, (b) a child, (c) a spouse, and (d) a Household Member.

See Exhibits D and E.

 All documents or communications concerning, referring or relating to KVCC's cost of providing Household Member benefits during the period in which KVCC offered them.

See Exhibit E.

9. All documents or communications sufficient to show KVCC's estimated average cost for 2012 of providing health insurance to (a) an employee, (b) a child, (c) a spouse, and (d) a Household Member.

See Exhibit F.

COOPER,
MARTIN
& KENNEDY
Attorneys at Law

259 East Michigan Avenue Suite 208 Galamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453 10. All documents or communications concerning, referring or relating to KVCC's

decision to offer Household Member benefits to KVCC employees.

See Exhibit G.

11. All documents or communications concerning, referring, or relating to the

criteria KVCC employed to determine an employee's eligibility to receive Household

Member benefits.

See Exhibit G.

12. All documents or communications concerning, referring, or relating to the

number of estimated or actual employees who were potentially eligible to receive

Household Member coverage from KVCC during the period in which KVCC offered

such coverage.

KVCC does not have any such document in its possession, custody, or control and no

responsive documents are known to exist.

13. All documents or communications sufficient to show the number of employees

who enrolled a qualifying adult to receive Household Member coverage through KVCC

during the period in which KVCC offered such coverage.

KVCC does not have any such document in its possession, custody, or control, and

no responsive documents are known to exist; however, it is noted that one employee

enrolled a qualifying adult to receive Household Member coverage through KVCC in

the time period such coverage was offered.

COOPER,
MARTIN
& KENNEDY
ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 Calamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453 14. All documents or communications sufficient to show KVCC's costs attributable

to providing Household Member coverage to its employees during the period in which

KVCC offered such coverage.

See Exhibit E. The cost attributable to provide such coverage was \$912.37, a function

of the double coverage (\$1,778.47) minus the single coverage (\$866.10).

15. All documents or communications concerning, referring, or relating to any

administrative costs KVCC incurred relating to providing Household Member

coverage, including the amount of time and money required to implement these

benefits.

KVCC does not have any such document in its possession, custody, or control, and

no responsive documents are known to exist.

16. All documents or communications concerning, referring, or relating to KVCC's

reporting of an employee's Household Member benefits as income imputed to the

employee for purposes of state and federal taxes.

See attached Exhibit H.

COOPER,
MARTIN
& KENNEDY
ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 Calamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453 17. All documents or communications concerning, referring, or relating to KVCC's decision to stop offering Household Member benefits.

KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist.

18. All documents or communications concerning, referring, or relating to the reasons KVCC decided to stop offering Household Member benefits.

See attached Exhibit I.

19. All documents or communications concerning, referring, or relating to any cost savings resulting from KVCC's decision to stop offering Household Member benefits.

KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist.

20. All documents or communications concerning, referring, or relating to any administrative costs KVCC incurred by implementing its decision to stop providing Household Member coverage, including the amount of time and money required to implement that decision.

KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist.

COOPER,
MARTIN
& KENNEDY
ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 Kalamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453

DOCUMENT REQUESTS PROVIDED SOLELY TO DR. MARILYN J. SCHLACK

21. All documents or communications concerning, referring or relating to Kalamazoo Valley Community College's decision to offer Household Member benefits to its employees.

KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist.

22. All documents or communications concerning, referring or relating to the reasons Kalamazoo Valley Community College decided to offer Household Member benefits to its employees.

KVCC does not have any such document in its possession, custody, or control and no responsive documents are known to exist.

COOPER, MARTIN & KENNEDY ATTORNEYS AT LAW

259 East Michigan Avenue Suite 208 Kalamazoo, Michigan 49007 Tel: (269) 552-3400 Fax: (269) 381-5453 Exhibit 2.D

Kalamazoo Valley Community College Household Member Program

The Household Member program is a pilot program which is effective May 1, 2011 through December 31, 2013. This program expands the eligibility criteria for enrollment in Kalamazoo Valley Community College's flexible benefits plan. Kalamazoo Valley Community College reserves the right to change the eligibility criteria or to suspend or terminate the Household Member benefit program at any time, including any coverage then being provided.

Requirements and Stipulations

Under the Household Member program, a benefits eligible Kalamazoo Valley Community College employee who does not already enroll a spouse in the health or other benefit plans may enroll one adult individual for benefit coverage but only if all of the following eligible criteria are met:

- The Kalamazoo Valley Community College employee is eligible for KVCC's benefits
- The Household Member, at the time of proposed enrollment, resides in the same residence as the benefits eligible employee and has done so for the previous 18 continuous months, other than as a tenant.
- The Household Member is not a "dependent" of the employee as defined by the IRS.
- Should a benefits eligible Kalamazoo Valley Community College employee choose to cover an eligible Household Member, and the Household Member has coverage through his/her employer, then Kalamazoo Valley Community College's health benefit plan will be secondary.
- The Household Member is not eligible for benefits through COBRA.
- Pre-tax dollars set aside through a flexible spending account cannot be used to pay the copremium for a household member(s) or the uninsured health care expenses for a household member(s).

Children of a Household Member are also eligible for this benefit until age 26, but only if the child is not eligible under another employer sponsored plan. The child need not be an IRS dependent and is eligible even if married.

Eligibility for coverage of a Household Member or of a Household Member's dependent ceases on the date that the above criteria are not met.

The following individuals are not eligible for participation in this program:

- Children of benefits eligible employees and their descendents (children, grandchildren)
- Parents of benefits eligible employees
- Parents' other descendents (siblings, nieces, nephews)
- Grandparents and their descendents (aunts, uncles, cousins)
- Renters, boarders, tenants

This program does not affect the rights of or criteria applicable to any benefits eligible employee qualifying for enrollment in Kalamazoo Valley Community College's benefit plans under any other applicable College policy. Household Member enrollment must be completed during the open enrollment period or no more than 30 days after all of the above criteria are met.

Exhibit 2.E



COBRA 2011 Kalamazoo Valley Community College

Plan:	Core Plan		
Suggested	Suggested COBRA Rates effective: 01/01/11	es effective	07/01/11
	Based on Maximum Cost	aximum Co	st
Medical/Vision/Rx	/ision/Rx	Dis	Disability
Single	\$866.10 Single	Single	\$1,273.68
Double	\$1,778.47 Double	Double	\$2,615.41
Family	\$2,198.85 Family	Family	\$3,051.31
	Dental :	Dental COBRA	
Dental	tal	Dis	Disability
Single	\$47.88 Single	Single	\$70.41
Double	\$104.97 Double	Double	\$154.37
Family	\$122.47 Family	Family	\$180.10

	Based on Maximum Cost	aximum Co	st
Medi	Medical/Vison/Rx	Dis	Disability
Single	\$ 835.78	Single	\$1,229.08
Double	\$1,710.13 Double	Double	\$2,514.90
Family	\$1,995.16 Family	Family	\$2,934.06
	Dental COBRA	COBRA	20
	Dental	Dis	Disability
Single	\$40.32 Single	Single	\$59.29
Double	\$87.96 Double	Double	\$129.35
n milit	2000		

Vison is 8.09 / 18.19 / 21.23 already added to med rates above

Exhibit 2.F



COBRA 2012 Kalamazoo Valley Community College

П	\$29.47	Family	\$25.05 Family	amily
0	\$21.50	Double	\$18.28 Double	ouble
Ø	\$11.35	Single	\$9.65 Single	ingle
THE STATE OF THE S	bility	Disability	Dental	7
T		e COBRA	Dental Core COBRA	
_	\$2,154.30	Family	\$1,831.16 Family	amily
	\$1,565.58	Double	\$1,330.74 Double	Ouble
	\$815.41	Single	\$693.10 Single	Single
	Disability	Disa	Medical/Vision/Rx	Medic
_		aximum Cost	Based on Maximum Cost	
* Of DECKER 1	01/01/02	s effective:	Suggested COBRA Rates effective: 01/01/12	Suggest
2006	元 · · · · · · · · · · · · · · · · · · ·		Core Plan	Han:

Suggested COBRA Rates effective: \$1/81/12 No Option I medical as of 2012 No Option I COBRA Dental Dental Disability Single \$8.49 Single \$9.98 Double \$15.65 Double \$18.41	\$21.47	\$18.25 Family	\$18.25	Family
No Option I medical as of 2012 No Option I medical as of 2012 Dental Option I COBRA Dental Single	\$18.4	Double	\$15.65	Double
Suggested COBRA Rates effective: 01/01/12 No Option I medical as of 2012 Dental Option I COBRA Dental Disability	\$9.9	Single	\$8.49	Single
Suggested COBRA Rates effective: 01/01/12 No Option I medical as of 2012 Dental Option I COBRA	ility	Disab	Dental	
Suggested COBRA Rates effective: 01/01/12. No Option I medical as of 2012		on I COBRA	Dental Opti	
Suggested COBRA Rates effective: 01/01/12 No Option I medical as of 2012				
Suggested COBRA Rates effective: 01/01/12	12	edical as of 20	No Option I m) (1.10°
をしていることできない。 というこう というこう こうしゅう こうしゅう こうしゅう こうしゅう こうしゅう こうしゅう こうしゅうしゅう	01/01/12	tes effective:	sted COBRA Ra	Sugges

Exhibit 2.G

Household Member Program

Scenario One

Employee's salary is equal to or greater than \$60,000. Employee's has Core coverage and the co-premium is \$28.17/pay period (pre-tax deduction).

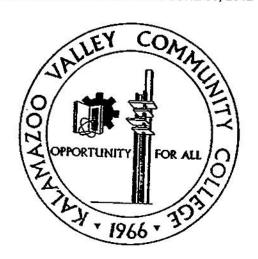
- 1. Employee adds a household member.
- 2. Employee's co-premium is \$28.17/pay period (pre-tax deduction)
- 3. Employee's co-premium for the household member is \$8.67/pay period (taxable deduction) (\$8.67 is the difference between a 2 person co-premium of \$36.84 and the single co-premium of \$28.17).
- 4. The "fair market" value of the cost of the insurance coverage will be considered taxable income to the employee. The "fair market value" is the cost of insurance to add one dependent to the plan. This amount will show as imputed income on the employee's pay check and the total amount will be added to the employee's W-2 form at year end. An employee pays taxes (FICA, State and Federal) on the value of the household member's coverage.
- 5. The calculation for #4 is as follows:
 - COBRA CORE Coverage-Single Monthly Rate-\$913.98 minus the 2% administrative fee which equates to \$18.28 = \$895.70
 - COBRA CORE Coverage-Two Person Monthly Rate-\$1,883.44 minus the 2% administrative fee which equates to \$37.67 = \$1,845.77
 - \$1,845.77 minus \$895.70 minus \$28.17 = \$921.90/monthly or \$460.95/pay period
 - \$460.95 will show as imputed income on the employee's pay check and FICA, Federal
 and State taxes will be deducted.

Exhibit 2.H

KALAMAZOO VALLEY COMMUNITY COLLEGE

2011-2012 BUDGET

FOR FISCAL YEAR ENDING JUNE 30, 2012



JUNE 14, 2011

COMPLIANCE STATEMENT SECTION 16 OF THE UNIFORM BUDGETING AND ACCOUNTING ACT

In compliance with Section 16 of the Uniform Budgeting and Account Act, amended by Public Acts 40, 41 and 42 of 1995, the Kalamazoo Valley Community College Board of Trustees published a Public Notice in the Kalamazoo Gazette.

Upon conclusion of the public hearing the Board of Trustees intends to adopt the 2011-2012 budget for all funds. The proposed budget includes the following ad valorem property tax millages:

Fund	Millage Rate	Levied On	
General Fund Auxiliary Fund/Museum	2.4089 Mills .4046 Mill	All Property All Property	
Total Operational Funds	2.8135 Mills	All Property	

The purpose for which these millages are levied are outlined in this budget document.

General Fund	Revenues
Tuition* and Fees	\$ 22,682,074
Property Tax	19,350,284
State Aid	11,522,700
Other Revenue	11,022,700
Interest on Investments	95,000
Other Taxes and Interest	210,000
Non-Credit and Academy Fees	273,200
Training/Seminar Fees	403,000
Rental Income	280,000
Miscellaneous	294,700
Transfer from Auxiliary Fund	
Transfer from Auxiliary Fund for Overhead/College Auxiliaries	247,095
Transfer from Auxiliary Fund for Student Activities/College Auxiliaries	50,000
Transfer from Auxiliary Fund/Museum Auxiliaries	103,000
Use of Board-Approved Reserves	
Total	\$ 55,511,053

^{*} Waivers are netted against Tuition

General Fund	Expenses
Salaries & Fringes Services Materials/Supplies Rent, Utilities & Insurance Other Operating Expenses Inter-fund Allocations Capital Equipment	\$ 38,543,140 2,601,870 1,461,636 2,963,305 1,887,623 (114,730) 210,376
	\$ 47,553,220
Contingency Budget Changes/Amendments Insurance and Other Benefits	855,489 6,413,300
Transfers to: Restricted Fund Designated Fund	345,000 344,044
Total	\$ 55,511,053

Designated Fund

Revenues and Expenses

Revenues	 Strategic Projects		Student Awards	1	Total Designated Fund
Tuition	\$ -	\$	7 4	\$	
Academy Fees	738,820		92		738,820
Interest on Investments	2,500		-		2,500
Transfer from General Fund	=		344,044		344,044
Use of Board-Approved Designated Funds	 2,541,937	-			2,541,937
Total	\$ 3,283,257	\$	344,044	\$	3,627,301
Expenditures					
Strategic Projects					
President Initiatives/Innovative Thinking Grants	2,849,873				2,849,873
Capital Outlay/Student Designated Technologies	433,384		<u>=</u> 9		433,384
Student Awards					
Trustee Assistance Awards	· -		60,222		60,222
Trustee Michigan National Guard Awards	_		1,000		1,000
Trustee Honors Award	-		70,000		70,000
Trustee General Awards	7 ₩ /		84,671		84,671
Trustee Athletic Awards	 121		128,151		128,151
Total	\$ 3,283,257	\$	344,044	\$	3,627,301

Auxiliary Fund

Revenues and Expenses

Revenues		Bookstore		Food Service		Museum Operations		Museum Exhibit Planning/ Collections		Total
Property Taxes	\$	_	\$	220	\$	3,250,083	\$		e	3 350 003
Other Taxes & Interest		-	*	_	Ψ	21,500	Ψ		\$	3,250,083
Sales		4,841,500		×-		21,500		-		21,500
Fees and Commissions		20,400		38,000		64,500		-		4,841,500
Interest on Investments				-		1,500		1,000		122,900
Other Revenue						1,500		1,000		2,500
Miscellaneous		-		5,007		15,000				20.007
Transfer from Museum Operations		A-0				13,000		127,000		20,007
Use of Board-Approved Auxiliary Funds	-	(268,465)		268,465				172,000		127,000 172,000
Total	\$	4,593,435	\$	311,472	\$	3,352,583	\$	300,000	\$	8,557,490
Expenses										
Operating Funds										
Cost of Sales	\$	3,464,720	\$	-	\$	_	\$	1020	\$	2 464 700
Salaries & Fringes	≥₹////	392,774	▼.:	33,650	Ψ	1,598,785	Ψ	-	Φ	3,464,720
Services		13,200		34,500		137,283		150		2,025,209 184,983
Materials/Supplies		9,160		3,200		107,552		-		10000000
Rent, Utilities & Insurance		13,800		45.000		375,430				119,912 434,230
Other Operating Expenses		7,400		-		155,479				162,879
	(Marcon - 14)	3,901,054		116,350		2,374,529		-		6,391,933
Inter-fund Allocations		34,213		2.947		58,700		_		95,860
Overhead Allocations		15,000		45,500		-		<u> </u>		60,500
Use of Facilities		45,220		140,475		-		=		185,695
Capital Outlay		20,380		5,000		63,030		-		88,410
Contingency		12,000		1,200		101,324		10 - 1		114,524
Transfers to Plant Funds										,
Replacement		87		E#8		175,000		62		175,000
Renewals & Modifications				-		175,000		99 = 0		175,000
Exhibit Renewal & Modification				2 7 8		175,000				175,000
Exhibit Planning/Collection		620		-		127,000		-		127,000
Transfers to General Fund		50,000		20		103,000		(-		153,000
Museum Exhibit Planning/Collections										
Exhibition Rentals & Associated Costs		-		(9)		-		300,000		300,000
Total		4,077,867		311,472		3,352,583		300,000		8,041,922
Excess/(Deficit) Revenues over Expenses	\$	515,568	\$		\$	-	\$	-	\$	515,568

Plant Fund		Plant Development
Revenues	College Development	Museum Development
Interest on Investments Use of Board-Approved Plant Funds	17,500 	\$ 2,400
Total	\$ 17,500	\$ 2,400
Expenses		
Capital Development Activities	\$ -	\$ -
Total		
Excess/(Deficit) Revenues over Expenditures	\$ 17,500	\$ 2,400

Plant Fund	Renewals/Modifications/Replacement-Col								
Revenues	7.	Renewals & lodifications		Property eplacement		Total			
Interest on Investments Use of Board-Approved Plant Funds	\$	10,000 1,812,540	\$	10,000 986,769	\$	20,000 2,799,309			
Total	\$	1,822,540	\$	996,769	\$	2,819,309			
Expenses									
Property Replacement Modification Projects	\$	- 1,822,540	\$	996,770	\$	996,770 1,822,540			
Total	_\$_	1,822,540	\$	996,770	\$	2,819,310			

Plant Fund

Renewals/Modifications/Replacement-Museum

Revenues		enewals & odifications	Property eplacement	Exhibit eplacement Renewal	Total
Transfer from Design. Fund/Mus. Operations Interest on Investments Use of Board-Approved Plant Funds	\$	175,000 6,000 -	\$ 175,000 6,000 -	\$ 175,000 7,800 -	\$ 525,000 19,800 -
Total	\$	181,000	\$ 181,000	\$ 182,800	\$ 544,800
Expenses Proporty Poplacement	<u> </u>				
Property Replacement Modification Projects Exhibit Replacement & Renewals	\$ 	- 129,015 -	\$ 23,950 - -	\$ ÷	\$ 23,950 129,015 -
Total		129,015	23,950	-	152,965
Excess/(Deficit) Revenues over Expenditures	\$	51,985	\$ 157,050	\$ 182,800	\$ 391,835

Exhibit 2.I

HB-4770, As Passed Senate, December 7, 2011

HOUSE BILL No. 4770

(As amended December 7, 2011)

June 16, 2011, Introduced by Reps. Agema, Crawford, Potvin, Genetski, McMillin, Lund, Lori, Haveman, Pettalia, Shirkey, Haines, Poleski, Knollenberg, O'Brien, Bumstead, Lyons, McBroom, Opsommer, Johnson, Muxlow, Shaughnessy, Outman, Damrow, Rogers, Jacobsen, Rendon, Kurtz, Hooker, Yonker, Daley, Kowall, Heise, Huuki, Scott and MacGregor and referred to the Committee on Oversight, Reform, and Ethics.

A bill to prohibit public employers from providing certain benefits to public employees.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- Sec. 1. This act shall be known and may be cited as the
 "public employee domestic partner benefit restriction act".
- 3 Sec. 2. As used in this act:

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HOUSE BILL No. 4770

- (a) "Medical benefits" means medical, optical, or dental benefits, including, but not limited to, hospital and physician services, prescription drugs, and related benefits.
- <<(b) "Public employee" means a person holding a position by appointment or employment in the government of this state; in the government of 1 or more of the political subdivisions of this state; in the public school service; in a public or special district; in the service of an authority, commission, or board of this state or a political subdivision of this state; or in any other branch of the</p>

03005'11 CJC

2

House Bill No. 4770 as amended December 7, 2011

1 public service.

2

3

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5 >>

- 6 Sec. 3. (1) A public employer shall not provide medical
- 7 benefits or other fringe benefits for an individual currently
- 8 residing in the same residence as <<a public employee, if the
- 9 individual >> is not 1 or more of the following:
- (a) Married to the employee.
- 11 (b) A dependent of the employee, as defined in the internal
- 12 revenue code of 1986.
- 13 (c) Otherwise eligible to inherit from the employee under the
- 14 laws of intestate succession in this state.
- 15 (2) A provision in a contract entered into after the effective
- 16 date of this act that conflicts with the requirements of this act
- 17 is void.
- 18 Sec. 4. If a collective bargaining agreement or other contract
- 19 that is inconsistent with section 3 is in effect for <<a public
- 20 employee >> on the effective date of this act, section 3 does
- 21 not apply to that group of employees until the collective
- 22 bargaining agreement or other contract expires or is amended,
- 23 extended, or renewed.
- Sec. 5. The requirements of section 3 apply to all public
- 25 <<employees>> to the greatest extent consistent with constitutionally
- 26 allocated powers.

Exhibit 2.J

Page 6 of 26

Kalamazoo Valley Community College (170541)

User ID: p1705411

Part C - Employees by Assigned Position - Total number of staff

Total number of staff by employment status and primary function/occupational activity

As of November 1, 2011

1, 2011					
Primary function/occupational activity <u>Primarily instruction</u>	Full- time	Full-time Py	Part- time	Part- time py	Total
Instruction/research/public service	138 0		455	360	
Primarily instruction + Instruction/research/public service <u>Primarily research</u>	138	134	0 455	360	0 593
Primarily public service	0		0		0
Primarily instruction + Instruction/research/public service + Primarily research + Primarily public service	138	134	0 455	360	0 593
Executive/administrative/managerial Other professionals (support/service)	38	36	0	000	38
Technical and paraprofessionals	99	110	155	121	254
Clerical and secretarial	6 74	5	35	.30	41
Skilled crafts	74	67 6	78 0	51	152
Service/Maintenance Grand total	42	39	38	33	7 80
	404	397	761	595	1,165

Exhibit 2.K

FRNGS - COMPILED EXPENSES - FY 10 & 11

Account	Description	FY10	FY11
76262 Cla	aims Paid	3,640,295.20	4,447,807.65
76264 M		45,096.50	43,827.50
76266 Ad	lmin Fees	58,336.12	62,721.30
76272 Ex	cess Risk	909,692.77	983,584.58
		4,653,420.59	5,537,941.03

Exhibit 2.L

Suggested COBRA Rates effective: 01/01/10 Family Double Single Family Single Double Core Plan Based on Maximum Cost \$2,198.85 Family \$1,884.73 Double \$132.03 Family \$113.17 Double \$924.04 Single Dental COBRA \$51.52 Single Kalamazoo Valley Community College 'Sicians(\$2,771.65 \$1,358.88 \$3,233.60 \$194.17 \$166,43 \$75.77 COBRA Plan: Suggested COBRA Rates effective: 01/01/10 Double Family Single Family Double Single B € Based on Maximum Cost \$2,168.02 Family \$1,858.31 Double \$114.07 Family \$97.77 Double 913.95 Single \$44.68 Single Dental COBRA

\$3,188.27

\$143.78

\$65.70

\$167.74

\$2,732.80

\$1,344.05

Vison is 8.57 / 19.29 / 22.50 already added to med rates above

Exhibit 3.A

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI DENISE MILLER and MICHELLE JOHNSON,

No. 2:12-cv-10038

HON. DAVID M. LAWSON

MAG. MICHAEL J. HLUCHANIUK

Plaintiffs,

v

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

Michael J. Steinberg (P43085) American Civil Liberties Union Fund of Michigan Attorney for Plaintiffs 2966 Woodward Avenue Detroit, MI 48201 (313) 578-6814 Amanda C. Goad American Civil Liberties Union Foundation Attorney for Plaintiffs 125 Broad Street, 18th Floor New York, NY 10004 (212) 549-2661

Margaret A. Nelson (P30342)
Mark E. Donnelly (P39281)
Attorney for Defendant
Michigan Department of Attorney General
Public Employment, Elections & Tort Division
P.O. Box 30736
Lansing, MI 48909
(517) 373-6434

John A. Knight American Civil Liberties Foundation Attorney for Plaintiffs 180 N. Michigan Ave, Ste 2300 Chicago, IL 60601 (312) 201-9740

DEFENDANT'S ANSWERS TO PLAINTIFFS' INTERROGATORIES

INTERROGATORY NO. 1:

Identify the amount of State funds spent on health insurance benefits for Insureds in the following governmental units and specify the figures, calculations, or statistics the State maintains related to these expenditures: (i) counties; (ii) cities; (iii) villages; (iv) townships; (v) K-12 school districts; (vi) intermediate school districts (ISDs) and/or regional educational service agencies (RESAs); (vii) community colleges; and (viii) authorities, including but not limited to airport, harbor, or port authorities, identifying the precise nature and form of the figures, calculations, or statistics that are maintained, the source of such information, how often this information is updated, and the individuals and/or agencies responsible for compiling and/or maintaining this information.

ANSWER: The Defendant does not know the amount of State funds spent on health insurance benefits for Insureds in the governmental units identified in this interrogatory.

INTERROGATORY NO. 2:

Identify the total number of Insureds during each of Fiscal Years 2007 to Fiscal Year 2012 who received health insurance benefits that were funded in any part by the State, and the State's annual expenditures for such benefits. Provide this information both in the aggregate as well as broken down between (i) Public Employees; and (ii) Insureds who receive coverage by virtue of their connection with a Public Employee. Additionally, provide this information as broken down between adult Insureds and child Insureds.

ANSWER: The only information responsive to this request that has been identified is contained the copies of Active Classified Employees Enrolled in SSGI – FY 07 –

FY 12, bate stamped pages SOM000002 – SOM000013; Active Unclassified Employees Enrolled in SSGI – FY 07 – FY 12, bate stamped pages SOM000014 – SOM000025, (provided in response to request to produce no. 1); in the Open Enrollment Result Reports FY 07 – FY 12, bate stamp pages SOM000938 – SOM000974, and WBN-1069 Report, bate stamped pages SOM000975 – SOM000992, (Dependent count is only available for past three (3) pay periods). The Open Enrollment reports include types of enrollment; however, specific individual counts are not available. The referenced documents are provided on the attached CD.

INTERROGATORY NO. 3:

Identify the total number of Insureds during each of Fiscal Years 2007 to Fiscal Year 2012 who received health insurance benefits that were funded in any part by the State, according to the following categories of Public Employees:

(i) classified members of the state civil service; (ii) employees of counties, cities, villages, and townships; (iii) employees of public school districts; (iv) public university employees; (v) community college employees; and (vi) all other Public Employees not covered by (i)–(v), including but not limited to unclassified members of the state civil service.

ANSWER: The only information responsive to this request that has been identified is contained in the documents entitled Active Classified Employees Enrolled in SSGI – FY 07 – FY 12, bate stamped pages SOM000002 – SOM000013, and Active

Unclassified Employees Enrolled in SSGI – FY 07 – FY 12, bate stamped pages SOM000014 – SOM000025, provided in response to request to produce no. 1.

INTERROGATORY NO. 4:

Of the aggregate State expenditures for health insurance benefits that you provided in response to Interrogatory No. 1, indicate the amount of expenditures according to the following categories of Public Employees: (i) classified members of the state civil service; (ii) employees of counties, cities, villages, and townships; (iii) employees of public school districts; (iv) public university employees; (v) community college employees; and (vi) all other Public Employees not covered by (i)—(v), including but not limited to unclassified members of the state civil service.

ANSWER: As indicated in the answer to Interrogatory I, Defendant has no information regarding public employees in the identified local government and education units. With respect to category (i) of this interrogatory and unclassified members of the state civil service, the available information responsive to this request is contained in the document entitled ER Health Cost – FY 07-11, bate stamped page SOM000001, provided in response to request to produce no. 1.

INTERROGATORY NO. 5:

Identify, by type of employer, the Public Employees to whom You contend the Act applies (e.g. employees of counties, cities, townships, villages, etc.) and indicate

the number of employees in each category whose health insurance benefits have been or will be changed as a result of P.A. 297.

ANSWER: P.A. 297 defines "Public employee" as "a person holding a position by appointment or employment in the government of this state; in the government of 1 or more of the political subdivisions of this state; in the public school service; in a public or special district; in the service of an authority, commission, or board of this state or a political subdivision of this state; or in any other branch of the public service."

The number of employees in each category whose health insurance benefits have been or will be changed as a result of P.A. 297 is not known.

INTERROGATORY NO. 6:

Identify the total number of Insureds on Public Employers' health insurance plans in Fiscal Year 2011 who lost, and/or whom You estimate will lose, eligibility for coverage as a result of P.A. 297.

ANSWER: The total number of Insureds on Public Employers' health insurance plans in Fiscal Year 2011 who lost, and/or are estimated to lose, eligibility for coverage as a result of P.A. 297 is not known.

INTERROGATORY NO. 7:

Provide the actual cost savings or increased cost to date related to the enactment of P.A. 297, as well as the projected and/or estimated total cost savings or increased costs to the State related to the enactment of P.A. 297 in (i) Fiscal Year

2012, compared to Fiscal Year 2011 and (ii) Fiscal Year 2013, compared to Fiscal Year 2012, and provide all detail and calculations related to these projections, including whether the Fiscal Year 2013 figure is compounded by the savings or increased cost in the Fiscal Year 2012 figure.

ANSWER: The actual cost savings or increased cost to date related to the enactment of P.A. 297, as well as the projected and/or estimated total cost savings or increased costs to the State related to the enactment of P.A. 297 is not known.

INTERROGATORY NO. 8:

For each of the Fiscal Years 2007–2011, provide the average amount paid by the State to insure one Insured adult, and provide any data, calculations, or information indicating that the average cost of insuring an Insured adult is less than the average cost of insuring an Other Insured Adult.

ANSWER: The only information responsive to this request that has been identified is contained the copies of Active Classified Employees Enrolled in SSGI – FY 07 – FY 12, bate stamped pages SOM000002 – SOM000013; Active Unclassified Employees Enrolled in SSGI – FY 07 – FY 12, bate stamped pages SOM000014 – SOM000025 (provided in response to request to produce no. 1); in the Open Enrollment Result Reports FY 07 – FY 12, bate stamped pages SOM000938 – SOM000974, and WBN-1069 Report, bate stamped pages SOM000975 – SOM000992 (Dependent count is only available for past three (3) pay periods). The Open Enrollment reports include types of enrollment; however, specific individual

counts are not available. The referenced documents are provided on the attached CD. Further answering, OEAI did not take effect until FY 2012.

INTERROGATORY NO. 9:

Provide all reasons why the State allows public employers to provide health insurance benefits to (i) Public Employees; (ii) spouses of Public Employees; (iii) IRS dependents of Public Employees, including children; and (iv) individuals who are otherwise eligible to inherit from Public Employees under the Michigan intestate succession laws.

ANSWER: It is not possible to know all reasons for the exceptions identified in (i)(iv) because the creation and passage of P.A. 297 was a legislative process. The
exceptions identified in P.A. 297 are a legislative policy choice. The legislative
history, committee and other materials provided with Defendant's Rule 26(a)
disclosures may provide insight into the legislature's reasoning and policy making
choices. Additional reasons include the fact health insurance is a form of
compensation for employees that can be used to attract employees. Allowing public
employers the choice of offering health insurance benefits to the identified
categories of individuals provides compensation choices based on legal interests and
legally recognized relationships; recognizes the State's constitutional obligation to
define the authority and power of its local governments and education institutions,
and to monitor costs and fiscal integrity, and where necessary assist with resolving
fiscal distress.

INTERROGATORY NO. 10:

Provide all reasons why the State provides health insurance benefits not only to its employees, but also to its employees' spouses and dependents.

ANSWER: The Michigan Civil Service Commission, a constitutional body with plenary authority to determine the compensation and benefits for state classified employees, determined that these benefits will be made available.

INTERROGATORY NO. 11:

Provide all reasons why the State, via P.A. 297, does not allow certain public employers to provide health insurance benefits to Other Insured Adults, including but not limited to any governmental interest You contend is a legal justification for P.A. 297.

ANSWER: It is not possible to know all governmental interests but certainly fewer people receiving health insurance benefits resulting in costs savings for local government and taxpayers is a government interest identified in the legislative history of P.A. 297. Upholding the intent of Const 1963, art 1, sec 25, is a governmental interest identified in the legislative history for P.A. 297. The State's interest in maintaining the fiscal integrity of its local governments, school district and educational institutions and reducing costs associated with fiscal distress are also governmental government interests served by P.A. 297. (Legislative history provided in Defendant's Rule 26(a) disclosure.)

INTERROGATORY NO. 12:

Identify the individuals in the State government, including their departments and/or agencies, who are most knowledgeable about (i) the allegations in the Complaint in this matter; (ii) Public Employee health insurance benefits; (iii) P.A. 297 and the State's purported justifications therefor; (iv) State funds provided to governmental subdivisions for Public Employee health insurance benefits.

ANSWER: (i) unknown; (ii) with respect to state classified employees - Lauri Schmidt, Director, Michigan Civil Service Commission, Employee Benefits Division; no individual in State government is currently known to have information regarding the health insurance benefits of other public employees, except what might be anecdotally known from media or other non-state government sources; (iii) unknown; and (iv) unknown.

INTERROGATORY NO. 13:

With respect to Ann Arbor Public Schools, the City of Kalamazoo, Ingham County, and Kalamazoo Valley Community College, provide the following figures: (i) the amount of State money provided to each entity in Fiscal Years 2007 to 2012 designated for health insurance benefits for Public Employees, and (ii) the amount of cost savings to the State with respect to those entities associated with the enactment of P.A. 297.

ANSWER: (i) The State did not designate any specific amount of money to these entities in Fiscal Years 2007 to 2012 for health insurance benefits; (ii) The amount

of cost savings to the State with respect to those entities associated with the enactment of P.A. 297 is not known.

INTERROGATORY NO. 14:

Identify the number of "domestic partners" who received health insurance as Other Insured Adults in FY 2011. Provide this information both in the aggregate as well as broken down between same-sex domestic partners and opposite-sex domestic partners.

ANSWER: With respect to the State of Michigan - None. OEAI benefits were not provided before FY 2012. With respect to other public employers, the information is not known.

INTERROGATORY NO. 15:

Provide the total amount of state funding that You distribute to local governmental units (including but not limited to counties, cities, villages, townships, K-12 school districts, ISDs, RESAs, community colleges, and authorities), both in the aggregate and broken down by category, including but not limited to: shared sales tax revenue, grant funding, public school funding, and community college funding.

ANSWER: See attached copy of Actual Revenue Sharing Payments FY 2007 – FY 2012, bate stamped page SOM000993, provided on the attached CD.

INTERROGATORY NO. 16:

Explain the factual basis of any denial of all or part of any request for admission served upon you by Plaintiffs.

ANSWER: Not applicable.

On Information and Belief:
David Murley
Deputy Legal Counsel
Governor Rick Snyder

	l sworn to before me, in and for the County
of	, this 17th day of
April, 2012.	
Notary Public	
My commission	n expires:

CERTIFICATE OF SERVICE

I hereby certify that on April 17, 2012, I served a copy of the above document in this matter on all counsel of record and parties *in pro per* at their last known addresses via first class mail by depositing same in a United States Post Office depository in Lansing, Michigan with first class postage fully paid.

Wendy Dodd Wendy Todd

Exhibit 3.B

From: Jan Winters
To: Schmidt, Karen
Date: 4/5/2012 10:05 AM

Subject: Fwd: OEAI Coverage - SHP PPO costs

Attachments: 8 MILLION COST ESTIMATE OF PROVIDING OTHER ELIGIBLE ADULT INSURANCE

COVERAG

E3.doc

fyi

>>> Jan Winters 6/14/2011 5:16 PM >>> Lauri-

Attached is a confidential draft document for your use in discussions with Jackie and Cindy regarding setting the FY 2012 SHP PPO rates for the groups with the OEAI coverage. As you'll see, we used the SHP PPO rates to estimate the increase which was based on both SHP PPO and HMO enrollments.

At the point in time we were reviewing these numbers, in the impacted groups there were about 8150 enrolled in employee only coverage and about 4500 enrolled in employee + child coverage. We used an estimate of 13,000 employees who would be potentially eligible to add either an OEAI or OEAI + their dependents. The other assumptions leading to the \$8 million are included in the attached document.

As mentioned above, the 13,000 estimate included both HMO and SHP PPO enrollments. Of the 13,000 or so eligible at the time, about 48% (over 6200) were in HMOs. Possible to split the \$8 million between the SHP PPO and HMO? Perhaps spread \$4 million across NEREs, UAW and SEIU Local 517M SHP current enrollment numbers? This would certainly work if by any chance the cost of the HMO riders for these groups (based on current enrollment) are in the ballpark of total HMO rate increases for these groups of around \$4 million which would be incredible since no one can tell us what it will cost :) The HMO numbers will hopefully help.

Any questions, please give me a call.

Thanks! Jan

DRAFT

THE OFFICE OF THE STATE EMPLOYER (OSE) \$8 MILLION COST ESTIMATE OTHER ELIGIBLE ADULT INDIVIDUAL (OEAI) COVERAGE

BACKGROUND INFORMATION

- Approved by the Civil Service Commission January 26, 2011 with an effective date of October 1,
 2011 covering approximately 70% of the State's workforce.
- Employees covered include approximately 3,900 in three units represented by SEIU Local 517M
 (Scientific and Engineering, Human Services Support, and Technical Units); 15,500 in two units
 represented by UAW Local 6000 (Administrative Support and Human Services Units) and 13,000
 non-exclusively represented employees (NEREs).
- Approximately 13,000 employees in the covered groups are not currently covering a spouse; it was assumed that they do not have a spouse eligible for enrollment and would therefore be eligible to enroll one OEAI and their dependent children.
- No other plans with the same eligibility criteria were identified for use in estimating participation levels and costs.

OEAI ELIGIBILITY

- To be eligible for coverage, the OEAI must meet the following criteria:
 - o Be at least 18 years of age.
 - Not be a member of the employee's immediate family as defined as employee's spouse, children, parents, grandparents or foster parents, grandchildren, parents-in-law, brothers, sisters, aunts, uncles, or cousins.
 - Have jointly shared the same regular and permanent residence for at least 12 continuous months, and continue to share a common residence with the employee other than as a tenant, boarder, renter, or employee.
- Dependent children of an OEAI may enroll under the same conditions that apply to dependent children of employees.
- To establish criteria have been met, the employer will require the employee and OEAI to sign an affidavit setting forth facts constituting that the requirements have been met.

COST ESTIMATE

- Based on State Health Plan (SHP) PPO.
- For the vast majority of employees enrolled in the SHP PPO, the State pays 90% of the total premium. The current annual State cost for the various levels of coverage is: \$6,427 for employee only coverage; \$12,854 for employee and spouse coverage; \$11,311 for employee and children coverage; and \$17,739 for full family coverage.
- A participation rate of 6% (780 employees) was assumed with 40% or 312 adding an OEAI (\$6,427 annual increase) and 60% or 468 adding an OEAI and their dependent children (\$11,312 annual increase) with first year State costs estimated at \$7.3 million.
- The State must pay the employer share of social security and Medicare based on the fair market value of the OEIA coverage. This is estimated to increase the State's first year cost to \$8 million as the fair market value is expected to be at least as high as the State's cost and likely higher.
- Adverse selection which would increase costs was not considered in providing this estimate.
- Costs of administering and enforcing the eligibility criteria were not included.
- Costs would be expected to increase in subsequent years as the program is more widely known and with broad eligibility criteria for both OEAI and dependent children coverage.

From: Jan Winters To: Date: Schmidt, Karen

Date: 4/5/2012 10:04 AM
Subject: Fwd: Updated OEAI Cost Analysis for the HMOs Attachments: Active & New Hire OEAI Rates 6.28.11 CV.xls

>>> "Tomic, Aleksandar (Detroit)" <Aleksandar.Tomic@towerswatson.com> 6/28/2011 5:05 PM >>>

Lauri, Danielle, and Jan,

As we spoke earlier today, attached is the updated version to reflect the cost for additional child(ren) based on the State's rates by tier.

You will see that the estimated total cost impact of the two pieces (SHP and the HMOs) is at \$8.5M (approximately \$216,000 higher than the prior version).

Please review and let us know if you have any questions.

Thanks.

Alek

Aleksandar Tomic Senior Consultant

Towers Watson

28411 Northwestern Hwy, Suite 500 | Southfield, MI 48034

Phone: (248)936-7613 | Fax: (248)936-7723 | Cell: (248)703-1035

aleksandar.tomic@towerswatson.com

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This e-mail has come to you from Towers Watson Delaware Inc.

State of Michigan

Summary of Additional Costs Generated by the OEAI Benefit - State Health Plan PPO

Scenario 1 - 10% Election	-	re 4/1/2010 d" Active Plan	st 4/1/2010 v Hire" Active Plan	Co	mbine Active Costs	
Annual Cost of Additional Dependents under OEAl Contracts	\$	5,042,387	\$ 553,711	\$	5,596,098	
Additional Cost due to revised OEAI Rates	\$	940,668	\$ 58,824	\$	999,492	
Total Estimated Cost of Addition of OEAI Contracts		5,983,055	\$ 612,536	\$	6,595,591	
Scenario 2 - 6% Election		re 4/1/2010 d" Active Plan	st 4/1/2010 v Hire" Active Plan	Co	mbine Active Costs	
Annual Cost of Additional Dependents under OEAl Contracts	\$	3,025,432	\$ 332,227	\$	3,357,659	
Additional Cost due to revised OEAI Rates	\$	940,668	\$ 58,824	\$	999,492	
Total Estimated Cost of Addition of OEAI Contracts	\$	3,966,100	\$ 391,051	•	4,357,151	

Notes

- Contracts eligible for OEAI benefit are those currently enrolled in an "Emp Only" or "Emp + Child" tier
- Scenario 1 assumes that approximately 650 or 10% of the employees in eligible SHP PPO tiers are assumed to add an adult dependent under OEAI
- Scenario 2 assumes that approximately 400 or 6% of the employees in eligible SHP PPO tiers are assumed to add an adult dependent under OEAI
- Both scenarios assume that 50% of added OEAI will have children and that of those with children 50% will actually enroll children.
- The additional cost for adverse selection associated with this OEAI coverage was estimated by the SHP PPO at 0.5% across all four existing tiers.
- The cost of a single OEAI was based on the average FY2012 "EE only" rate (revised by 0.5% for adverse selection) for the SHP PPO
- The cost of a child(ren) was based on the difference in the average FY2012 "Emp only" and the "Emp + Ch" rate (revised by 0.5% for adverse selection) for the SHP PPO
- Enrollment by plan for the groups eligible for the OEAI coverage was provided by the State of Michigan (as of 5/26/11)

Scenario 1 - (back up calculations)

Contracts Eligible for OEAI Election (tier 1 and tier 3)	5,904	732	6,636
Estimated % of Employees Electing OEAI benefit	10%	10%	10%
Additional Adults Covered Under OEAI	590	73	664
Number of OEAI with Children (50%)	295	37	332
Number of OEAI Electing to Cover Children (50%)	148	18	166
Monthly Cost per Adult in OEAI contracts	\$ 598.08	\$ 529.71	\$ 590.54
Monthly Cost per Child(ren) under OEAI Contracts	\$ 454.54	\$ 402.61	\$ 448.81

Scenario 2 - (back up calculations)

Scenario 2 - (back up calculations)			
Contracts Eligible for OEAI Election (tier 1 and tier 3)	5,904	732	6,636
Estimated % of Employees Electing OEAI benefit	6%	6%	6%
Additional Adults Covered Under OEAI	354	44	398
Number of OEAI with Children (50%)	177	22	199
Number of OEAI Electing to Cover Children (50%)	89	11	100
Monthly Cost per Adult in OEAI contracts	\$ 598.08	\$ 529.71	\$ 590.54
Monthly Cost per Child(ren) under OEAI Contracts	\$ 454.54	\$ 402.61	\$ 448.81

Exhibit 3.C

TAXATION OF OTHER ELIGIBLE ADULT INDIVIDUAL (OEAI) BENEFITS FOR FISCAL YEAR 2011-2012

The purpose of this document is for estimating taxes associated with adding an OEAI. Your taxation may vary as this is only a rough estimate. If you have questions about the tax implications of enrolling in OEAI benefits, you should contact an accountant or attorney for specific guidance.

In accordance with IRS regulations, State of Michigan employees are responsible for paying taxes associated with the fair-market value of enrolling an OEAI and the OEAI's dependents. Fair-market value means what you would have to pay for an individual policy for your OEAI and their dependents in the open market.

Use the charts below to determine the approximate taxable amount you will pay as a result of adding an OEAI to your health coverage. This amount will be added to your taxable gross income and associated taxes will be withheld through payroll on a biweekly basis.

Federal Tax Bracket	Plus State Tax Rate	Plus FICA Tax Rate	Total Tax Rate ²
15%	4.35%	5.65%	25%
25%	4.35%	5.65%	35%
28%	4.35%	5.65%	38%
33%	4.35%	5.65%	43%
35%	4.35%	5.65%	45%

To estimate the increase in your taxable income and the resulting increase in tax withholdings, please follow the instructions below.

Determine the Bi-weekly Taxable Amounts for health insurance based on the chart below. This will give you the approximate increase to your taxable gross income.

Health Plans	Hired Prior to 4/1/2010		Hired After 4/1/2010			
	Emp. & OEAI ³	Emp., OEAI & Dependents ³	Emp. & OEAI ³	Emp., OEAI & Dependents ³		
State Health Plan PPO	\$ 552.07	\$ 761.87	\$ 488.98	\$ 674.80		
Blue Care Network, East Michigan	\$ 535.26	\$ 738.66	\$ 473.64	\$ 653.63		
Blue Care Network, Mid-Michigan	\$ 535.74	\$-739.32	\$ 473.45	\$ 653.36		
Blue Care Network, Southeast Michigan	\$ 528.38	\$ 729.16	\$ 468.69	\$ 646.79		
Blue Care Network, Great Lakes West	\$ 550.75	\$ 760.03	\$ 485.56	\$ 670.07		
Grand Valley Health Plan	\$ 512.36	\$ 707.06	\$ 458.22	\$ 632.35		
Health Alliance Plan	\$ 487.01	\$ 672.86	\$ 414.36	\$ 572.58		
HealthPlus of Michigan	\$ 514.02	\$ 709.35	\$ 468.52	\$ 646.56		
McLaren Health Plan	\$ 442.81	\$ 611.08	\$ 366.08	\$ 505.20		
Physicians Health Plan of Mid-Michigan	\$ 520.37	\$ 718.10	\$ 380.88	\$ 525.61		
Priority Heath (East, South & West)	\$ 527.39	\$ 727.79	\$ 433.41	\$ 598.11		
Total Health Care	\$ 414.10	\$ 486.12	\$ 380.40	\$ 446.55		

Multiply your estimated Total Tax Rate by the Bi-weekly Taxable Amount to determine the approximate bi-weekly tax you will pay for health benefits for your OEAI.

Example 1: If you are an employee with State Health Plan PPO health coverage hired prior to 4/1/2010, are in a 25% Federal tax bracket, and are adding an OEAI, the following estimated tax would apply:

Health Plan Bi-Weekly Taxable Amount:	\$ 552.07		
x Total Tax Rate:	x .35		
Amount of Bi-Weekly Tax Withholding Increase	\$ 193.23		

Example 2: If you are an employee plus children with State Health Plan PPO health coverage hired after 4/1/2010, are in a 15% Federal tax bracket, and are adding an OEAI, the following estimated tax would apply:

Health Plan Bi-Weekly Taxable Amount:	\$ 488.98
x Total Tax Rate:	x .25
Amount of Bi-Weekly Tax Withholding Increase	\$ 122.25

¹ The FICA Tax Rate is comprised of 4.20% for social security and 1.45% for Medicare. The social security rate is scheduled to be restored to 6.20% in January 2012.

² If you live in a municipality with a local tax (e.g. Lansing), you will also need to consider that tax in your calculation.

³ If you or your OEAI have Medicare, contact MI HR Service Center for further information on how this may affect your taxable amounts.

Note: The purpose of this document is for estimating taxes associated with adding an OBAI. Your taxation may vary as this is only a rough estimate. If you have questions about the tax implications of enrolling in OBAI benefits, you should contact an accountant or attorney for specific guidance.

Exhibit 3.D

State of Michigan CIVIL SERVICE COMMISSION Public Meeting December 8, 2010

Present:

Thomas M. Wardrop, Interim Chair

Andrew P. Abood, Commissioner Kelly G. Keenan, Commissioner

Jeremy S. Stephens, State Personnel Director

Absent:

Sherry McMillan, Chair

1. CALL TO ORDER

The meeting of the Civil Service Commission was opened by State Personnel Director, Jeremy Stephens, at 10:46 a.m. in Conference Room A, Lower Level, Capitol Commons Center, 400 S. Pine Street, Lansing, Michigan. Director Stephens welcomed new Commissioner Charles Blockett, Jr.

Commissioner Andrew Abood motioned to nominate Commissioner Thomas (Mac) Wardrop as Interim Chair. Commissioner Charles Blockett, Jr. seconded, and the motion passed.

a. Approval of Minutes

Interim Chair Wardrop requested a motion to approve the minutes of the February 10, 2010 meeting. On motion duly made and supported, the Commission approved the minutes of the February 10, 2010 meeting.

2. AMENDMENTS TO AGENDA

3. INFORMATIONAL REPORTS

a. **Director's Report**: The Commission received the following report from State Personnel Director, Jeremy S. Stephens.

Unclassified Position Report

Since the last report, the following approvals were processed:

Department of Attorney General

The Department of Attorney General submitted the following requests to establish an unclassified position:

- 1. A request dated September 10, 2010, to serve as the Senior Policy Advisor to the Attorney General. Concurrently, the vacated Director of Executive Affairs position was abolished. The request was approved effective September 13, 2010.
- 2. A request dated September 24, 2010, to serve as a Director of Executive Affairs. Concurrently, the position of Special Assistant to the Attorney General was abolished. The request was approved effective September 20, 2010.
- 3. A request dated October 7, 2010, to serve as a Constituent Relations Analyst. Concurrently, the position of Director of Executive Affairs was abolished. The request was approved effective October 3, 2010.
- 4. A request dated October 15, 2010, to serve as a Constituent Relations for Southeast Michigan. Concurrently, the position of Constituent Relations Analyst was abolished. The request was approved effective October 3, 2010.

Department of Education

The Department of Education submitted the following requests to establish an unclassified position:

- 1. A request dated April 12, 2010, to serve as the State School Reform/Redesign Officer/Deputy Superintendent. The request was approved effective April 18, 2010.
- 2. A request dated April 29, 2010, to serve as the Education Advisor to the Office of the Superintendent. Concurrently, the position of Chief of Staff was abolished. The request was approved effective April 18, 2010.

Department of Energy, Labor, & Economic Growth

The Department of Energy, Labor, & Economic Growth submitted the following request to abolish an unclassified position:

1. A request dated June 15, 2010, to abolish the Deputy Director position. The request was approved effective July 25, 2010.

Department of Human Services

The Department of Human Services submitted the following request to establish an unclassified position:

1. A request dated March 10, 2010, to serve as the Chief Deputy Director of Regulatory and Organizational Support. Concurrently, the position of Deputy Director for Children & Audit Policy and Special Assistant was abolished. The request was approved effective March 7, 2010.

Department of Natural Resources & Environmental Quality

The Department of Natural Resources & Environmental Quality submitted the following request to establish an unclassified position:

1. A request dated May 4, 2010, to serve as the Michigan Port and Maritime Advisor. Concurrently, the position of Legislative Director was abolished. The request was approved effective April 18, 2010.

Civil Service Commission Rules require that the State Personnel Director report to the Commission on the promulgation of regulations, which are issued to further implement Commission rules.

Regulation 2.07, Drug Testing and Regulation 2.08, Alcohol Testing (effective April 4, 2010)

This regulation has been updated to reflect reference to the standards and protocols found in the U.S. Department of Transportation and U.S. Department of Health and Human Services testing regulations. Referencing current federal regulations as the governing procedures eliminates the need for frequent revisions and will also track provisions in existing collective bargaining agreements to create more consistent standards across the classified workforce.

Regulation 3.02, Student Assistants in the Classified Service (effective June 13, 2010)

This regulation has been updated to reflect the addition of a new standard to address special non-career classifications. Standard O clarifies Civil Service rule 2-1.2 which allows the establishment of special non-career classifications.

Regulation 3.04, Selection of Employees for Position Vacancies, Regulation 3.08, Establishment, Use, and Duration of Applicant Pools Maintained by Civil Service, and Regulation 3.12, Return-to-Work Appointments (effective August 22, 2010)

This regulation has been updated due to the implementation of NEOGOV. In addition, Regulation 3.03, Selection of Employees for Position Vacancies When Using a Certified Applicant Pool Maintained by Civil Service is no longer needed as the necessary language has now been incorporated into Regulation 3.04. Therefore, Regulation 3.03 has been abolished.

Regulation 5.07, Performance-Pay Programs (effective October 1, 2010)

This regulation has been updated to reflect changes to Standard C.8 with regard to fiscal year 10-11 limits which prohibit performance-pay increases to be awarded or approved by extending the ending date from the previous September 30, 2010, to December 31, 2010.

Regulation 5.09, Annual, Personal, and School and Community Participation Leave, and Regulation 5.10, Sick Leave (effective October 17, 2010)

This regulation has been updated to clarify the timing of leave balance payoffs for employees who are eligible for the incentivized retirement plan available under MCL 38.19i but instead elect a standard retirement.

Regulation 5.09, Annual, Personal, and School and Community Participation Leave (effective October 31, 2010)

This regulation has been updated to amend allow using annual leave to extend employment. The change is to address issues arising from the short notice for the election period for the incentivized retirement plan available under MCL 38.19j. The amendments will allow annual leave to be used to extend employment for three days during November and December of 2010, or longer if authorized by the State Personnel Director.

Pay-For-Performance System Review

At the February 10, 2010 Civil Service Commission meeting, the Commission approved the recommendation of the Coordinated Compensation Panel for the Commission to direct the State Personnel Director to undertake a review of the pay-for-performance system. We continue to have discussions regarding the pay-for-performance program and will provide further updates as information is collected.

b. Commission Tributes

On a motion duly made and supported the following Commission Tributes were adopted:

Kelly Keenan (Commissioner)

D. Daniel McLellan (General Counsel to the Commission)

4. UNFINISHED BUSINESS

There was no unfinished business.

5. NEW BUSINESS

a. Civil Service Commission Budget FY11

Certificate of Payroll FY 2010 and Budget FY 2011

Ms. Carol Vargovich, Director, Budget & Financial Services Division, addressed the Commission regarding the financial summary of FY10, the Certificate of Payroll and appropriation adjustments that were made for FY11 operating budget. The budget is primarily a continuation of the prior fiscal year. The budget recognizes economic adjustments for retirement, insurances, and workers' compensation and savings associated with retirements and attrition. The aggregate payroll for the classified service from October 1, 2009 through September 30, 2010, is \$4,792,516,886.

On motion duly made and supported, Resolution 2010-11 and Resolution 2010-12 were approved.

b. Travel Reimbursement Rates for FY 2010-2011 (interim approval granted)

Joyce Van Coevering with the Department of Technology, Management and Budget presented the request for approval on travel rates for FY 10-11. In a memorandum dated September 24, 2010, DTMB Director Ken Theis requested interim approval

effective October 1, 2010 for an increase in the standard mileage rate from \$0.362 to \$0.365.

On motion duly made and supported, Resolution 2010-13 was approved.

c. Proposed Rule Amendments: Rules 3-3, 8-3, & 9-1, Technical Qualification Appeals

General Counsel D. Daniel McLellan addressed the Commission regarding proposed amendments to Rules 3-3, 8-3, and 9-1 regarding Technical Qualification Appeals to streamline the technical qualification complaint process by removing two appellate steps with little remediable effect and retaining appellate review by the State Personnel Director or the Director's designee. The process under the rule change applies to all technical qualification decisions issued after December 8, 2010.

On motion duly made and supported, Resolution 2010-14, Amendments to Civil Service Rules – Technical Qualification Complaints was approved.

d. Letter of Understanding (LOU) and Secondary Agreement between MSEA and Department of Technology, Management and Budget (interim approval granted).

General Counsel D. Daniel McLellan addressed the Commission regarding the LOU and Secondary Agreement between MSEA and Department of Technology, Management and Budget which updates references in the existing secondary agreement to reflect the creation of the Department of Technology, Management and Budget.

On motion duly made and supported, the Letter of Understanding was approved.

e. Approval of CBA Amendment between OSE and MSEA regarding Contract Extension, Reopener Clause, Layoffs & Banked Leave Time, New State Health Plan, Seniority Definitions, Seniority Calculation and Seniority Reporting (interim approval granted)

General Counsel D. Daniel McLellan addressed the Commission regarding the collective bargaining agreement (CBA) between OSE and MSEA which amends and extends the primary CBA for the Labor & Trades and Safety & Regulatory Units. The agreement amends the current CBA to: 1) allow for reopened negotiations if other units agree to wage increases, 2) cap temporary layoff days, 3) authorize the new State Health Plan for new hires beginning April 1, 2010, and 4) make adjustments to seniority provisions. The agreement also provides to retain existing CBA language for one year until December 31, 2011 (non-economics); economics ending September 30, 2012. Interim approval was granted June 9, 2010.

On motion duly made and supported, Resolution 2010-015 approved the amendment, excluding the CBA extension.

On a separate motion duly made and supported, Resolution 2010-16 regarding the contract as a newly approved agreement was approved.

f. Approval of Secondary Agreement between UAW (Human Services and Administrative Support Units) and the Department of Natural Resources & Environmental Quality (DNRE) reflecting the creation of the DNRE (interim approval granted)

General Counsel D. Daniel McLellan addressed the Commission regarding the secondary agreement between OSE and UAW reflecting the creation of the Department of Natural Resources and Environment.

On motion duly made and supported, the secondary agreement between OSE and UAW was approved.

g. Approval of CBA Amendment between OSE and UAW regarding Contract Extension, Layoffs & Banked Leave Time, New State Health Plan, and other misc. (interim approval granted)

General Counsel D. Daniel McLellan addressed the Commission regarding the collective bargaining agreement (CBA) between OSE and UAW which amends and extends the primary CBA for the Human Services and Administrative Support Units. The agreement amends the current CBA to: 1) allow for fund withdrawal from the UAW training fund, 2) authorize 26 hours of banked leave time during 2010, 3) authorize the new State Health Plan for new hires beginning April 1, 2010, 4) prevents temporary layoffs during 2010, 5) address disciplinary packet handling, and 6) reduce random drug testing. The agreement also provides to retain existing CBA language for one year until December 31, 2011 (non-economics); economics ending September 30, 2012. Interim approval was granted March 23, 2010.

On motion duly made and supported, Resolution 2010-017 approved the amendment, excluding the CBA extension.

On a separate motion duly made and supported, Resolution 2010-18 regarding the contract as a newly approved agreement was approved.

h. Approval of CBA Amendment between OSE and AFSCME regarding Contract Extension, Re-open Clause, Layoffs & Banked Leave Time, New State Health Plan, and other misc. (interim approval granted)

General Counsel D. Daniel McLellan addressed the Commission regarding the collective bargaining agreement (CBA) between OSE and AFSCME which amends and extends the primary CBA for the Institutional Unit. The agreement amends the current CBA to: 1) authorize 45 hours of banked leave time during 2010, 2) authorize the new State Health Plan for new hires beginning April 1, 2010, and 3) address numerous other issues, including the disciplinary process, layoffs, drug testing, notices, compensatory time, schedules, training, and administrative leave. The agreement also provides to retain existing CBA language for one year until December 31, 2011 (non-economics); economics ending September 30, 2012. Interim approval was granted March 17, 2010.

On motion duly made and supported, Resolution 2010-019 approved the amendment, excluding the CBA extension.

On a separate motion duly made and supported, Resolution 2010-20 regarding the contract as a newly approved agreement was approved.

 Letter of Understanding between OSE & MSEA regarding Secondary Agreements Affected by Consolidation of the Department of Natural Resources and the Department of Environmental Quality under Executive Order 2009-45 (interim approval granted)

General Counsel D. Daniel McLellan addressed the Commission regarding the secondary agreement between OSE and UAW reflecting the creation of the Department of Natural Resources and Environment. Interim approval was granted March 22, 2010.

On motion duly made and supported, the secondary agreement between OSE and MSEA was approved.

j. Approval of Secondary Agreement between UAW (Human Services and Administrative Support Units) and the Department of Technology, Management and Budget

General Counsel D. Daniel McLellan addressed the Commission regarding the secondary agreement between UAW and the Department of Technology, Management and Budget (DTMB). No violations of the Commission's rules on prohibited subjects of bargaining have been identified.

On motion duly made and supported, the secondary agreement between UAW and DTMB was approved.

k. Extension of Insurance Benefits

General Counsel D. Daniel McLellan addressed the Commission regarding the request for discussion from Commissioner Abood regarding options for extending NERE dependent group insurance coverage to adult co-residents of unmarried state employees. General Counsel McLellan indicated in 2004, the Office of the State Employer (OSE) and Unions negotiated same-sex domestic partner benefits, however, in 2004, the Michigan Constitution was amended to prohibit such benefits. He indicated that universities made benefit changes to change "same sex domestic partner" to "one unrelated adult co-resident."

Director Sharon Bommarito and Chief Deputy Director Cheryl Schmittdiel, Office of the State Employer (OSE) addressed the Commission regarding Letters of Understanding submitted to modify the eligibility guidelines for the State Health Plan to allow coverage for "other eligible individuals" (OEI), between the OSE and the UAW (Administrative Support and Human Services unit), OSE and SEIU Local 517-M (Technical, Scientific and Engineering, and Human Services Support units), and AFSCME (Institutional unit). The OEI criteria are:

- At least 18 years old
- Not a relative of the state employee
- Share a residence with the state employee for 12 months (other than as tenant, renter, boarder, or employee)

Children and dependents of OEI are also covered

Ms. Bommarito reiterated that similar agreements were negotiated and ratified in primary negotiations in 2004, but were voluntarily withdrawn by the parties before consideration by the Commission following the passage of Proposal 04-2, adding Article 1, §25 to Michigan's Constitution, with the commitment that the subject would be revisited after the courts provided guidance on the interpretation of the Constitutional amendment. Ms. Bommarito indicated that these changes provided for in the Letters of Understanding are consistent with what was agreed upon in 2004 and with what has been put into place by other public employers in Michigan since that time. Director Bommarito requested the Commission to approve the Letters of Understanding and also to approve similar changes for non-exclusively represented employees.

General Counsel McLellan addressed several questions to the Commission regarding the LOUs as written which appear to allow multiple individuals to qualify as an OEI. Additionally, he indicated that standard University models limit to a single OEI and the current LOUs don't limit to one individual. Question was also raised by Counsel regarding the effective date of LOUs as Counsel believes if an immediate effective date is approved, a waiver by the legislature would be necessary since the Constitution clearly indicates that such increase in benefit provisions for state employees need to go through the normal Governor budget proposal which allows for gubernatorial legislative veto.

General Counsel McLellan also questioned the clarity of an enrollment period and premium structure as no such structure has been identified or addressed, in addition to question as to the availability of COBRA/CGIS for an OEI.

Commissioner Abood questioned Director Bommarito as to whether any changes have been made to the LOUs to address any of the concerns highlighted by Counsel. Ms. Bommarito indicated the intent was not to cover spouse and OEI and this language could be addressed.

Interim Chairman Mac Wardrop questioned Director Bommarito as to what cost estimates have been studied. Director Bommarito indicated that studies of participation rate of employees in major universities, some counties and cities have been conducted and is less on average than 1%, with a projected cost if one individual was covered at \$2.2 million, and if benefits were extended to other eligible dependents, costs are estimated at \$5.7 million. Director Bommarito further explained that funding would come from the Group Insurance Fund and that the State Budget Office has confirmed there is adequate money to cover this expense for FY11.

Thomas Brott, Labor Representative for the Michigan Association of Governmental Employees (MAGE), addressed the Commission regarding the request of the OSE and stated that MAGE is not adverse to the concept of the Benefits Plus One proposal, however, MAGE does object to the timing of OSE's proposal to expend millions of dollars by extending health care benefits to other eligible individuals, while at the same time NEREs are being denied a 3% pay increase that was negotiated in good faith. He indicated this action would only exacerbate the morale problem with state employees and that MAGE finds it reprehensible that the state would consider this type of expenditure until the NEREs are made whole for the 3%.

Representative Rick Jones, Eaton County (District 71), addressed the Commission and urged the Commission to vote no on the request by OSE, stating this would be an additional burden to the state at a time we are looking at a \$1.6 billion budget deficit.

Interim Chair Mac Wardrop motioned to table the request due to lack of clarification in the agreements. Commissioner Abood seconded. Commissioner Blockett requested the issues be quickly addressed and heard at the next meeting. The motion passed.

6. PUBLIC COMMENT

Jay Kaplan, American Civil Liberties Union of Michigan (ACLU), addressed the Commission regarding its current anti-discrimination policy (Rule 1-8). Mr. Kaplan stated the current policy prohibits discrimination in the hiring, firing, and terms and conditions of employment on the basis of religion, race, color, national origin, age, sex, sexual orientation, height, weight, marital status, partisan considerations, or a disability or genetic information that is unrelated to the person's ability to perform the duties of a particular job or position. He stated that this rule mirrors the categories in Governor Granholm's Executive Order 2008-22 regarding state employees, with the exception of the category of "gender identity and expression." He indicated that omission of "gender identity and expression" from Civil Service rules excludes transgender persons from employment protection and requests the Commission add gender identity and expression to its policy in compliance with the Executive Order.

President Ron Marabate, Association of State Employees in Management (ASEM), addressed the Commission with regard to the breaching of the 2007 Consensus Agreement which provided for a 3% increase for NEREs, and also addressed the recent legislation passed which requires all state workers to contribute 3% of their gross wages for a new retiree healthcare fund, resulting effectively a 6% wage cut for NEREs for FY11. Mr. Marabate indicated this is in addition to state employee concessions which included banked leave time, furlough days and increased healthcare costs. ASEM reiterated the Commission's agreement with the Coordinated Compensation Panel's recommendation that Pay for Performance be closely reviewed by staff and report those findings and recommendations.

ASEM requests that the Commission take a more serious look at how all state workers are treated with respect, and in a fair and equitable manner.

7. COMMISSION APPEALS

In a closed session the Commission considered 15 recommended decisions of the Employment Relations Board (ERB). Copies of the review sheets indicating the Commission's actions on these decisions are on file with the Civil Service Commission.

ADJOURNMENT

There being no further items for Commission approval or public comments to be heard, Interim Chair Wardrop adjourned the meeting at 11:58 a.m.

NOTE

Copies of any written statements, reports, or staff proposals which were presented to the Commission may be obtained by contacting the Civil Service Commission, Executive Office, Capitol Commons Center, 400 S. Pine Street, P.O. Box 30002, Lansing, Michigan, 48909, or by telephone at 517-373-3020.

I, Jeremy Stephens, State Personnel Director, hereby certify that the foregoing are the Minutes of the Civil Service Commission meeting of December 8, 2010.

State Personnel Director

Exhibit 3.E

TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

COVE		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
ОРТ	ION COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
D3ZN	- EX DN WAIVE NO\$									
•	1 Dental Waive	1,512	1,548	36	2.38 %	149	160	11	7.38 %	
	TOTAL FOR PLAN CODE:	1,512	1,548	36	2.38 %	149	160	11	7.38 %	
D4ZN	- EX/LL DN WV \$\$									
1	1 DENTAL WAIVE FL	236	234	-2	-0.85 %	186	163	-23	-12.37 %	
	TOTAL FOR PLAN CODE:	236	234	-2	-0.85 %	186	163	-23	-12.37 %	
DBEX	- STATE DENTAL									
1	I EMPLOYEE ONLY	10,019	9,889	-130	-1.30 %	1,870	1,899	29	1.55 %	
2	P EMP & SPOUSE	8,262	8,333	71	0.86 %	607	664	57	9.39 %	
3	B EMP & CHILD(REN)	<i>5,35</i> 3	5,325	-28	-0.52 %	727	753	26	3.58 %	
4	FULL FAMILY	16,517	16,532	15	0.09 %	1,308	1,391	83	6.35 %	
	TOTAL FOR PLAN CODE:	40,151	40,079	-72	-0.18 %	4,512	4,707	195	4.32 %	
DL01 -	ST DEP LIFE									
1	1500SP/1000CH	264	262	-2	-0.76 %	26	27	1	3.85 %	
2	5000SP/2500CH	613	606	-7	-1.14 %	51	54	3	5.88 %	
3	10000SP/5000CH	2,704	2,679	-25	-0.92 %	242	267	25	10.33 %	
4	25000SP/10000CH	16,081	16,278	197	1.23 %	1,164	1,224	60	5.15 %	
5	10000 CH ONLY	6,722	6,725	3	0.04 %	748	788	40	5.35 %	
	TOTAL FOR PLAN CODE:	26,384	26,550	166	0.63 %	2,231	2,360	129	5.78 %	

MBN-0098 insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Plan Code and Coverage Option with Descriptions

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TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

PLAN CODE AND DESCRIPTION COVERAGE OPTION COVERAGE DESCRIPTION		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
		BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
DLZN - DEI	PLIFE WV NO\$\$									
1	DEP LIFE WAIVE	11,769	11,785	16	0.14 %	2,740	2,840	100	3.65 %	
	TOTAL FOR PLAN CODE:	11,769	11,785	16	0.14 %	2,740	2,840	100	3.65 %	
DMEX - ST	ATE DMO									
1	EMPLOYEE ONLY	217	208	-9	-4.15 %	61	61	0	0.00 %	
2	EMP & SPOUSE	124	117	-7	-5.65 %	16	16	0	0.00 %	
3	EMP & CHILD(REN)	263	259	-4	-1.52 %	67	71	4	5.97 %	
4	FULL FAMILY	371	362	-9	-2.43 %	75	70	-5	-6.67 %	
	TOTAL FOR PLAN CODE:	975	946	-29	-2.97 %	219	218	-1	-0.46 %	
DP00 - STA	TE PREV DNTL									
1	EMPLOYEE ONLY	27	25	-2	-7.41 %	17	17	o	0.00 %	
2	EMP & SPOUSE	14	12	-2	-14.29 %	14	11	-3	-21.43 %	
3	EMP & CHILD(REN)	5	4	-1	-20.00 %	4	5	1	25.00 %	
4	FULL FAMILY	45	42	-3	-6.67 %	23	22	-1	-4.35 %	
	TOTAL FOR PLAN CODE:	91	83	-8	-8.79 %	58	55	-3	-5.17 %	

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Plan Code and Coverage Option with Descriptions

TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

PLAN CODE AND DESCRIPTION COVERAGE	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010				
	-	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT	
 OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
H2F0 - STA	TE CAT HLTH									
1	EMPLOYEE ONLY	77	79	2	2.60 %	37	36	-1	-2.70 %	
2	EMP & SPOUSE	82	79	-3	-3.66 %	27	29	2	7.41 %	
3	EMP & CHILD(REN)	6	7	1	16.67 %	1	3	2	200.00 %	
4	FULL FAMILY	156	143	-13	-8.33 %	72	69	-3	-4.17 %	
	TOTAL FOR PLAN CODE:	321	308	-13	-4.05 %	137	137	0	0.00 %	
H3ZN - EX/	JD HL WV NO\$									
1	Health Waive	1,478	1,512	34	2.30 %	150	161	11	7.33 %	
	TOTAL FOR PLAN CODE:	1,478	1,512	34	2.30 %	150	161	11	7.33 %	
H4ZN - EX/	JD HL WV \$\$									
1	HEALTH WAIVE FL	681	670	-11	-1.62 %	363	347	-16	-4.41 %	
	TOTAL FOR PLAN CODE:	681	670	-11	-1.62 %	363	347	-16	-4.41 %	

TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

	PLAN CODE AND DESCRIPTION COVERAGE OPTION COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
HAEX - ST	ATE HLTH PLAN									
1	EMPLOYEE ONLY	5,847	5,558	-289	-4.94 %	1,012	997	-15	-1.48 %	
2	EMP & SPOUSE	4,067	3,912	-155	-3.81 %	250	257	7	2.80 %	
3	EMP & CHILD(REN)	2,754	2,667	-87	-3.16 %	320	318	-2	-0.63 %	
4	FULL FAMILY	8,151	7,901	-250	-3.07 %	516	500	-16	-3.10 %	
5	OPT1 & MEDICARE	35	36	1	2.86 %	4	4	0	0.00 %	
6	OPT2 & MEDICARE	166	174	8	4.82 %	8	11	3	37.50 %	
8	OPT4 & MEDICARE	65	71	6	9.23 %	11	12	1	9.09 %	
31	EMP & OEAI (ADULT)	0	28	28	0	0	8	8	0.00 %	
32	EMP, OEAI & CHILD(REN)	0	10	10	0	0	2	2	0.00 %	
	TOTAL FOR PLAN CODE:	21,085	20,357	-728	-3.45 %	2,121	2,109	-12	-0.57 %	
HCEX - BC	N MID-MI									
1	EMPLOYEE ONLY	516	479	-37	-7.17 %	66	58	-8	-12.12 %	
2	EMP & SPOUSE	344	327	-17	-4.94 %	16	15	-1	-6.25 %	
3	EMP & CHILD(REN)	367	346	-21	-5.72 %	21	18	-3	-14.29 %	
4	FULL FAMILY	857	805	-52	-6.07 %	51	46	-5	-9.80 %	
31	EMP & OEAI (ADULT)	0	5	5	0	0	1	1	0.00 %	
32	EMP, OEAI & CHILD(REN)	0	4	4	0	0	2	2	0.00 %	
	TOTAL FOR PLAN CODE:	2,084	1,966	-118	-5.66 %	154	140	-14	-9.09 %	

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Plan Code and Coverage Option with Descriptions

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TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

COVERAGE		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
HCOP - CO	PS TRUST PLAN								
1	EMPLOYEE ONLY	115	114	-1	-0.87 %	14	14	o	0.00 %
2	EMP & SPOUSE	100	98	-2	-2.00 %	4	5	1	25.00 %
3	EMP & CHILD(REN)	104	103	-1	-0.96 %	0	0	o	0.00 %
4	FULL FAMILY	829	859	30	3.62 %	8	8	o	0.00 %
	TOTAL FOR PLAN CODE:	1,148	1,174	26	2.26 %	26	27	1	3.85 %
HD00 - BC	I-EAST MI								
1	EMPLOYEE ONLY	113	103	-10	-8.85 %	36	37	1	2.78 %
2	EMP & SPOUSE	113	104	-9	-7.96 %	7	7	0	0.00 %
3	EMP & CHILD(REN)	115	113	-2	-1.74 %	11	11	0	0.00 %
. 4	FULL FAMILY	319	299	-20	-6.27 %	26	27	1	3.85 %
	TOTAL FOR PLAN CODE:	660	619	-41	-6.21 %	80	82	2	2.50 %
HF00 - PRIC	DRITY HEALTH								
1	EMPLOYEE ONLY	622	657	35	5.63 %	173	188	15	8.67 %
2	EMP & SPOUSE	655	713	58	8.85 %	75	89	14	18.67 %
3	EMP & CHILD(REN)	555	609	54	9.73 %	103	110	7	6.80 %
4	FULL FAMILY	1,800	2,009	209	11.61 %	201	239	38	18.91 %
31	EMP & OEAI (ADULT)	0	8	8	0	0	1	1	0.00 %
32	EMP, OEAI & CHILD(REN)	0	3	3	0	0	1	1	0.00 %
	TOTAL FOR PLAN CODE:	3,632	3,999	367	10.10 %	552	628	76	13.77 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

	ODE AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
COVER/ OPTIC		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	
HF01 - I	PRIORITY HEALTH									
1	EMPLOYEE ONLY	57	74	17	29.82 %	21	22	1	4.76 %	
2	EMP & SPOUSE	40	49	9	22.50 %	9	14	5	55.56 %	
3	EMP & CHILD(REN)	46	53	7	15.22 %	4	7	3	75.00 %	
4	FULL FAMILY	136	160	24	17.65 %	21	27	6	28.57 %	
32	EMP, OEAI & CHILD(REN)	0	1	1	0	0	0	o	0.00 %	
	TOTAL FOR PLAN CODE:	279	337	58	20.79 %	55	70	15	27.27 %	
HF02 - F	PRIORITY HEALTH									
1	EMPLOYEE ONLY	58	70	12	20.69 %	9	10	1	11.11 %	
2	EMP & SPOUSE	59	53	-6	-10.17 %	4	3	-1	-25.00 %	
3	EMP & CHILD(REN)	60	62	2	3.33 %	6	7	1	16.67 %	
4	FULL FAMILY	164	177	13	7.93 %	15	14	-1	-6.67 %	
. 32	EMP, OEAI & CHILD(REN)	0	1	1	0	0	0	o	0.00 %	
	TOTAL FOR PLAN CODE:	341	363	22	6.45 %	34	34	0	0.00 %	

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Plan Code and Coverage Option with Descriptions

TODAY'S DATE: 10/24/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES BY PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

COVERAGE	AND DESCRIPTION COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	
 				DITTERCE	OHAROL	- DOL	BOL	DIFFERENCE	CHANGE	
HI00 - HEAI	TH ALLIANCE									
1	EMPLOYEE ONLY	606	602	-4	-0.66 %	178	180	2	1.12 %	-
2	EMP & SPOUSE	271	287	16	5.90 %	29	24	-5	-17.24 %	
3	EMP & CHILD(REN)	565	571	6	1.06 %	124	134	10	8.06 %	
4	FULL FAMILY	747	766	19	2.54 %	102	119	17	16.67 %	
31	EMP & OEAI (ADULT)	0	3	3	0	0	1	1	0.00 %	
32	EMP, OEAI & CHILD(REN)	0	6	6	0	0	1	1	0.00 %	
	TOTAL FOR PLAN CODE:	2,189	2,235	46	2.10 %	433	459	26	6.00 %	
HJ00 - HEA	LTH PLUS									
1	EMPLOYEE ONLY	114	112	-2	-1.75 %	28	32	4	14.29 %	
2	EMP & SPOUSE	126	126	o	0	10	11	1	10.00 %	
3	EMP & CHILD(REN)	129	142	13	10.08 %	32	28	-4	-12.50 %	
4	FULL FAMILY	349	382	33	9.46 %	17	21	4	23.53 %	
31	EMP & OEAI (ADULT)	0	1	1	0	0	0	0	0.00 %	
	TOTAL FOR PLAN CODE:	718	763	45	6.27 %	87	92	5	5.75 %	
HL00 - TOTA	AL HLTH CARE									
1	EMPLOYEE ONLY	3	4	1	33.33 %	0	1	1	0.00 %	
2	EMP & SPOUSE	1	1	o	0	0	0	0	0.00 %	
3	EMP & CHILD(REN)	2	3	1	50.00 %	0	0	0	0.00 %	
4	FULL FAMILY	2	2	o	0	0	0	0	0.00 %	
	TOTAL FOR PLAN CODE:	8	10	2	25.00 %	0	1	1	0.00 %	

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
-	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
	HMCL - MC	LAREN HEALTH									
	1	EMPLOYEE ONLY	113	135	22	19.47 %	18	23	E	07 70 0/	
	2	EMP & SPOUSE	96	106	10	10.42 %	<i>1</i> 0 5		5	27.78 %	
	3	EMP & CHILD(REN)	64	72	8		_	10	5	100.00 %	
	4	FULL FAMILY				12.50 %	7	11	4	57.14 %	
	<u>-</u>		329	368	39	11.85 %	12	20	8	66.67 %	
	31	EMP & OEAI (ADULT)	0	2	2	0	0	0	0	0.00 %	
	32	EMP, OEAI & CHILD(REN)	0	1	1	0	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	602	684	82	13.62 %	42	64	22	52.38 %	
	HMEX - PH	P-LANSING									
	1	EMPLOYEE ONLY	1,130	1,127	-3	-0.27 %	165	185	20	12.12 %	
	2	EMP & SPOUSE	952	976	24	2.52 %	<i>5</i> 3	60	7	13.21 %	
	3	EMP & CHILD(REN)	764	816	52	6.81 %	74	85	11	14.86 %	
	4	FULL FAMILY	2,553	2,703	150	5.88 %	144	168	24	16.67 %	
	31	EMP & OEAI (ADULT)	0	18	18	0	0	3	3	0.00 %	
	32	EMP, OEAI & CHILD(REN)	0	15	15	0	0	1	1	0.00 %	
		TOTAL FOR PLAN CODE:	5,399	5,655	256	4.74 %	436	502	66	15.14 %	

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COVERAGE	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
HNOO - GRE	O VALLEY HLTH								
1	EMPLOYEE ONLY	9	10	1	11.11 %	2	0	-2	-100.00 %
2	EMP & SPOUSE	9	9	0	0	0	0	0	0.00 %
3	EMP & CHILD(REN)	5	4	-1	-20.00 %	2	2	0	0.00 %
4	FULL FAMILY	10	9	-1	-10.00 %	2	2	o	0.00 %
	TOTAL FOR PLAN CODE:	33	32	-1	-3.03 %	6	4	-2	-33.33 %
HP00 - BCN	I-GR LAKES W								
1	EMPLOYEE ONLY	117	96	-21	-17.95 %	45	46	1	2,22 %
2	EMP & SPOUSE	98	77	-21	-21.43 %	17	15	-2	-11.76 %
3	EMP & CHILD(REN)	99	91	-8	-8.08 %	34	30	-4	-11.76 %
4	FULL FAMILY	266	209	-57	-21.43 %	35	30	-5	-14.29 %
	TOTAL FOR PLAN CODE:	580	473	-107	-18.45 %	131	121	-10	-7.63 %
HX00 - BCN	OF SE MI								
1	EMPLOYEE ONLY	436	417	-19	-4.36 %	128	126	-2	-1. 56 %
2	EMP & SPOUSE	220	216	-4	-1.82 %	32	38	6	18.75 %
3	EMP & CHILD(REN)	371	373	2	0.54 %	88	84	-4	-4.55 %
4	FULL FAMILY	602	613	11	1.83 %	76	79	3	3.95 %
31	EMP & OEAI (ADULT)	0	6	6	0	0	0	o	0.00 %
32	EMP, OEAI & CHILD(REN)	0	2	2	0	0	0	0	0.00 %
	TOTAL FOR PLAN CODE:	1,629	1,627	-2	-0.12 %	324	327	3	0.93 %

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COVERAGE	AND DESCRIPTION COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	
L3ZN - ST L	IFE WAIVE									
1	Life Waive	129	123	-6	-4.65 %	19	23	4	21.05 %	
	TOTAL FOR PLAN CODE:	129	123	-6	-4.65 %	19	23	4	21.05 %	
LAEX - ST 2	X LIFE APTE									
0		2,753	2,744	-9	-0.33 %	359	357	-2	-0.56 %	
	TOTAL FOR PLAN CODE:	2,753	2,744	-9	-0.33 %	359	357	-2	-0.56 %	
LJEX - CIR/	DIS/HRP 2X									
0		266	267	1	0.38 %	12	12	o	0.00 %	
	TOTAL FOR PLAN CODE:	266	267	1	0.38 %	12	12	o	0.00 %	
LRE0 - ST R	ED LIFE \$\$									
0		1,896	1,900	4	0.21 %	379	388	9	2.37 %	
	TOTAL FOR PLAN CODE:	1,896	1,900	4	0.21 %	379	388	9	2.37 %	
LREX - ST R	RED LIFE NO\$									
0		2,073	2,011	-62	-2.99 %	459	444	-15	-3.27 %	
	TOTAL FOR PLAN CODE:	2,073	2,011	-62	-2.99 %	459	444	-15	-3.27 %	
LUEX - ST 2	X EMPL LIFE									
0		38,618	38,618	0	0	4,802	4,914	112	2.33 %	
	TOTAL FOR PLAN CODE:	38,618	38,618	0	0.00 %	4,802	4,914	112	2.33 %	

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PLAN CODE	AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
V3ZN - EX/J	ID VIS WVNO\$									
1	Vision Waive	1,676	1,714	38	2.27 %	260	259	-1	-0.38 %	
	TOTAL FOR PLAN CODE:	1,676	1,714	38	2.27 %	260	259	-1	-0.38 %	
V4ZN - LSB	VIS WAIVE \$									
1	LL VISION WV FL	6	6	0	0	1	1	0	0.00 %	
	TOTAL FOR PLAN CODE:	6	6	0	0.00 %	1	1	0	0.00 %	
VBW0 - STA	ATE VISION									
1	EMPLOYEE ONLY	10,318	10,183	-135	-1.31 %	1,980	2,012	32	1.62 %	
2	EMP & SPOUSE	8,423	8,485	62	0.74 %	650	705	55	8.46 %	
3	EMP & CHILD(REN)	5,612	5,579	-33	-0.59 %	816	844	28	3.43 %	
4	FULL FAMILY	16,932	16,922	-10	-0.06 %	1,425	1,495	70	4.91 %	
	TOTAL FOR PLAN CODE:	41,285	41,169	-116	-0.28 %	4,871	5,056	185	3.80 %	
GRAND TO	TAL: DENTAL	42,965	42,890	-75	-0.17 %	5,124	5,303	179	3.49 %	
GRAND TO	TAL: DEPENDENT LIFE	38,153	38,335	182	0.48 %	4,971	5,200	229	4.61 %	
GRAND TO	TAL: EMPLOYEE LIFE	45,735	45,663	-72	-0.16 %	6,030	6,138	108	1.79 %	
GRAND TO	TAL: HEALTH	42,867	42,784	-83	-0.19 %	5,131	5,305	174	3.39 %	
GRAND TO	TAL: VISION	42,967	42,889	-78	-0.18 %	5,132	5,316	184	3.59 %	

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UNION COD	COVERA		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A02										
	D3ZN - EX	(DN WAIVE NO\$								
	1	Dental Waive	39	43	4	10.26 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	39	43	4	10.26 %	0	1	1	0.00 %
	D4ZN - EX	ULL DN WV \$\$								
	1	DENTAL WAIVE FL	23	24	1	4.35 %	6	6	o	0.00 %
		TOTAL FOR PLAN CODE:	23	24	1	4.35 %	6	6	0	0.00 %
	DBEX - ST	TATE DENTAL								
	1	EMPLOYEE ONLY	267	259	-8	-3.00 %	59	60	1	1.69 %
	2	EMP & SPOUSE	255	261	6	2.35 %	24	25	1	4.17 %
	3	EMP & CHILD(REN)	88	89	1	1.14 %	7	6	-1	-14.29 %
	4	FULL FAMILY	460	455	-5	-1.09 %	42	43	1	2.38 %
		TOTAL FOR PLAN CODE:	1,070	1,064	-6	-0.56 %	132	134	2	1.52 %
	DL01 - ST	DEP LIFE								
	1	1500SP/1000CH	7	6	-1	-14.29 %	1	1	0	0.00 %
	2	5000SP/2500CH	21	21	0	0.00 %	3	3	0	0.00 %
	3	10000SP/5000CH	90	90	0	0.00 %	6	6	0	0.00 %
	4	25000SP/10000CH	433	446	13	3.00 %	37	37	0	0.00 %
	5	10000 CH ONLY	118	117	-1	-0.85 %	8	8	0	0.00 %
		TOTAL FOR PLAN CODE:	669	680	11	1.64 %	55	55	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		· · · · · · · · · · · · · · · · · · ·		740.00		, , , , , , , , , , , , , , , , , , ,	-		. —	
A02										
	DLZN - DEF	PLIFE WV NO\$\$								
	1	DEP LIFE WAIVE	337	336	-1	-0.30 %	88	93	5	5.68 %
		TOTAL FOR PLAN CODE:	337	336	-1	-0.30 %	88	93	5	5.68 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	5	5	o	0.00 %	1	1	o	0.00 %
•	2	EMP & SPOUSE	2	2	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	5	6	1	20.00 %	0	0	0	0.00 %
	4	FULL FAMILY	5	6	1	20.00 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	17	19	2	11.76 %	5	5	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	2	2	0	0.00 %
	4	FULL FAMILY	. 3	3	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	2	2	0	0.00 %
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	5	6	1	20.00 %	2	3	1	50.00 %
	2	EMP & SPOUSE	5	4	-1	-20.00 %	2	2	0	0.00 %
	4	FULL FAMILY	5	4	-1	-20.00 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	15	14	-1	-6.67 %	6	8	2	33.33 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A02										
	H3ZN - EX/J	ID HL WV NO\$								
	1	Health Waive	37	42	5	13.51 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	37	42	5	13.51 %	0	1	1	0.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	39	42	3	7.69 %	14	14	o	0.00 %
		TOTAL FOR PLAN CODE:	39	42	3	7.69 %	14	14	o	0.00 %
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	212	199	-13	-6.13 %	46	44	-2	-4.35 %
	2	EMP & SPOUSE	167	163	-4	-2.40 %	14	14	0	0.00 %
	3	EMP & CHILD(REN)	60	59	-1	-1.67 %	7	6	-1	-14.29 %
	4	FULL FAMILY	307	297	-10	-3.26 %	21	18	-3	-14.29 %
	5	OPT1 & MEDICARE	1	1	o	0.00 %	o	0	0	0.00 %
	6	OPT2 & MEDICARE	4	4	o	0.00 %	1	1	0	0.00 %
	8	OPT4 & MEDICARE	0	1	1	0.00 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	751	724	-27	-3.60 %	90	84	-6	-6.67 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST	POST		
	COVERAGI	E	BEFORE	AFTER		PERCENT	4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT
,	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A02										
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	3	3	0	0.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	3	3	0	0.00 %	o	o	0	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	14	11	-3	-21.43 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	22	19	-3	-13.64 %	2	2	0	0.00 %
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	1	1	o	0.00 %
	3	EMP & CHILD(REN)	1 -	1	o	0.00 %	0	o	o	0.00 %
	4	FULL FAMILY	6	4	-2	-33.33 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	8	6	-2	-25.00 %	1	1	0	0.00 %
	HF00 - PRIC	PRITY HEALTH								
	1	EMPLOYEE ONLY	9	11	2	22.22 %	4	4	0	0.00 %
	2	EMP & SPOUSE	15	19	4	26.67 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	7	8	1	14.29 %	1	1	0	0.00 %
	4	FULL FAMILY	48	55	7	14.58 %	5	9	4	80.00 %
		TOTAL FOR PLAN CODE:	79	93	14	17.72 %	12	17	5	41.67 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
A02										
	HF01 - PRIC	DRITY HEALTH								
	1	EMPLOYEE ONLY	1	2	1	100.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	0	0	0	100.00 %		1	1	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	3	1	50.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	4	6	2	50.00 %	3	4	1	33.33 %
	HF02 - PRIC	DRITY HEALTH								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	2	o	0.00 %	o	0	o	0.00 %
		TOTAL FOR PLAN CODE:	3	3	0	0.00 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	13	14	1	7.69 %	2	3	1	50.00 %
	2	EMP & SPOUSE	12	13	1	8.33 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	11	10	-1	-9.09 %	0	0	0	0.00 %
	4	FULL FAMILY	17	17	o	0.00 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	53	54	1	1.89 %	5	7	2	40.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE			POST	POST		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
A02							WWat U			
	HJ00 - HEAL	LTH PLUS								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	3	3	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	6	8	2	33.33 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	10	12	2	20.00 %	1	1	0	0.00 %
	HL00 - TOTA	AL HLTH CARE								
	2	EMP & SPOUSE	1	1	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	o	0	0.00 %
	HMCL - MCL	AREN HEALTH								
	1	EMPLOYEE ONLY	1	1	o	0.00 %	0	o	0	0.00 %
	3	EMP & CHILD(REN)	1	2	1	100.00 %	o	0	o	0.00 %
	4	FULL FAMILY	5	6	1	20.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	7	9	2	28.57 %	1	1	o	0.00 %
	HMEX - PHP	-LANSING								
	1	EMPLOYEE ONLY	10	9	-1	-10.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	9	9	o	0.00 %	o	o	ō	0.00 %
	3	EMP & CHILD(REN)	5	7	2	40.00 %	1	1	o	0.00 %
	4	FULL FAMILY	34	36	2	5.88 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	58	61	3	5.17 %	3	3	o	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE			POST	POST		
	COVERAGE OPTION		BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
						¥19700				
A02										
	HN00 - GRD	VALLEY HLTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	5	5	0	0.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	6	5	-1	-16.67 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	0	0	o	0.00 %
	4	FULL FAMILY	6	5	-1	-16.67 %	3	1	-2	-66.67 %
		TOTAL FOR PLAN CODE:	19	18	-1	-5.26 %	4	2	-2	-50.00 %
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	16	16	0	0.00 %	2	3	1	50.00 %
	2	EMP & SPOUSE	10	10	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	7	7	o	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	20	19	-1	-5.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	53	52	-1	-1.89 %	5	6	1	20.00 %
	L3ZN - ST LI	FE WAIVE								
	1	Life Waive	5	5	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	1	1	o	0.00 %

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TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI COVERAGI OPTION	E AND DESCRIPTION E COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
					Dari Aliano	OTATOL	DOL	DOL	DITTERCHOL	OHARGE
A02										
	LAEX - ST 2	X LIFE APTE								
	0		102	102	o	0.00 %	21	20	-1	-4.76 %
		TOTAL FOR PLAN CODE:	102	102	0	0.00 %	21	20	-1	-4.76 %
	LRE0 - ST R	RED LIFE \$\$								
	0		59	60	1	1.69 %	9	9	0	0.00 %
		TOTAL FOR PLAN CODE:	59	60	1	1.69 %	9	9	0	0.00 %
	LREX - ST R	RED LIFE NO\$								
	o		62	60	-2	-3.23 %	9	9	0	0.00 %
		TOTAL FOR PLAN CODE:	62	60	-2	-3.23 %	9	9	o	0.00 %
	LUEX - ST 2	X EMPL LIFE								
	o		1,009	1,007	-2	-0.20 %	126	127	1	0.79 %
		TOTAL FOR PLAN CODE:	1,009	1,007	-2	-0.20 %	126	127	1	0.79 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	58	62	4	6.90 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	58	62	4	6.90 %	2	3	1	50.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST	POST		
-	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
A02										
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	279	270	-9	-3.23 %	64	66	2	3.13 %
	2	EMP & SPOUSE	258	264	6	2.33 %	24	25	1	4.17 %
	3	EMP & CHILD(REN)	93	97	4	4.30 %	7	6	-1	-14.29 %
	4	FULL FAMILY	<i>4</i> 67	462	-5	-1.07 %	48	48	0	0.00 %
		TOTAL FOR PLAN CODE:	1,097	1,093	-4	-0.36 %	143	145	2	1.40 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
		COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
									-	
A31										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	72	69	-3	-4.17 %	6	9	3	50.00 %
		TOTAL FOR PLAN CODE:	72	69	-3	-4.17 %	6	9	3	50.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	7	7	0	0.00 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	7	7	0	0.00 %	1	2	1	100.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	340	338	-2	-0.59 %	34	38	4	11.76 %
	2	EMP & SPOUSE	481	484	3	0.62 %	19	20	1	5.26 %
	3	EMP & CHILD(REN)	178	180	2	1.12 %	11	11	0	0.00 %
	4	FULL FAMILY	735	732	-3	-0.41 %	38	43	5	13.16 %
		TOTAL FOR PLAN CODE:	1,734	1,734	0	0.00 %	102	112	10	9.80 %
	DL01 - ST DE	EP LIFE								
	1	1500SP/1000CH	11	11	0	0.00 %	o	0	0	0.00 %
	2	5000SP/2500CH	28	28	0	0.00 %	3	3	0	0.00 %
	3	10000SP/5000CH	133	127	-6	-4.51 %	6	8	2	33.33 %
	4	25000SP/10000CH	789	796	7	0.89 %	30	32	2	6.67 %
	5	10000 CH ONLY	217	223	6	2.76 %	13	13	0	0.00 %
		TOTAL FOR PLAN CODE:	1,178	1,185	7	0.59 %	52	56	4	7.69 %

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FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI	E	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE		BOE	BOE	DIFFERENCE	CHANGE
A31										
	DLZN - DEP	PLIFE WV NO\$\$								
	1	DEP LIFE WAIVE	406	409	3	0.74 %	58	68	10	17.24 %
		TOTAL FOR PLAN CODE:	406	409	3	0.74 %	58	68	10	17.24 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	1	2	1	100.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	o	0	o	0.00 %
	4	FULL FAMILY	5	4	-1	-20.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	8	8	0	0.00 %	2	2	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	2	1	-1	-50.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	0	0	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	2	2	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	4	3	-1	-25.00 %	2	2	0	0.00 %
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	5	6	1	20.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	3	3	0	0.00 %
	4	FULL FAMILY	7	6	-1	-14.29 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	13	13	0	0.00 %	5	5	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COL	DE AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010		DED 0 E 11 T	POST 4/1/2010	POST 4/1/2010		
	OPTION		BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
A31										
	H3ZN - EX	/JD HL WV NO\$								
	1	Health Waive	69	66	-3	-4.35 %	6	9	3	50.00 %
		TOTAL FOR PLAN CODE:	69	66	-3	-4.35 %	6	9	3	50.00 %
	H4ZN - EX	/JD HL WV \$\$								
	1	HEALTH WAIVE FL	20	18	-2	-10.00 %	8	10	2	25.00 %
		TOTAL FOR PLAN CODE:	20	18	-2	-10.00 %	8	10	2	25.00 %
	HAEX - ST	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	203	192	-11	-5.42 %	19	18	-1	-5.26 %
	2	EMP & SPOUSE	277	260	-17	-6.14 %	6	7	1	16.67 %
	3	EMP & CHILD(REN)	115	112	-3	-2.61 %	5	5	0	0.00 %
	4	FULL FAMILY	423	399	-24	-5.67 %	18	18	0	0.00 %
	6	OPT2 & MEDICARE	4	4	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1,022	967	-55	-5.38 %	48	48	0	0.00 %
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	18	18	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	17	14	-3	-17.65 %	o	0	o	0.00 %
	3	EMP & CHILD(REN)	10	9	-1	-10.00 %	o	0	o	0.00 %
	4	FULL FAMILY	23	23	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	68	64	-4	-5.88 %	2	2	0	0.00 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A31										
	HD00 - BCN	I-EAST MI								
	1	EMPLOYEE ONLY	7	8	1	14.29 %	1	1	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	5	2	66.67 %	o	0	0	0.00 %
	4	FULL FAMILY	14	16	2	14.29 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	26	31	5	19.23 %	2	2	0	0.00 %
	HF00 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	18	21	3	16.67 %	1	1	0	0.00 %
	2	EMP & SPOUSE	41	49	8	19.51 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	15	21	6	40.00 %	1	1	o	0.00 %
	4	FULL FAMILY	62	83	21	33.87 %	6	8	2	33.33 %
		TOTAL FOR PLAN CODE:	136	174	38	27.94 %	10	12	2	20.00 %
	HF01 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	4	5	1	25.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	2	4	2	100.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	1	0	-1	-100.00 %	0	0	0	0.00 %
	4	FULL FAMILY	11	13	2	18.18 %	0	0	o	0.00 %
		TOTAL FOR PLAN CODE:	18	22	4	22.22 %	0	0	0	0.00 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
 	,								DITTENDITOR	OHAROL
A31										
	HF02 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	1	3	2	200.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	8	6	-2	-25.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	5	1	25.00 %	2	2	0	0.00 %
	4	FULL FAMILY	7	8	1	14.29 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	20	22	2	10.00 %	2	2	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	7	7	0	0.00 %	3	3	0	0.00 %
	2	EMP & SPOUSE	8	8	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	5	5	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	23	23	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	43	43	0	0.00 %	5	5	0	0.00 %
	HJ00 - HEAL	TH PLUS								
	1	EMPLOYEE ONLY	7	7	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	6	7	1	16.67 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
	4	FULL FAMILY	15	18	3	20.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	28	33	5	17.86 %	1	1	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
	COVERAGE OPTION		BEFORE	AFTER	D/800000000	PERCENT	BEFORE	AFTER		PERCENT	
	OFTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
A31											
	HL00 - TOTA	AL HLTH CARE									
	1	EMPLOYEE ONLY	0	1	1	100.00 %		0	0	0.00 %	
		TOTAL FOR PLAN CODE:		1	1	100.00 %		0	0	0.00 %	
	HMCL - MCI	HMCL - MCLAREN HEALTH									
	1	EMPLOYEE ONLY	8	9	1	12.50 %	0	0	0	0.00 %	
	2	EMP & SPOUSE	5	5	o	0.00 %	0	0	0	0.00 %	
	3	EMP & CHILD(REN)	2	2	o	0.00 %	1	1	0	0.00 %	
	4	FULL FAMILY	13	17	4	30.77 %	1	2	1	100.00 %	
		TOTAL FOR PLAN CODE:	28	33	5	17.86 %	2	3	1	50.00 %	
	HMEX - PHP	-LANSING									
	1	EMPLOYEE ONLY	49	49	0	0.00 %	5	8	3	60.00 %	
	2			53	0	0.00 %	2	3	1	50.00 %	
	3			27	3	12.50 %	1	1	0	0.00 %	
	4 FULL FAMILY		133	140	7	5.26 %	7	9	2	28.57 %	
		TOTAL FOR PLAN CODE:	259	269	10	3.86 %	15	21	6	40.00 %	

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER	DIECCDEROC	PERCENT	BEFORE	AFTER	DUTTEDTHOT	PERCENT
	OPTION	COVERAGE DESCRIPTION	BUE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A31										
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	4	3	-1	-25.00 %	3	3	o	0.00 %
	2	EMP & SPOUSE	8	7	-1	-12.50 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	3	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	24	19	-5	-20.83 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	39	32	-7	-17.95 %	4	4	0	0.00 %
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	7	7	o	0.00 %	o	0	o	0.00 %
	2	EMP & SPOUSE	8	7	-1	-12.50 %	2	2	o	0.00 %
	3	EMP & CHILD(REN)	3	4	1	33.33 %	0	0	0	0.00 %
	4	FULL FAMILY	15	18	3	20.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	33	36	3	9.09 %	3	3	0	0.00 %
	L3ZN - ST LI	FE WAIVE								
	1	Life Waive	9	10	1	11.11 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	9	10	1	11.11 %	0	0	0	0.00 %
	LAEX - ST 2	AEX - ST 2X LIFE APTE								
	0			9	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	9 9	9	0	0.00 %	o	o	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	DE AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	-	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
A31										
7										
	LRE0 - ST	RED LIFE \$\$								
	0		54	56	2	3.70 %	10	10	0	0.00 %
		TOTAL FOR PLAN CODE:	54	56	2	3.70 %	10	10	o	0.00 %
	LREX - ST	RED LIFE NO\$								
	o		58	57	-1	-1.72 %	10	10	0	0.00 %
		TOTAL FOR PLAN CODE:	58	57	-1	-1.72 %	10	10	o	0.00 %
	LUEX - ST	2X EMPL LIFE								
	0		1,759	1,763	4	0.23 %	121	126	5	4.13 %
		TOTAL FOR PLAN CODE:	1,759	1,763	4	0.23 %	121	126	5	4.13 %
	V3ZN - EX/	JD VIS WVNO\$								
	1	Vision Walve	77	74	-3	-3.90 %	8	12	4	50.00 %
		TOTAL FOR PLAN CODE:	77	74	-3	-3.90 %	8	12	4	50.00 %
	VBW0 - ST	ATE VISION								
	1	EMPLOYEE ONLY	346	345	-1	-0.29 %	34	38	4	11.76 %
	2	EMP & SPOUSE	486	489	3	0.62 %	18	20	2	11.11 %
	3	EMP & CHILD(REN)	178	179	1	0.56 %	11	11	0	0.00 %
	4	FULL FAMILY	741	737	-4	-0.54 %	42	46	4	9.52 %
		TOTAL FOR PLAN CODE:	1,751	1,750	-1	-0.06 %	105	115	10	9.52 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
C12										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	208	217	9	4.33 %	7	7	o	0.00 %
		TOTAL FOR PLAN CODE:	208	217	9	4.33 %	7	7	o	0.00 %
	D4ZN - EX/L	D4ZN - EX/LL DN WV \$\$								
	1	1 DENTAL WAIVE FL		16	3	23.08 %	9	6	-3	-33.33 %
		TOTAL FOR PLAN CODE:	13	16	3	23.08 %	9	6	-3	-33.33 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	1,387	1,369	-18	-1.30 %	92	88	-4	-4.35 %
	2	EMP & SPOUSE	1,144	1,138	-6	-0.52 %	21	22	1	4.76 %
	3	EMP & CHILD(REN)	1,078	1,064	-14	-1.30 %	30	31	1	3.33 %
	4	FULL FAMILY	3,267	3,250	-17	-0.52 %	48	54	6	12.50 %
		TOTAL FOR PLAN CODE:	6,876	6,821	-55	-0.80 %	191	195	4	2.09 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	39	39	o	0.00 %	1	1	0	0.00 %
	2	5000SP/2500CH	108	107	-1	-0.93 %	4	3	-1	-25.00 %
	3	10000SP/5000CH	391	386	-5	-1.28 %	5	7	2	40.00 %
	4	25000SP/10000CH	3,030	3,060	30	0.99 %	42	47	5	11.90 %
	5	10000 CH ONLY	1,339	1,316	-23	-1.72 %	31	32	1	3.23 %
		TOTAL FOR PLAN CODE:	4,907	4,908	1	0.02 %	83	90	7	8.43 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
C12										
	DLZN - DEF	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	1,348	1,357	9	0.67 %	128	123	- 5	-3.91 %
		TOTAL FOR PLAN CODE:	1,348	1,357	9	0.67 %	128	123	-5	-3.91 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	26	22	-4	-15.38 %	2	2	0	0.00 %
	2	EMP & SPOUSE	13	15	2	15.38 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	40	36	-4	-10.00 %	3	3	0	0.00 %
	4	FULL FAMILY	52	55	3	5.77 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	131	128	-3	-2.29 %	7	7	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	3	3	o	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	2	2	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	6	5	-1	-16.67 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	11	10	-1	-9.09 %	1	1	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE			PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		11-11-18h	<u> </u>							
C12										
	H2F0 - STAT	TE CAT HLTH								
	1	EMPLOYEE ONLY	6	6	o	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	3	4	1	33.33 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	o	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	16	15	-1	-6.25 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	26	26	o	0.00 %	2	2	0	0.00 %
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	203	215	12	5.91 %	8	9	1	12.50 %
		TOTAL FOR PLAN CODE:	203	215	12	5.91 %	8	9	1	12.50 %
	H4ZN - EX/J	H4ZN - EX/JD HL WV \$\$								
	1	HEALTH WAIVE FL	59	63	4	6.78 %	14	13	-1	-7.14 %
		TOTAL FOR PLAN CODE:	59	63	4	6.78 %	14	13	-1	-7.14 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION		PRE	PRE			POST 4/1/2010	POST		
	COVERAG		4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT	BEFORE	4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE		BOE	BOE	DIFFERENCE	CHANGE
C12										
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	959	913	-46	-4.80 %	64	62	-2	-3.13 %
	2	EMP & SPOUSE	691	652	-39	-5.64 %	11	11	0	0.00 %
	3	EMP & CHILD(REN)	694	672	-22	-3.17 %	23	19	-4	-17.39 %
	4	FULL FAMILY	2,086	2,009	-77	-3.69 %	25	19	-6	-24.00 %
	6	OPT2 & MEDICARE	3	5	2	66.67 %	0	0	0	0.00 %
	8	OPT4 & MEDICARE	4	4	0	0.00 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	4,437	4,255	-182	-4.10 %	124	112	-12	-9.68 %
	HCEX - BCN	MID-MI								
	1	EMPLOYEE ONLY	45	43	-2	-4.44 %	1	2	1	100.00 %
	2	EMP & SPOUSE	39	38	-1	-2.56 %	1	0	-1	-100.00 %
	3	EMP & CHILD(REN)	51	45	-6	-11.76 %	1	0	-1	-100.00 %
	4	FULL FAMILY	140	133	-7	-5.00 %	0	o	0	0.00 %
		TOTAL FOR PLAN CODE:	275	259	-16	-5.82 %	3	2	-1	-33.33 %
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	23	20	-3	-13.04 %	1	1	0	0.00 %
	2	EMP & SPOUSE	20	19	-1	-5.00 %	o	o	o	0.00 %
	3	EMP & CHILD(REN)	35	33	-2	-5.71 %	o	o	o	0.00 %
	4	FULL FAMILY	71	65	-6	-8.45 %	2	1	-1	-50.00 %
		TOTAL FOR PLAN CODE:	149	137	-12	-8.05 %	3	2	-1	-33.33 %

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UN	UNION CODE PLA		PLAN CODE AND DESCRIPTION						POST POST 4/1/2010 4/1/2010			
		COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	
	U - 1 1111	OI HON	COVERAGE DESCRIPTION	DOL		DIFFERENCE	ORANGE	BUE	BUE	DIFFERENCE	CHANGE	
	C12											
		HF00 - PRIC	DRITY HEALTH									
		1	EMPLOYEE ONLY	110	111	1	0.91 %	4	4	0	0.00 %	
		2	EMP & SPOUSE	112	116	4	3.57 %	0	0	0	0.00 %	
		3	EMP & CHILD(REN)	124	129	5	4.03 %	4	6	2	50.00 %	
		4	FULL FAMILY	416	466	50	12.02 %	3	6	3	100.00 %	
			TOTAL FOR PLAN CODE:	762	822	60	7.87 %	11	16	5	45.45 %	
		HF01 - PRIC	ORITY HEALTH									
		1	EMPLOYEE ONLY	9	16	7	77.78 %	1	1	0	0.00 %	
		2	EMP & SPOUSE	8	10	2	25.00 %	3	3	0	0.00 %	
		3	EMP & CHILD(REN)	16	20	4	25.00 %	1	1	0	0.00 %	
		4	FULL FAMILY	39	50	11	28.21 %	5	6	1	20.00 %	
			TOTAL FOR PLAN CODE:	72	96	24	33.33 %	10	11	1	10.00 %	
		HF02 - PRIC	ORITY HEALTH									
		1	EMPLOYEE ONLY	14	19	5	35.71 %	o	0	o	0.00 %	
		2	EMP & SPOUSE	21	18	-3	-14.29 %	o	0	0	0.00 %	
		3	EMP & CHILD(REN)	26	26	0	0.00 %	o	0	0	0.00 %	
		4	FULL FAMILY	69	79	10	14.49 %	2	2	0	0.00 %	
			TOTAL FOR PLAN CODE:	130	142	12	9.23 %	2	2	0	0.00 %	

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION PRE PRE 4/1/2010 4/1/2010		POST 4/1/2010	POST 4/1/2010						
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	BILLEDENCE	PERCENT CHANGE	BEFORE	AFTER	DIFFEDENCE	PERCENT
	OFTION	COVERAGE DESCRIPTION	BUE	BUE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
C12										
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	54	51	-3	-5.56 %	10	10	0	0.00 %
	2	EMP & SPOUSE	13	14	1	7.69 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	59	60	1	1.69 %	5	7	2	40.00 %
	4	FULL FAMILY	81	84	3	3.70 %	3	4	1	33.33 %
		TOTAL FOR PLAN CODE:	207	209	2	0.97 %	20	23	3	15.00 %
	HJ00 - HEA	LTH PLUS								
	1	EMPLOYEE ONLY	19	18	-1	-5.26 %	1	0	-1	-100.00 %
	2	EMP & SPOUSE	21	18	-3	-14.29 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	26	33	7	26.92 %	o	. 0	0	0.00 %
	4	FULL FAMILY	79	85	6	7.59 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	145	154	9	6.21 %	1	0	-1	-100.00 %
	HMCL - MCI	LAREN HEALTH							*	
	1	EMPLOYEE ONLY	3	6	3	100.00 %	0	1	1	0.00 %
	2	EMP & SPOUSE	7	10	3	42.86 %	0	1	1	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	0	0	0	0.00 %
	4	FULL FAMILY	16	21	5	31.25 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	28	40	12	42.86 %	o	3	3	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
***************************************	UPTION	COVERAGE DESCRIPTION	BUE	BUE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	CHARGE
G12										
	HMEX - PHE	P-LANSING								
	1	EMPLOYEE ONLY	66	68	2	3.03 %	0	1	1	0.00 %
	2	EMP & SPOUSE	59	55	-4	-6.78 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	76	87	11	14.47 %	0	1	1	0.00 %
	4	FULL FAMILY	304	332	28	9.21 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	505	542	37	7.33 %	1	4	3	300.00 %
	HN00 - GRD	VALLEY HLTH								
	1	EMPLOYEE ONLY	1	1	o	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	o	0	o	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	6	6	o	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	3	2	-1	-33.33 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	6	7	1	16.67 %	o	0	0	0.00 %
	4	FULL FAMILY	24	20	-4	-16.67 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	39	35	-4	-10.26 %	2	2	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		DED.CE.17	POST 4/1/2010	POST 4/1/2010		
, mp	OPTION	* = ·	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
C12										
	HX00 - BCN	I OF SE MI								
	1	EMPLOYEE ONLY	48	43	-5	-10.42 %	7	6	-1	-14.29 %
	2	EMP & SPOUSE	15	14	-1	-6.67 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	48	47	-1	-2.08 %	2	2	0	0.00 %
	4	FULL FAMILY	64	66	2	3.13 %	3	4	1	33.33 %
		TOTAL FOR PLAN CODE:	175	170	-5	-2.86 %	14	15	1	7.14 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Walve	42	42	o	0.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	42	42	0	0.00 %	3	3	0	0.00 %
	LRE0 - ST R	RED LIFE \$\$								
	o		202	199	-3	-1.49 %	9	9	o	0.00 %
		TOTAL FOR PLAN CODE:	202	199	-3	-1.49 %	9	9	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	o		207	200	-7	-3.38 %	11	9	-2	-18.18 %
		TOTAL FOR PLAN CODE:	207	200	-7	-3.38 %	11	9	-2	-18.18 %
	LUEX - ST 2	X EMPL LIFE								
	o		6,975	6,940	-35	-0.50 %	204	204	0	0.00 %
		TOTAL FOR PLAN CODE:	6,975	6,940	-35	-0.50 %	204	204	o	0.00 %

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UNION CODE	PLAN COD	PLAN CODE AND DESCRIPTION		PRE 4/1/2010			POST 4/1/2010	POST		
	COVERAGI OPTION	E COVERAGE DESCRIPTION	4/1/2010 BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
C12										
	V3ZN - EX/J	ID VIS WVNO\$								
	1	Vision Waive	215	227	12	5.58 %	15	15	0	0.00 %
		TOTAL FOR PLAN CODE:	215	227	12	5.58 %	15	15	0	0.00 %
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	1,416	1,392	-24	-1.69 %	96	90	-6	-6.25 %
	2	EMP & SPOUSE	1,163	1,159	-4	-0.34 %	21	22	1	4.76 %
•	3	EMP & CHILD(REN)	1,121	1,107	-14	-1.25 %	32	33	1	3.13 %
	4	FULL FAMILY	3,319	3,302	-17	-0.51 %	51	56	5	9.80 %
		TOTAL FOR PLAN CODE:	7,019	6,960	-59	-0.84 %	200	201	1	0.50 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
E42										
E42										
	D3ZN - EX I	DN WAIVE NO\$								
	1	Dental Waive	21	21	0	0.00 %	7	7	o	0.00 %
		TOTAL FOR PLAN CODE:	21	21	0	0.00 %	7	7	o	0.00 %
	D4ZN - EX/I	LL DN WV \$\$								
	1	DENTAL WAIVE FL	4	5	1	25.00 %	4	3	-1	-25.00 %
		TOTAL FOR PLAN CODE:	4	5	1	25.00 %	4	3	-1	-25.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	301	290	-11	-3.65 %	48	48	0	0.00 %
	2	EMP & SPOUSE	149	151	2	1.34 %	8	9	1	12.50 %
	3	EMP & CHILD(REN)	130	132	2	1.54 %	13	16	3	23.08 %
	4	FULL FAMILY	189	189	0	0.00 %	19	19	0	0.00 %
		TOTAL FOR PLAN CODE:	769	762	-7	-0.91 %	88	92	4	4.55 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	3	3	0	0.00 %	o	0	o	0.00 %
	2	5000SP/2500CH	9	9	o	0.00 %	3	3	0	0.00 %
	3	10000SP/5000CH	33	33	o	0.00 %	4	5	1	25.00 %
	4	25000SP/10000CH	237	240	3	1.27 %	13	14	1	7.69 %
	5	10000 CH ONLY	133	132	-1	-0.75 %	11	11	0	0.00 %
		TOTAL FOR PLAN CODE:	415	417	2	0.48 %	31	33	2	6.45 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
740										
E42										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	339	333	-6	-1.77 %	72	74	2	2.78 %
		TOTAL FOR PLAN CODE:	339	333	-6	-1.77 %	72	74	2	2.78 %
	DMEX - STA	TE DMO								
	1	EMPLOYEE ONLY	8	8	0	0.00 %	3	3	0	0.00 %
	2	EMP & SPOUSE	7	6	-1	-14.29 %	o	0	o	0.00 %
	3	EMP & CHILD(REN)	10	8	-2	-20.00 %	1	1	0	0.00 %
	4	FULL FAMILY	14	13	-1	-7.14 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	39	35	-4	-10.26 %	5	5	0	0.00 %
	DP00 - STAT	E PREV DNTL								
	1	EMPLOYEE ONLY	0	0	0	0.00 %	2	1	-1	-50.00 %
	3	EMP & CHILD(REN)	o	0	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	4	3	300.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	4	3	300.00 %	3	2	-1	-33.33 %
	H2F0 - STAT	E CAT HLTH								
	1	EMPLOYEE ONLY	2	2	o	0.00 %	5	4	-1	-20.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	1	0	-1	-100.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	4	-1	-20.00 %	6	5	-1	-16.67 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
E42										
	H3ZN - EX/	ID HL WV NO\$								
	1	Health Waive	22	22	0	0.00 %	7	7	0	0.00 %
		TOTAL FOR PLAN CODE:	22	22	0	0.00 %	7	7	0	0.00 %
	H4ZN - EX/	JD HL WV \$\$								
	1	HEALTH WAIVE FL	16	14	-2	-12.50 %	9	8	-1	-11.11 %
		TOTAL FOR PLAN CODE:	16	14	-2	-12.50 %	9	8	-1	-11.11 %
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	193	184	-9	-4.66 %	30	29	-1	-3.33 %
	2	EMP & SPOUSE	84	87	3	3.57 %	4	4	0	0.00 %
	3	EMP & CHILD(REN)	82	81	-1	-1.22 %	6	9	3	50.00 %
	4	FULL FAMILY	107	103	-4	-3.74 %	6	6	0	0.00 %
	5	OPT1 & MEDICARE	3	3	0	0.00 %	0	0	0	0.00 %
	6	OPT2 & MEDICARE	4	4	0	0.00 %	0	0	0	0.00 %
	8	OPT4 & MEDICARE	2	3	1	50.00 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	475	466	-9	-1.89 %	46	48	2	4.35 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	COVERAGE		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
E42										
	HCEX - BCN	I MID-MI								
	1	EMPLOYEE ONLY	4	4	0	0.00 %	3	2	-1	-33.33 %
	2	EMP & SPOUSE	1	1	0	0.00 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	2	1	-1	-50.00 %	2	3	1	50.00 %
	4	FULL FAMILY	3	3	0	0.00 %	3	3	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	10	10	0	0.00 %	10	10	0	0.00 %
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	5	5	0	0.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	3	-1	-25.00 %	0	0	0	0.00 %
	4	FULL FAMILY	5	4	-1	-20.00 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	16	14	-2	-12.50 %	2	3	1	50.00 %
	HF00 - PRIO	RITY HEALTH								
	1	EMPLOYEE ONLY	24	20	-4	-16.67 %	0	1	1	0.00 %
	2	EMP & SPOUSE	14	14	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	17	18	1	5.88 %	2	1	-1	-50.00 %
	4	FULL FAMILY	46	51	5	10.87 %	1	2	1	100.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	101	104	3	2.97 %	3	4	1	33.33 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
			***************************************				-		· · · · · · · · · · · · · · · · · · ·	
E42										
	HF01 - PRIC	DRITY HEALTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	2	1	100.00 %	1	1	o	0.00 %
	4	FULL FAMILY	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	4	2	100.00 %	1	1	0	0.00 %
	HF02 - PRIC	DRITY HEALTH								
	4	FULL FAMILY	1	1	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	24	24	o	0.00 %	5	5	0	0.00 %
	2	EMP & SPOUSE	9	9	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	19	19	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	10	10	0	0.00 %	3	1	-2	-66.67 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	62	63	1	1.61 %	9	7	-2	-22.22 %

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UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION		BEFORE	AFTER	DIFFERENCE	PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
E42										
	HJ00 - HEA	LTH PLUS				·				
	1	EMPLOYEE ONLY	4	3	-1	-25.00 %	o	0	o	0.00 %
	2	EMP & SPOUSE	2	2	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	8	9	1	12.50 %	0	0	0	0.00 %
	4	FULL FAMILY	10	13	3	30.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	24	27	3	12.50 %	1	1	0	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	o	0	o	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	9	9	0	0.00 %	1	1	0	0.00 %
	HMEX - PHP	P-LANSING								
	1	EMPLOYEE ONLY	9	9	o	0.00 %	7	7	0	0.00 %
	2	EMP & SPOUSE	6	7	1	16.67 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	6	6	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	10	11	1	10.00 %	1	1	0	0.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	31	34	3	9.68 %	9	9	0	0.00 %

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UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST	POST		
	COVERAGE OPTION	-	BEFORE	AFTER		PERCENT	4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT
	OPHON	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
E42										
	HN00 - GRD	VALLEY HLTH								
	1	EMPLOYEE ONLY	1	1	o	0.00 %	0	0	o	0.00 %
	3	EMP & CHILD(REN)	1	1	• 0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	o	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	1	1	o	0.00 %
	HP00 - BCN-	GR LAKES W								•
	1	EMPLOYEE ONLY	3	3	0	0.00 %	o	0	o	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	0	1	1	0.00 %
	4	FULL FAMILY	5	3	-2	-40.00 %	0	0	o	0.00 %
		TOTAL FOR PLAN CODE:	11	9	-2	-18.18 %	0	1	1	0.00 %
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	16	13	-3	-18.75 %	1	2	1	100.00 %
	2	EMP & SPOUSE	4	4	o	0.00 %	o	0	o	0.00 %
	3	EMP & CHILD(REN)	11	13	2	18.18 %	1	1	0	0.00 %
	4	FULL FAMILY	11	11	0	0.00 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	42	42	0	0.00 %	2	3	1	50.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		TO THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRES							_	
E42										
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	2	1	-1	-50.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	1	-1	-50.00 %	0	0	0	0.00 %
	LRE0 - ST R	ED LIFE \$\$								
	0		42	41	-1	-2.38 %	7	7	0	0.00 %
		TOTAL FOR PLAN CODE:	42	41	-1	-2.38 %	7	7	0	0.00 %
·	LREX - ST R	RED LIFE NO\$								
	Ō		44	41	-3	-6.82 %	7	7	0	0.00 %
		TOTAL FOR PLAN CODE:	44	41	-3	-6.82 %	7	7	0	0.00 %
	LUEX - ST 2	X EMPL LIFE								
	o		785	782	-3	-0.38 %	110	107	-3	-2.73 %
		TOTAL FOR PLAN CODE:	785	782	-3	-0.38 %	110	107	-3	-2.73 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	25	25	o	0.00 %	9	8	-1	-11.11 %
		TOTAL FOR PLAN CODE:	25	25	0	0.00 %	9	8	-1	-11.11 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
E42										
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	307	297	-10	-3.26 %	54	53	-1	-1.85 %
	2	EMP & SPOUSE	157	159	2	1.27 %	7	8	1	14.29 %
	3	EMP & CHILD(REN)	139	140	1	0.72 %	15	18	3	20.00 %
	4	FULL FAMILY	208	208	0	0.00 %	21	21	0	0.00 %
		TOTAL FOR PLAN CODE:	811	804	-7	-0.86 %	97	100	3	3.09 %

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UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
		COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE		BOE	BOE	DIFFERENCE	CHANGE
H21										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	66	69	3	4.55 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	66	69	3	4.55 %	3	3	0	0.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	11	9	-2	-18.18 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	11	9	-2	-18.18 %	4	4	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	424	414	-10	-2.36 %	32	35	3	9.38 %
	2	EMP & SPOUSE	361	373	12	3.32 %	7	8	1	14.29 %
	3	EMP & CHILD(REN)	114	107	-7	-6.14 %	3	3	0	0.00 %
	4	FULL FAMILY	943	947	4	0.42 %	24	25	1	4.17 %
		TOTAL FOR PLAN CODE:	1,842	1,841	-1	-0.05 %	66	71	5	7.58 %
	DL01 - ST DI	EP LIFE								
	1	1500SP/1000CH	19	18	-1	-5.26 %	0	0	0	0.00 %
	2	5000SP/2500CH	42	43	1	2.38 %	1	1	0	0.00 %
	3	10000SP/5000CH	168	166	-2	-1.19 %	5	5	0	0.00 %
	4	25000SP/10000CH	613	617	4	0.65 %	17	18	1	5.88 %
	5	10000 CH ONLY	206	202	-4	-1.94 %	5	6	1	20.00 %
		TOTAL FOR PLAN CODE:	1,048	1,046	-2	-0.19 %	28	30	2	7.14 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST	POST		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
									DII I DIVERSE	OHANOE
H21										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	733	734	1	0.14 %	52	54	2	3.85 %
		TOTAL FOR PLAN CODE:	733	734	1	0.14 %	52	54	2	3.85 %
	DMEX - STA	TE DMO								
	1	EMPLOYEE ONLY	9	8	-1	-11.11 %	3	2	-1	-33.33 %
	2	EMP & SPOUSE	4	3	-1	-25.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	2	0	-2	-100.00 %	1	1	0	0.00 %
	4	FULL FAMILY	21	16	-5	-23.81 %	o	0	o	0.00 %
		TOTAL FOR PLAN CODE:	36	27	-9	-25.00 %	4	3	-1	-25.00 %
	DP00 - STAT	TE PREV DNTL								
	1	EMPLOYEE ONLY	1	1	o	0.00 %	o	1	1	0.00 %
	2	EMP & SPOUSE	0	0	o	0.00 %	1	o	-1	-100.00 %
	4	FULL FAMILY	3	3	o	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	4	4	0	0.00 %	1	1	0	0.00 %
	H2F0 - STAT	E CAT HLTH								
	1	EMPLOYEE ONLY	2	4	2	100.00 %	0	1	1	0.00 %
	2	EMP & SPOUSE	4	3	-1	-25.00 %	1	1	0	0.00 %
	4	FULL FAMILY	9	9	o	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	15	16	1	6.67 %	3	4	1	33.33 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI	• •	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
men	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
H21										
	H3ZN - EX/J	ID HL WV NO\$								
	1	Health Waive	60	61	1	1.67 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	60	6 <i>1</i>	1	1.67 %	4	4	0	0.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	35	35	0	0.00 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	35	35	0	0.00 %	6	6	0	0.00 %
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	249	234	-15	-6.02 %	20	23	3	15.00 %
	2	EMP & SPOUSE	191	190	-1	-0.52 %	4	4	0	0.00 %
	3	EMP & CHILD(REN)	50	43	-7	-14.00 %	3	3	0	0.00 %
	4	FULL FAMILY	447	429	-18	-4.03 %	11	10	-1	-9.09 %
	5	OPT1 & MEDICARE	2	2	o	0.00 %	0	0	0	0.00 %
	6 ,	OPT2 & MEDICARE	6	6	o	0.00 %	0	0	0	0.00 %
	8	OPT4 & MEDICARE	4	5	1	25.00 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	2	2	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	1	' 1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	949	912	-37	-3.90 %	38	40	2	5.26 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
			,		•		-			~
H21										
	HCEX - BCN	MID-MI								
	1	EMPLOYEE ONLY	33	26	-7	-21.21 %	1	0	-1	-100.00 %
	2	EMP & SPOUSE	18	16	-2	-11.11 %	0	0	o	0.00 %
	3	EMP & CHILD(REN)	5	4	-1	-20.00 %	o	0	0	0.00 %
	4	FULL FAMILY	60	56	-4	-6.67 %	3	2	-1	-33.33 %
		TOTAL FOR PLAN CODE:	116	102	-14	-12.07 %	4	2	-2	-50.00 %
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	4	4	o	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	5	3	-2	-40.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	13	13	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	24	22	-2	-8.33 %	1	1	0	0.00 %
	HF00 - PRIO	RITY HEALTH								
	1	EMPLOYEE ONLY	25	29	4	16.00 %	3	3	0	0.00 %
	2	EMP & SPOUSE	23	26	3	13.04 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	13	15	2	15.38 %	0	0	0	0.00 %
	4	FULL FAMILY	112	124	12	10.71 %	3	5	2	66.67 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %	-	0	0	0.00 %
		TOTAL FOR PLAN CODE:	173	195	22	12.72 %	8	10	2	25.00 %

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	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		And Annual Control of the Control of								
H21										
	HF01 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
	4	FULL FAMILY	6	6	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	8	9	1	12.50 %	0	0	0	0.00 %
	HF02 - PRIC	DRITY HEALTH								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	5	5	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	8	8	0	0.00 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	8	8	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	6	7	1	16.67 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	3	-1	-25.00 %	0	0	0	0.00 %
	4	FULL FAMILY	19	21	2	10.53 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	37	39	2	5.41 %	1	1	o	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER	DIESERPLIAN	PERCENT	BEFORE	AFTER	DIFFERENCE	PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
H21										
	HJ00 - HEA	LTH PLUS								
	1	EMPLOYEE ONLY	3	2	-1	-33.33 %	o	0	0	0.00 %
	2	EMP & SPOUSE	1	2	1	100.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	o	1	1	100.00 %		0	0	0.00 %
	4	FULL FAMILY	10	10	0	0.00 %	1	0	-1	-100.00 %
		TOTAL FOR PLAN CODE:	14	15	1	7.14 %	1	0	-1	-100.00 %
	HL00 - TOTA	AL HLTH CARE								
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	11	13	2	18.18 %	2	2	0	0.00 %
	2	EMP & SPOUSE	12	16	4	33.33 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	9	9	0	0.00 %	2	2	0	0.00 %
	4	FULL FAMILY	46	48	2	4.35 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	78	87	9	11.54 %	4	4	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER	DIFFERENCE	PERCENT	BEFORE	AFTER	DIFFEDENCE	PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
H21										
	HMEX - PH	P-LANSING								
	1	EMPLOYEE ONLY	74	77	3	4.05 %	4	5	1	25.00 %
	2	EMP & SPOUSE	42	43	1	2.38 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	29	29	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	183	193	10	5.46 %	1	2	1	100.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	328	344	16	4.88 %	7	9	2	28.57 %
	HN00 - GRD	VALLEY HLTH								
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	1	-1	-50.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	3	2	-1	-33.33 %	0	0	0	0.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	7	5	-2	-28.57 %	2	1	-1	-50.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	4	3	-1	-25.00 %	o	0	0	0.00 %
	4	FULL FAMILY	16	8	-8	-50.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	28	17	-11	-39.29 %	3	2	-1	-33.33 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENÇE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE

H21										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	11	11	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	11	12	1	9.09 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	8	7	-1	-12.50 %	o	0	0	0.00 %
	4	FULL FAMILY	51	52	1	1.96 %	o	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	81	83	2	2.47 %	0	0	0	0.00 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	4	5	1	25.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	4	5	1	25.00 %	0	0	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	0 .		84	84	0	0.00 %	4	4	o	0.00 %
		TOTAL FOR PLAN CODE:	84	84	0	0.00 %	4	4	0	0.00 %
	LRE0 - ST R	ED LIFE \$\$								
	0		124	124	0	0.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	124	124	0	0.00 %	3	3	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
								,	•	110
H21										
	LREX - ST F	RED LIFE NO\$								
	o		130	124	-6	-4.62 %	4	3	-1	-25.00 %
		TOTAL FOR PLAN CODE:	130	124	-6	-4.62 %	4	3	-1	-25.00 %
	LUEX - ST 2	X EMPL LIFE								
	o		1,753	1,750	-3	-0.17 %	76	79	3	3.95 %
		TOTAL FOR PLAN CODE:	1,753	1,750	-3	-0.17 %	76	79	3	3.95 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	69	69	0	0.00 %	7	7	0	0.00 %
		TOTAL FOR PLAN CODE:	69	69	0	0.00 %	7	7	0	0.00 %
	VBW0 - STA	TE VISION					-			
	1	EMPLOYEE ONLY	436	426	-10	-2.29 %	38	40	2	5.26 %
	2	EMP & SPOUSE	366	377	11	3.01 %	9	9	0	0.00 %
	3	EMP & CHILD(REN)	118	109	-9	-7.63 %	4	5	1	25.00 %
	4	FULL FAMILY	970	968	-2	-0.21 %	22	23	1	4.55 %
		TOTAL FOR PLAN CODE:	1,890	1,880	-10	-0.53 %	73	77	4	5.48 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
 						*****				700
L32										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	19	22	3	15.79 %	3	3	o	0.00 %
		TOTAL FOR PLAN CODE:	19	22	3	15.79 %	3	3	0	0.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	9	9	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	9	9	0	0.00 %	1	1	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	193	194	1	0.52 %	17	17	0	0.00 %
	2	EMP & SPOUSE	163	165	2	1.23 %	8	9	1	12.50 %
	3	EMP & CHILD(REN)	75	72	-3	-4.00 %	2	1	-1	-50.00 %
	4	FULL FAMILY	345	345	0	0.00 %	8	11	3	37.50 %
		TOTAL FOR PLAN CODE:	776	776	0	0.00 %	35	38	3	8.57 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	6	6	0	0.00 %	o	0	0	0.00 %
	2	5000SP/2500CH	14	13	-1	-7.14 %	0	0	0	0.00 %
	3	10000SP/5000CH	72	72	0	0.00 %	3	4	1	33.33 %
	4	25000SP/10000CH	310	317	7	2.26 %	9	11	2	22.22 %
	5	10000 CH ONLY	95	96	1	1.05 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	497	504	7	1.41 %	13	16	3	23.08 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
						01111102				
L32										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	231	231	0	0.00 %	27	27	0	0.00 %
		TOTAL FOR PLAN CODE:	231	231	0	0.00 %	27	27	0	0.00 %
	DMEX - STA	TE DMO								
	1	EMPLOYEE ONLY	3	3	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	4	4	o	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	8	8	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	17	17	0	0.00 %	2	2	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	2	1	-1	-50.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	2	2	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	5	4	-1	-20.00 %	1	1	0	0.00 %
	H2F0 - STAT	TE CAT HLTH								
	1	EMPLOYEE ONLY	4	3	-1	-25.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	4	4	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	5	5	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	13	12	-1	-7.69 %	1	1	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI	≣	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
L32										
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	19	22	3	15.79 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	19	22	3	15.79 %	4	4	0	0.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	16	16	o	0.00 %	2	2	o	0.00 %
		TOTAL FOR PLAN CODE:	16	16	0	0.00 %	2	2	0	0.00 %
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	118	113	-5	-4.24 %	11	9	-2	-18.18 %
	2	EMP & SPOUSE	86	86	0	0.00 %	5	5	0	0.00 %
	3	EMP & CHILD(REN)	40	34	-6	-15.00 %	o	0	0	0.00 %
	4	FULL FAMILY	180	178	-2	-1.11%	2	2	0	0.00 %
	5	OPT1 & MEDICARE	3	3	0	0.00 %	0	0	0	0.00 %
	6	OPT2 & MEDICARE	3	3	o	0.00 %	o	0	0	0.00 %
	8	OPT4 & MEDICARE	0	0	0	0.00 %	1	1	0	0.00 %
	31	EMP & OEAI (ADULT)	0	0	o	100.00 %		2	2	0.00 %
		TOTAL FOR PLAN CODE:	430	417	-13	-3.02 %	19	19	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE

L32										
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	12	12	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	6	6	0	0.00 %	1	1	o	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	0	0	0	0.00 %
	4	FULL FAMILY	20	19	-1	-5.00 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	40	40	0	0.00 %	2	3	1	50.00 %
	HD00 - BCN	I-EAST MI								
	1	EMPLOYEE ONLY	3	2	-1	-33.33 %	0	0	0	0.00 %
	2	EMP & SPOUSE	4	4	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	0	0	0	0.00 %	1	0	-1	-100.00 %
	4	FULL FAMILY	11	10	-1	-9.09 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	18	16	-2	-11.11 %	1	1	0	0.00 %
	HF00 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	5	8	3	60.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	8	10	2	25.00 %	0	1	1	0.00 %
	3	EMP & CHILD(REN)	7	6	-1	-14.29 %	0	0	0	0.00 %
	4	FULL FAMILY	43	46	3	6.98 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	63	70	7	11.11 %	2	4	2	100.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
					•			-	•	
L32										
	HF01 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	o	0	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	o	0	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	3	3	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	4	4	0	0.00 %	3	3	0	0.00 %
	HF02 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	2	2	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	3	3	0	0.00 %	2	2	0	0.00 %
	HIOO - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	7	8	1	14.29 %	0	0	0	0.00 %
	2	EMP & SPOUSE	3	1	-2	-66.67 %	0	0	o	0.00 %
	3	EMP & CHILD(REN)	3	3	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	6	8	2	33.33 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	19	20	1	5.26 %	0	0	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
L32										
	HJ00 - HEA	LTH PLUS								
	1	EMPLOYEE ONLY	3	3	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	3	2	-1	-33.33 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	6	7	1	16.67 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	14	14	0	0.00 %	0	0	0	0.00 %
	HMCL - MC	LAREN HEALTH								
	1	EMPLOYEE ONLY	1	3	2	200.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	6	5	-1	-16.67 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	5	4	-1	-20.00 %	0	0	0	0.00 %
	4	FULL FAMILY	16	17	1	6.25 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	28	29	1	3.57 %	0	0	o	0.00 %
	HMEX - PH	P-LANSING								
	1	EMPLOYEE ONLY	29	28	-1	-3.45 %	0	0	0	0.00 %
	2	EMP & SPOUSE	23	24	1	4.35 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	14	17	3	21.43 %	1	1	0	0.00 %
	4	FULL FAMILY	60	63	3	5.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	126	132	6	4.76 %	2	2	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION C	ODE	PLAN CODE	E AND DESCRIPTION	PRE	PRE			POST	POST		
		COVERAGE		4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT	4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT
· · · · · · · · · · · · · · · · · · ·		OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
L32											
		HN00 - GRD	VALLEY HLTH								
		1	EMPLOYEE ONLY	o	1	1	100.00 %		0	o	0.00 %
		2	EMP & SPOUSE	1	1	o	0.00 %	0	0	o	0.00 %
		3	EMP & CHILD(REN)	1	0	-1	-100.00 %	o	0	0	0.00 %
			TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
		HP00 - BCN-	-GR LAKES W								
		1	EMPLOYEE ONLY	1	2	1	100.00 %	1	1	o	0.00 %
		2	EMP & SPOUSE	2	0	-2	-100.00 %	o	0	0	0.00 %
		3	EMP & CHILD(REN)	3	2	-1	-33.33 %	o	0	0	0.00 %
		4	FULL FAMILY	3	3	0	0.00 %	0	0	0	0.00 %
			TOTAL FOR PLAN CODE:	9	7	-2	-22.22 %	1	1	0	0.00 %
		HX00 - BCN	OF SE MI								
		1	EMPLOYEE ONLY	9	6	-3	-33.33 %	2	2	0	0.00 %
		2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
		3	EMP & CHILD(REN)	2	3	1	50.00 %	o	0	0	0.00 %
		4	FULL FAMILY	11	11	0	0.00 %	0	0	0	0.00 %
		31	EMP & OEAI (ADULT)	0	2	2	100.00 %		0	0	0.00 %
			TOTAL FOR PLAN CODE:	23	23	0	0.00 %	2	2	0	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
 THE WIE ALL	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
L32										
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	2	2	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	2	2	0	0.00 %
	LAEX - ST 2	2X LIFE APTE								
	0		35	34	-1	-2.86 %	7	7	o	0.00 %
		TOTAL FOR PLAN CODE:	35	34	-1	-2.86 %	7	7	o .	0.00 %
	LRE0 - ST F	RED LIFE \$\$								
	o		<i>5</i> 3	53	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	53	53	o	0.00 %	2	2	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	o		57	52	-5	-8.77 %	2	2	o	0.00 %
		TOTAL FOR PLAN CODE:	57	52	-5	-8.77 %	2	2	o	0.00 %
	LUEX - ST 2	X EMPL LIFE								
	0		733	738	5	0.68 %	34	36	2	5.88 %
		TOTAL FOR PLAN CODE:	733	738	5	0.68 %	34	36	2	5.88 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
 	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
L32										
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	27	30	3	11.11%	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	27	30	3	11.11 %	4	4	0	0.00 %
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	198	196	-2	-1.01 %	18	18	0	0.00 %
	2	EMP & SPOUSE	170	173	3	1.76 %	9	10	1	11.11 %
	3	EMP & CHILD(REN)	78	76	-2	-2.56 %	2	1	-1	-50.00 %
	4	FULL FAMILY	353	353	0	0.00 %	9	12	3	33.33 %
		TOTAL FOR PLAN CODE:	799	798	-1	-0.13 %	38	41	3	7.89 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION		BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
									•	
T01										
	D3ZN - EX	DN WAIVE NO\$								
	1	Dental Waive	21	21	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	21	21	o	0.00 %	0	0	0	0.00 %
	D4ZN - EX/	LL DN WV \$\$								
	1	DENTAL WAIVE FL	1	1	0	0.00 %	1	0	-1	-100.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	1	0	-1	-100.00 %
	DBEX - STA	ATE DENTAL								
	1	EMPLOYEE ONLY	155	152	-3	-1.94 %	20	20	0	0.00 %
	2	EMP & SPOUSE	129	131	2	1.55 %	4	5	1	25.00 %
	3	EMP & CHILD(REN)	124	119	-5	-4.03 %	o	0	0	0.00 %
	4	FULL FAMILY	947	951	4	0.42 %	11	10	-1	-9.09 %
		TOTAL FOR PLAN CODE:	1,355	1,353	-2	-0.15 %	35	35	0	0.00 %
	DL01 - ST [DEP LIFE								
	1	1500SP/1000CH	23	23	0	0.00 %	0	0	0	0.00 %
	2	5000SP/2500CH	40	40	0	0.00 %	0	0	0	0.00 %
	3	10000SP/5000CH	175	172	-3	-1.71 %	1	1	0	0.00 %
	4	25000SP/10000CH	600	606	6	1.00 %	10	9	-1	-10.00 %
	5	10000 CH ONLY	185	186	1	0.54 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1,023	1,027	4	0.39 %	11	10	-1	-9.09 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI	E	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
T01										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	202	202	o	0.00 %	25	25	0	0.00 %
		TOTAL FOR PLAN CODE:	202	202	0	0.00 %	25	25	0	0.00 %
	DMEX - STA	ATE DMO								
	4	FULL FAMILY	2	2	0	0.00 %	0	0	o	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	4	FULL FAMILY	1	1	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	H2F0 - STA	TE CAT HLTH								
	4	FULL FAMILY	1	1	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	H3ZN - EX/J	ID HL WV NO\$								
	1	Health Waive	19	- 18	-1	-5.26 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	19	18	-1	-5.26 %	1	1	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
T01										
	H4ZN - EX/	JD HL WV \$\$								
	1	HEALTH WAIVE FL	4	4	0	0.00 %	1	0	-1	-100.00 %
		TOTAL FOR PLAN CODE:	4	4	0	0.00 %	1	0	-1	-100.00 %
	HAEX - STA	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	28	26	-2	-7.14 %	5	5	0	0.00 %
	2	EMP & SPOUSE	22	22	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	19	16	-3	-15.79 %	0	0	0	0.00 %
	4	FULL FAMILY	105	91	-14	-13.33 %	3	2	-1	<i>-33.33</i> %
		TOTAL FOR PLAN CODE:	174	155	-19	-10.92 %	8	7	-1	-12.50 %
	HCEX - BCI	N MID-MI								
	4	FULL FAMILY	1	1	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HCOP - CO	PS TRUST PLAN								
	1	EMPLOYEE ONLY	115	114	-1	-0.87 %	14	14	0	0.00 %
	2	EMP & SPOUSE	100	98	-2	-2.00 %	4	5	1	25.00 %
	3	EMP & CHILD(REN)	104	103	-1	-0.96 %	o	0	0	0.00 %
	4	FULL FAMILY	829	859	30	3.62 %	8	8	0	0.00 %
		TOTAL FOR PLAN CODE:	1,148	1,174	26	2.26 %	26	27	1	3.85 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		BEDOEME	POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
T01										
	HD00 - BCN	-EAST MI								
	2	EMP & SPOUSE	1	1	o	0.00 %	0	0	o	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	HF00 - PRIO	RITY HEALTH								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	7	4	-3	-42.86 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	9	6	-3	-33.33 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	2	2	o	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	0	-1	-100.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	2	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	6	5	-1	-16.67 %	0	0	0	0.00 %
	HJ00 - HEAL	LTH PLUS								
	4	FULL FAMILY	1	0	-1	-100.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	0	-1	-100.00 %	0	0	o	0.00 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT	
 	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	-
T01											
	HMCL - MCI	LAREN HEALTH									
	1	EMPLOYEE ONLY	0	1	1	100.00 %		0	o	0.00 %	
	4	FULL FAMILY	1	0	-1	-100.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	o	0.00 %	0	0	o	0.00 %	
	HMEX - PHF	P-LANSING									
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	o	0.00 %	
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	o	0.00 %	
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %	
	4	FULL FAMILY	6	3	-3	-50.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	9	6	-3	-33.33 %	0	0	0	0.00 %	
	HP00 - BCN	-GR LAKES W									
	1	EMPLOYEE ONLY	1	1	0	0.00 %	o	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %	
	HX00 - BCN	OF SE MI									
	2	EMP & SPOUSE	2	1	-1	-50.00 %	o	0	0	0.00 %	
	4	FULL FAMILY	2	2	o	0.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	4	3	-1	-25.00 %	0	0	0	0.00 %	

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	DOE	DIFFERENCE	OHANGE	DOE	BOE	DITTENEROL	UIANGL
T01										
	L3ZN - ST L	.IFE WAIVE								
	1	Life Waive	9	. 8	-1	-11.11 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	9	8	-1	-11.11 %	1	1	0	0.00 %
	LAEX - ST	2X LIFE APTE								
	o		1,335	1,337	2	0.15 %	33	33	0	0.00 %
		TOTAL FOR PLAN CODE:	1,335	1,337	2	0.15 %	33	33	0	0.00 %
	LRE0 - ST F	RED LIFE \$\$								
	0		36	36	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	36	36	0	0.00 %	1	1	0	0.00 %
	LREX - ST	RED LIFE NO\$								
	0		38	36	-2	-5.26 %	2	1	-1	-50.00 %
		TOTAL FOR PLAN CODE:	38	36	-2	<i>-5.</i> 26 %	2	1	-1	-50.00 %
	V3ZN - EX/J	ID VIS WVNO\$								
	1	Vision Waive	21	21	0	0.00 %	1	0	-1	-100.00 %
		TOTAL FOR PLAN CODE:	21	21	0	0.00 %	1	0	-1	-100.00 %

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UNION CODE		AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
T01										
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	157	154	-3	-1.91 %	20	20	0	0.00 %
	2	EMP & SPOUSE	128	129	1	0.78 %	4	5	1	25.00 %
	3	EMP & CHILD(REN)	125	120	-5	-4.00 %	0	0	0	0.00 %
	4	FULL FAMILY	949	954	5	0.53 %	11	10	-1	-9.09 %
		TOTAL FOR PLAN CODE:	1,359	1,357	-2	-0.15 %	<i>35</i>	35	0	0.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
U11										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	49	55	6	12.24 %	7	8	1	14.29 %
		TOTAL FOR PLAN CODE:	49	55	6	12.24 %	7	8	1	14.29 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	10	9	-1	-10.00 %	9	9	0	0.00 %
		TOTAL FOR PLAN CODE:	10	9	-1	-10.00 %	9	9	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	460	442	-18	-3.91 %	118	114	-4	-3.39 %
	2	EMP & SPOUSE	289	295	6	2.08 %	32	36	4	12.50 %
	3	EMP & CHILD(REN)	240	238	-2	-0.83 %	61	65	4	6.56 %
	4	FULL FAMILY	454	453	-1	-0.22 %	65	71	6	9.23 %
		TOTAL FOR PLAN CODE:	1,443	1,428	-15	-1.04 %	276	286	10	3.62 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	8	7	-1	-12.50 %	3	3	0	0.00 %
	2	5000SP/2500CH	15	13	-2	-13.33 %	2	2	0	0.00 %
	3	10000SP/5000CH	61	63	2	3.28 %	14	16	2	14.29 %
	4	25000SP/10000CH	533	535	2	0.38 %	67	71	4	5.97 %
	5	10000 CH ONLY	290	289	-1	-0.34 %	61	65	4	6.56 %
		TOTAL FOR PLAN CODE:	907	907	0	0.00 %	147	157	10	6.80 %

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	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	****					<u> </u>	501		Direction	ONANGE
U11										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	392	397	5	1.28 %	155	158	3	1.94 %
		TOTAL FOR PLAN CODE:	392	397	5	1.28 %	155	158	3	1.94 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	11	11	0	0.00 %	3	4	1	33.33 %
	2	EMP & SPOUSE	2	1	-1	-50.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	11	13	2	18.18 %	6	7	1	16.67 %
	4	FULL FAMILY	8	7	-1	-12.50 %	8	5	-3	-37.50 %
		TOTAL FOR PLAN CODE:	32	32	0	0.00 %	18	17	-1	-5.56 %
	DP00 - STAT	TE PREV DNTL								
	1	EMPLOYEE ONLY	o	1	1	100.00 %		0	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	1	2	1	100.00 %	1	1	0	0.00 %
	H2F0 - STAT	TE CAT HLTH								
	1	EMPLOYEE ONLY	4	4	o	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	o	0.00 %	3	3	o	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	4	4	0	0.00 %

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	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
U11										
	H3ZN - EX/	JD HL WV NO\$								
	1	Health Waive	48	54	6	12.50 %	8	8	0	0.00 %
		TOTAL FOR PLAN CODE:	48	54	6	12.50 %	8	8	0	0.00 %
	H4ZN - EX/	JD HL WV \$\$								
	1	HEALTH WAIVE FL	13	11	-2	-15.38 %	19	16	-3	-15.79 %
		TOTAL FOR PLAN CODE:	13	11	-2	-15.38 %	19	16	-3	-15.79 %
	HAEX - STA	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	287	258	-29	-10.10 %	74	71	-3	-4.05 %
	2	EMP & SPOUSE	157	142	-15	-9.55 %	15	16	1	6.67 %
	3	EMP & CHILD(REN)	131	129	-2	-1.53 %	40	38	-2	-5.00 %
	4	FULL FAMILY	277	271	-6	-2.17 %	36	38	. 2	5.56 %
	6	OPT2 & MEDICARE	10	11	1	10.00 %	1	2	1	100.00 %
	8	OPT4 & MEDICARE	5	6	1	20.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	867	817	-50	-5.77 %	166	165	-1	-0.60 %

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			BEFORE	AFTER	DIFFERENCE	PERCENT	BEFORE	AFTER	DIEEEDEROE	PERCENT
***************************************	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
U11										
	HCEX - BCN	I MID-MI								
	1	EMPLOYEE ONLY	4	4	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	7	8	1 .	14.29 %	1	1	0	0.00 %
	4	FULL FAMILY	10	9	-1	-10.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	23	23	0	0.00 %	3	3	0	0.00 %
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	5	5	0	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	5	4	-1	-20.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	4	4	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	8	8	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	22	21	-1	-4.55 %	3	3	0	0.00 %
	HF00 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	82	84	2	2.44 %	8	11	3	37.50 %
	2	EMP & SPOUSE	47	52	5	10.64 %	4	4	0	0.00 %
	3	EMP & CHILD(REN)	61	65	4	6.56 %	6	9	3	50.00 %
	4	FULL FAMILY	82	92	10	12.20 %	12	14	2	16.67 %
		TOTAL FOR PLAN CODE:	272	293	21	7.72 %	30	38	8	26.67 %

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UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE OPTION COVERAGE DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
			BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	GOVERAGE DESCRIPTION	BUE	BUE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	CHANGE
U11										
	HF01 - PRIC	RITY HEALTH								
	1	EMPLOYEE ONLY	6	9	3	50.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	3	4	1	33.33 %	0	1	1	0.00 %
	3	EMP & CHILD(REN)	2	2	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	3	1	50.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	13	18	5	38.46 %	2	3	1	50.00 %
	HF02 - PRIC	RITY HEALTH								
	1	EMPLOYEE ONLY	12	12	o	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	4	3	-1	-25.00 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	4	5	1	25.00 %	1	1	0	0.00 %
	4	FULL FAMILY	15	15	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	35	35	0	0.00 %	5	5	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	11	14	3	27.27 %	11	10	-1	-9.09 %
	2	EMP & SPOUSE	8	8	o	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	20	22	2	10.00 %	3	5	2	66.67 %
	4	FULL FAMILY	13	14	1	7.69 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	52	58	6	11.54 %	21	22	1	4.76 %

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UNION CODE	COVERAGE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
			BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
U11										
	HJ00 - HEA	LTH PLUS								
	1	EMPLOYEE ONLY	2	2	o	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	5	6	1	20.00 %	2	1	-1	-50.00 %
	3	EMP & CHILD(REN)	4	4	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	12	12	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	23	24	1	4.35 %	4	3	-1	-25.00 %
	HL00 - TOTA	AL HLTH CARE								
	1	EMPLOYEE ONLY	2	2	o	0.00 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	1	1	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	2	2	O	0.00 %	0	0	o	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	2	3	1	50.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	7	8	1	14.29 %	2	2	0	0.00 %

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	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
***************************************	OFTION	COVERAGE DESCRIPTION	BUL	BUE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	CHANGE
U11										
	HMEX - PHI	P-LANSING								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	2	3	1	50.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	6	2	50.00 %	0	2	2	0.00 %
	4	FULL FAMILY	21	25	4	19.05 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	33	40	7	21.21 %	5	7	2	40.00 %
	HN00 - GRD	VALLEY HLTH								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	2	0	-2	-100.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	2	2	0	0.00 %
	4	FULL FAMILY	2	2	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	5	3	-2	-40.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	15	12	-3	-20.00 %	2	2	0	0.00 %
4	2	EMP & SPOUSE	6	8	2	33.33 %	o	1	1	0.00 %
	3	EMP & CHILD(REN)	22	21	-1	-4.55 %	5	5	0	0.00 %
	4	FULL FAMILY	20	18	-2	-10.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	63	59	-4	-6.35 %	8	9	1	12.50 %

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	COVERAGE	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	01 11014	OOVERAGE BEOOM! HOW			DIT LIVEROL	OTATOL	BOL	- DOL	DITTERCHOL	UIANUL
U11										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	16	14	-2	-12.50 %	11	12	1	9.09 %
	2	EMP & SPOUSE	7	8	1	14.29 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	6	5	-1	-16.67 %	6	6	0	0.00 %
	4	FULL FAMILY	8	7	-1	-12.50 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	37	34	-3	-8.11 %	25	26	1	4.00 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	6	5	-1	-16.67 %	o	1	1	0.00 %
		TOTAL FOR PLAN CODE:	6	5	-1	-16.67 %	0	1	1	0.00 %
	LAEX - ST 2	X LIFE APTE								
	o		5	5	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	0	0	0	0.00 %
	LRE0 - ST R	ED LIFE \$\$								
	0		55	55	0	0.00 %	28	29	1	3.57 %
		TOTAL FOR PLAN CODE:	55	55	0	0.00 %	28	29	1	3.57 %
	LREX - ST R	RED LIFE NO\$								
	o		59	55	-4	-6.78 %	31	30	-1	-3.23 %
		TOTAL FOR PLAN CODE:	59	55	-4	-6.78 %	31	30	-1	-3.23 %

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	COVERAG OPTION	—	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
									•	
U11										
	LUEX - ST	2X EMPL LIFE								
	0		1,460	1,455	-5	-0.34 %	304	304	0	0.00 %
		TOTAL FOR PLAN CODE:	1,460	1,455	-5	-0.34 %	304	304	0	0.00 %
	V3ZN - EX/	JD VIS WVNO\$								
	1	Vision Waive	57	63	6	10.53 %	16	16	0	0.00 %
		TOTAL FOR PLAN CODE:	57	63	6	10.53 %	16	16	0	0.00 %
	VBW0 - ST	ATE VISION								
	1	EMPLOYEE ONLY	473	455	-18	-3.81 %	125	122	-3	-2.40 %
	2	EMP & SPOUSE	293	296	3	1.02 %	34	38	4	11.76 %
	3	EMP & CHILD(REN)	248	249	1	0.40 %	67	72	5	7.46 %
	4	FULL FAMILY	462	460	-2	-0.43 %	71	74	3	4.23 %
		TOTAL FOR PLAN CODE:	1,476	1,460	-16	-1.08 %	297	306	9	3.03 %

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UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
W22										
	D3ZN - EX [ON WAIVE NO\$								
	1	Dental Waive	253	254	1	0.40 %	46	52	6	13.04 %
		TOTAL FOR PLAN CODE:	253	254	1	0.40 %	46	52	6	13.04 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	62	60	-2	-3.23 %	77	67	-10	-12.99 %
		TOTAL FOR PLAN CODE:	62	60	-2	-3.23 %	77	67	-10	<i>-12</i> .99 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	2,169	2,147	-22	-1.01 %	915	928	13	1.42 %
	2	EMP & SPOUSE	1,326	1,328	2	0.15 %	267	292	25	9.36 %
	3	EMP & CHILD(REN)	1,248	1,256	8	0.64 %	402	410	8	1.99 %
	4	FULL FAMILY	2,665	2,677	12	0.45 %	595	630	35	5.88 %
		TOTAL FOR PLAN CODE:	7,408	7,408	0	0.00 %	2,179	2,260	81	3.72 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	47	43	-4	-8.51 %	9	10	1	11.11 %
	2	5000SP/2500CH	101	96	-5	-4.95 %	17	19	2	11.76 %
	3	10000SP/5000CH	435	433	-2	-0.46 %	100	107	7	7.00 %
	4	25000SP/10000CH	2,551	2,597	46	1.80 %	511	537	26	5.09 %
	5	10000 CH ONLY	1,371	1,393	22	1.60 %	422	442	20	4.74 %
		TOTAL FOR PLAN CODE:	4,505	4,562	57	1.27 %	1,059	1,115	56	5.29 %

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	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
****	OI HOR	OOVERAGE BEGORII TION	БОЦ	BOL	DILIERCE	OHAROL	DOL		DITTERCHOL	OHAROL
W22										
	DLZN - DEF	PLIFE WV NO\$\$								
	1	DEP LIFE WAIVE	2,531	2,500	-31	-1.22 %	1,347	1,384	37	2.75 %
		TOTAL FOR PLAN CODE:	2,531	2,500	-31	-1.22 %	1,347	1,384	37	2.75 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	66	64	-2	-3.03 %	35	34	-1	-2.86 %
	2	EMP & SPOUSE	28	28	0	0.00 %	8	9	1	12.50 %
	3	EMP & CHILD(REN)	89	88	-1	-1.12 %	39	43	4	10.26 %
	4	FULL FAMILY	78	77	-1	-1.28 %	34	34	0	0.00 %
		TOTAL FOR PLAN CODE:	261	257	-4	-1.53 %	116	120	4	3.45 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	4	3	-1	-25.00 %	6	6	0	0.00 %
	2	EMP & SPOUSE	5	5	0	0.00 %	7	5	-2	-28.57 %
	3	EMP & CHILD(REN)	1	0	-1	-100.00 %	2	2	0	0.00 %
	4	FULL FAMILY	10	8	-2	-20.00 %	13	12	-1	-7.69 %
		TOTAL FOR PLAN CODE:	20	16	-4	-20.00 %	28	25	-3	-10.71 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
•		O THIT I DE DOME TO THE TENTE OF THE TENTE O								
W22										
	H2F0 - STAT	TE CAT HLTH								
	1	EMPLOYEE ONLY	13	13	0	0.00 %	13	12	-1	-7 .69 %
	2	EMP & SPOUSE	12	12	0	0.00 %	8	8	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	1	2	1	100.00 %
	4	FULL FAMILY	33	29	-4	-12.12 %	28	24	-4	<i>-14</i> .29 %
		TOTAL FOR PLAN CODE:	59	55	-4	-6.78 %	50	46	-4	-8.00 %
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	248	249	1	0.40 %	46	50	4	8.70 %
		TOTAL FOR PLAN CODE:	248	249	1	0.40 %	46	50	4	8.70 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	160	158	-2	-1.25 %	155	147	-8	-5.16 %
		TOTAL FOR PLAN CODE:	160	158	-2	-1.25 %	155	147	-8	-5.16 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
 	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
W22										
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	1,364	1,312	-52	-3.81 %	494	494	0	0.00 %
	2	EMP & SPOUSE	710	686	-24	-3.38 %	110	113	3	2.73 %
	3	EMP & CHILD(REN)	625	610	-15	-2.40 %	166	170	4	2.41 %
	4	FULL FAMILY	1,370	1,345	-25	-1.82 %	215	216	1	0.47 %
	5	OPT1 & MEDICARE	8	9	1	12.50 %	2	2	0	0.00 %
	6	OPT2 & MEDICARE	29	32	3	10.34 %	3	3	0	0.00 %
	8	OPT4 & MEDICARE	23	25	2	8.70 %	5	6	1	20.00 %
	31	EMP & OEAI (ADULT)	0	10	10	100.00 %		5	5	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	5	5	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	4,129	4,034	-95	-2.30 %	995	1,009	14	1.41 %
	HCEX - BCN	I MID-MI								
	1	EMPLOYEE ONLY	34	32	-2	-5.88 %	16	15	-1	-6.25 %
	2	EMP & SPOUSE	31	27	-4	-12.90 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	39	39	o	0.00 %	5	4	-1	-20.00 %
	4	FULL FAMILY	76	78	2	2.63 %	14	14	0	0.00 %
		TOTAL FOR PLAN CODE:	180	176	-4	-2.22 %	36	34	-2	-5.56 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST			
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT	BEFORE	4/1/2010 AFTER	DIFFERENCE	PERCENT	
 	OI HOR	COVERAGE DESCRIPTION	BVE	BUE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	—
W22											
	HD00 - BCN	I-EAST MI									
	1	EMPLOYEE ONLY	30	28	-2	-6.67 %	26	25	-1	-3.85 %	
	2	EMP & SPOUSE	20	20	0	0.00 %	3	3	0	0.00 %	
	3	EMP & CHILD(REN)	27	27	o	0.00 %	5	5	0	0.00 %	
	4	FULL FAMILY	64	64	0	0.00 %	13	13	0	0.00 %	
		TOTAL FOR PLAN CODE:	141	139	-2	-1.42 %	47	46	-1	-2.13 %	
	HF00 - PRIC	ORITY HEALTH									
	1	EMPLOYEE ONLY	165	178	13	7.88 %	123	135	12	9.76 %	
	2	EMP & SPOUSE	119	131	12	10.08 %	43	56	13	30.23 %	
	3	EMP & CHILD(REN)	167	180	13	7.78 %	69	71	2	2.90 %	
	4	FULL FAMILY	450	488	38	8.44 %	138	155	17	12.32 %	
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %	
	32	EMP, OEAI & CHILD(REN)	0	3	3	100.00 %		1	1	0.00 %	
		TOTAL FOR PLAN CODE:	901	981	80	8.88 %	373	418	45	12.06 %	

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	COVERAG		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
W22										
	HF01 - PRI	ORITY HEALTH								
	1	EMPLOYEE ONLY	13	15	2	15.38 %	9	9	0	0.00 %
	2	EMP & SPOUSE	7	8	1	14.29 %	5	6	1	20.00 %
	3	EMP & CHILD(REN)	16	15	-1	-6.25 %	2	5	3	150.00 %
	4	FULL FAMILY	26	28	2	7.69 %	8	10	2	25.00 %
	32	EMP, OEAI & CHILD(REN)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	62	67	5	8.06 %	24	30	6	25.00 %
	HF02 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	7	7	o	0.00 %	5	6	1	20.00 %
	2	EMP & SPOUSE	5	4	-1	-20.00 %	2	1	-1	-50.00 %
	3	EMP & CHILD(REN)	4	5	1	25.00 %	2	3	1	50.00 %
	4	FULL FAMILY	7	9	2	28.57 %	7	6	-1	-14.29 %
		TOTAL FOR PLAN CODE:	23	25	2	8.70 %	16	16	o	0.00 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	01 11011	OOVERAGE BEGORIF HON		BOL	DITTENEROL	GIANGE	502	DOE	DITTERENCE	OHANGE
W22										
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	241	235	-6	-2.49 %	111	113	2	1.80 %
	2	EMP & SPOUSE	83	88	5	6.02 %	20	16	-4	-20.00 %
	3	EMP & CHILD(REN)	244	251	7	2.87 %	88	91	3	3.41 %
	4	FULL FAMILY	248	261	13	5.24 %	66	80	14	21.21 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		1	1	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	2	2	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	816	838	22	2.70 %	285	302	17	5.96 %
	HJ00 - HEAI	LTH PLUS								
	1	EMPLOYEE ONLY	38	39	1	2.63 %	22	25	3	13.64 %
	2	EMP & SPOUSE	35	35	0	0.00 %	5	7	2	40.00 %
	3	EMP & CHILD(REN)	58	58	0	0.00 %	23	20	-3	-13.04 %
	4	FULL FAMILY	99	104	5	5.05 %	11	14	3	27.27 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	230	237	7	3.04 %	61	66	5	8.20 %
	HL00 - TOTA	AL HLTH CARE								
	3	EMP & CHILD(REN)	1	1	o	0.00 %	0	0	o	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	o	0	0	0.00 %

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	COVERAGE OPTION	<u> </u>	4/1/2010				4/1/2010	4/1/2010		
			BEFORE	4/1/2010 AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OFTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
W22										,
	HMEX - PHP	-LANSING								
	1	EMPLOYEE ONLY	66	70	4	6.06 %	32	33	1	3.13 %
	2	EMP & SPOUSE	44	43	-1	-2.27 %	8	9	1	12.50 %
	3	EMP & CHILD(REN)	46	49	3	6.52 %	11	13	2	18.18 %
	4	FULL FAMILY	127	135	8	6.30 %	25	32	7	28.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	283	298	15	5.30 %	76	88	12	15.79 %
	HN00 - GRD	VALLEY HLTH								
	1	EMPLOYEE ONLY	4	4	0	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	o	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	0	0	0	0.00 %
	HP00 - BCN-	-GR LAKES W								
	1	EMPLOYEE ONLY	40	33	-7	-17.50 %	30	33	3	10.00 %
	2	EMP & SPOUSE	32	28	-4	-12.50 %	12	9	-3	-25.00 %
	3	EMP & CHILD(REN)	25	25	0	0.00 %	23	20	-3	-13.04 %
	4	FULL FAMILY	79	60	-19	-24.05 %	18	15	-3	-16.67 %
		TOTAL FOR PLAN CODE:	176	146	-30	-17.05 %	83	77	-6	-7.23 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	DUE	BOE	DIFFERENCE	CHANGE	BOE	BOL	DITTERCHOL	OHAHOL
W22										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	151	148	-3	-1.99 %	78	69	-9	-11.54 %
	2	EMP & SPOUSE	76	69	-7	-9.21 %	16	21	5	31.25 %
	3	EMP & CHILD(REN)	152	150	-2	-1.32 %	65	61	-4	-6.15 %
	4	FULL FAMILY	180	181	1	0.56 %	40	40	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	2	2	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	559	550	-9	-1.61 %	199	191	-8	-4.02 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	15	13	-2	-13.33 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	15	13	-2	-13.33 %	2	3	1	50.00 %
	LRE0 - ST R	RED LIFE \$\$								
	o		435	431	-4	-0.92 %	158	162	4	2.53 %
		TOTAL FOR PLAN CODE:	435	431	-4	-0.92 %	158	. 162	4	2.53 %
	LREX - ST F	RED LIFE NO\$								
	o		448	432	-16	-3.57 %	170	164	-6	-3.53 %
		TOTAL FOR PLAN CODE:	448	432	-16	-3.57 %	170	164	-6	-3.53 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
					~					
W22										
	LUEX - ST 2	X EMPL LIFE								
	o		7,541	7,551	10	0.13 %	2,377	2,427	50	2.10 %
		TOTAL FOR PLAN CODE:	7,541	7,551	10	0.13 %	2,377	2,427	50	2.10 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	298	302	4	1.34 %	95	95	0	0.00 %
		TOTAL FOR PLAN CODE:	298	302	4	1.34 %	95	95	0	0.00 %
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	2,255	2,233	-22	-0.98 %	967	981	14	1.45 %
	2	EMP & SPOUSE	1,358	1,355	-3	-0.22 %	283	302	19	6.71 %
	3	EMP & CHILD(REN)	1,336	1,336	0	0.00 %	455	466	11	2.42 %
	4	FULL FAMILY	2,753	2,766	13	0.47 %	653	686	33	5.05 %
		TOTAL FOR PLAN CODE:	7,702	7,690	-12	-0.16 %	2,358	2,435	77	3.27 %

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U	INION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
		COVERAGE	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OI HOR	OOVERACE BESORII HOR	DOL		DITTERCHOL	CHANGE	BQ2	DOE	DITTERCHOL	OTARGE
	W41										
		D3ZN - EX D	ON WAIVE NO\$								
		1	Dental Waive	214	212	-2	-0.93 %	26	25	-1	-3.85 %
			TOTAL FOR PLAN CODE:	214	212	-2	-0.93 %	26	25	-1	-3.85 %
		D4ZN - EX/L	L DN WV \$\$								
		1	DENTAL WAIVE FL	29	25	-4	-13.79 %	20	15	-5	-25.00 %
			TOTAL FOR PLAN CODE:	29	25	-4	-13.79 %	20	15	-5	-25.00 %
		DBEX - STA	TE DENTAL								
		1	EMPLOYEE ONLY	1,425	1,415	-10	-0.70 %	256	264	8	3.13 %
		2	EMP & SPOUSE	1,183	1,190	7	0.59 %	99	107	8	8.08 %
		3	EMP & CHILD(REN)	711	707	-4	-0.56 %	138	142	4	2.90 %
		4	FULL FAMILY	1,278	1,276	-2	-0.16 %	163	177	14	8.59 %
			TOTAL FOR PLAN CODE:	4,597	4,588	-9	-0.20 %	656	690	34	5.18 %
		DL01 - ST D	EP LIFE								
		1	1500SP/1000CH	17	18	1	5.88 %	4	4	0	0.00 %
		2	5000SP/2500CH	48	46	-2	-4.17 %	7	8	1	14.29 %
		3	10000SP/5000CH	248	247	-1	-0.40 %	39	41	2	5.13 %
		4	25000SP/10000CH	1,704	1,719	15	0.88 %	143	154	11	7.69 %
		5	10000 CH ONLY	801	806	5	0.62 %	124	128	4	3.23 %
			TOTAL FOR PLAN CODE:	2,818	2,836	18	0.64 %	317	335	18	5.68 %

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UNION CODE	PLAN COD COVERAG OPTION		PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
W41										
	DLZN - DEF	PLIFE WV NO\$\$								
	1	DEP LIFE WAIVE	1,437	1,440	3	0.21 %	363	387	24	6.61 %
		TOTAL FOR PLAN CODE:	1,437	1,440	3	0.21 %	363	387	24	6.61 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	35	36	1	2.86 %	10	11	1	10.00 %
	2	EMP & SPOUSE	24	21	-3	-12.50 %	2	2	o O	0.00 %
	3	EMP & CHILD(REN)	42	41	-1	-2.38 %	11	9	-2	-18.18 %
	4	FULL FAMILY	46	45	-1	-2.17 %	12	10	-2	-16.67 %
		TOTAL FOR PLAN CODE:	147	143	-4	-2.72 %	35	32	-3	-8.57 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	4	4	o	0.00 %	3	3	0	0.00 %
	2	EMP & SPOUSE	1	1	o	0.00 %	1	1	o	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	1	2	1	100.00 %
	4	FULL FAMILY	1	2	1	100.00 %	2	2	o	0.00 %
		TOTAL FOR PLAN CODE:	8	9	1	12.50 %	7	8	1	14.29 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
					_					
W41										
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	16	15	-1	-6.25 %	11	9	-2	-18.18 %
	2	EMP & SPOUSE	18	16	-2	-11.11 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	1	1	o	0.00 %	o	0	o	0.00 %
	4	FULL FAMILY	13	12	-1	-7.69 %	11	11	0	0.00 %
		TOTAL FOR PLAN CODE:	48	44	-4	-8.33 %	24	23	-1	-4.17 %
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	203	199	-4	-1.97 %	23	24	1	4.35 %
		TOTAL FOR PLAN CODE:	203	199	-4	-1.97 %	23	24	1	4.35 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	84	78	-6	-7.14 %	51	51	0	0.00 %
		TOTAL FOR PLAN CODE:	84	78	-6	-7.14 %	51	51	0	0.00 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BUE	BUE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	CHANGE
W41										
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	682	643	-39	-5.72 %	104	101	-3	-2.88 %
	2	EMP & SPOUSE	478	459	-19	-3.97 %	31	32	1	3.23 %
	3	EMP & CHILD(REN)	279	263	-16	-5.73 %	41	41	0	0.00 %
	4	FULL FAMILY	492	480	-12	-2.44 %	52	50	-2	-3.85 %
	5	OPT1 & MEDICARE	5	6	1	20.00 %	0	0	0	0.00 %
	6	OPT2 & MEDICARE	28	30	2	7.14 %	3	3	0	0.00 %
	8	OPT4 & MEDICARE	8	8	0	0.00 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	2	2	100.00 %		1	1	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	2	2	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	1,972	1,893	-79	-4.01 %	231	229	-2	-0.87 %
	HCEX - BCN	I MID-MI								
	1	EMPLOYEE ONLY	139	134	-5	-3.60 %	23	21	-2	-8.70 %
	2	EMP & SPOUSE	79	76	-3	-3.80 %	5	5	0	0.00 %
	3	EMP & CHILD(REN)	98	92	-6	-6.12 %	9	8	-1	-11.11 %
	4	FULL FAMILY	119	109	-10	-8.40 %	16	14	-2	<i>-12.50</i> %
	31	EMP & OEAI (ADULT)	0	2	2	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	1	1	100.00 %		2	2	0.00 %
		TOTAL FOR PLAN CODE:	435	414	-21	-4.83 %	53	50	-3	-5.66 %

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UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
W41										
	HD00 - BCN	-EAST MI								
	1	EMPLOYEE ONLY	17	16	-1	-5.88 %	3	3	o	0.00 %
	2	EMP & SPOUSE	22	20	-2	-9.09 %	o	0	o	0.00 %
	3	EMP & CHILD(REN)	13	12	-1	-7.69 %	5	6	1	20.00 %
	4	FULL FAMILY	29	26	-3	-10.34 %	4	5	1	25.00 %
		TOTAL FOR PLAN CODE:	81	74	-7	-8.64 %	12	14	2	16.67 %
	HF00 - PRIC	RITY HEALTH								
	1	EMPLOYEE ONLY	72	80	8	11.11 %	16	16	0	0.00 %
	2	EMP & SPOUSE	100	109	9	9.00 %	11	10	-1	-9.09 %
	3	EMP & CHILD(REN)	55	71	16	29.09 %	15	16	1	6.67 %
	4	FULL FAMILY	123	146	23	18.70 %	15	19	4	26.67 %
	31	EMP & OEAI (ADULT)	0	0	0	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	350	406	56	16.00 %	57	62	5	8.77 %
	HF01 - PRIO	RITY HEALTH								
	1	EMPLOYEE ONLY	8	8	0	0.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	2	2	o	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	2	1	100.00 %	0	0	0	0.00 %
	4	FULL FAMILY	9	9	0	0.00 %	1	3	2	200.00 %
		TOTAL FOR PLAN CODE:	20	21	1	5.00 %	3	5	2	66.67 %

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	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
***************************************									2012002	0.07.002
W41										
	HF02 - PRIC	RITY HEALTH								
	1	EMPLOYEE ONLY	9	12	3	33.33 %	2	2	0	0.00 %
	2	EMP & SPOUSE	6	6	o	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	8	7	-1	-12.50 %	1	1	o	0.00 %
	4	FULL FAMILY	16	17	1	6.25 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	39	42	3	7.69 %	5	5	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	116	118	2	1.72 %	27	27	0	0.00 %
	2	EMP & SPOUSE	41	44	3	7.32 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	72	75	3	4.17 %	19	22	3	15.79 %
	4	FULL FAMILY	98	91	-7	-7.14 %	11	10	-1	-9.09 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	327	329	2	0.61 %	59	62	3	5.08 %
	HJ00 - HEAL	TH PLUS								
	1	EMPLOYEE ONLY	18	18	0	0.00 %	1	2	1	100.00 %
	2	EMP & SPOUSE	27	29	2	7.41 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	9	10	1	11.11 %	4	3	-1	-25.00 %
	4	FULL FAMILY	21	26	5	23.81 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	75	83	8	10.67 %	9	10	1	11.11 %

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	COVERAG		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
W41										
	HMEX - PHI	P-LANSING			•					
	1	EMPLOYEE ONLY	259	263	4	1.54 %	71	78	7	9.86 %
	2	EMP & SPOUSE	218	225	7	3.21 %	22	25	3	13.64 %
	3	EMP & CHILD(REN)	211	227	16	7.58 %	43	43	0	0.00 %
	4	FULL FAMILY	382	396	14	3.66 %	46	52	6	13.04 %
	31	EMP & OEAI (ADULT)	0	4	4	100.00 %		1	1	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	6	6	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	1,070	1,121	51	4.77 %	182	199	17	9.34 %
	HN00 - GRD	VALLEY HLTH								
	4	FULL FAMILY	2	2	0	0.00 %	o	0	o	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	14	11	-3	-21.43 %	1	1	0	0.00 %
	2	EMP & SPOUSE	18	10	-8	-44.44 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	21	13	-8	-38.10 %	5	3	-2	-40.00 %
	4	FULL FAMILY	25	18	-7	-28.00 %	5	5	0	0.00 %
		TOTAL FOR PLAN CODE:	78	52	-26	-33.33 %	13	11	-2	-15.38 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE	AFTER	DIECEDENCE	PERCENT
	OFTION	COVERAGE DESCRIPTION	BUE	BUE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
W41										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	66	65	-1	-1.52 %	9	12	3	33.33 %
	2	EMP & SPOUSE	27	30	3	11.11 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	46	48	2	4.35 %	9	9	0	0.00 %
	4	FULL FAMILY	53	54	1	1.89 %	9	10	1	11.11 %
		TOTAL FOR PLAN CODE:	192	197	5	2.60 %	28	32	4	14.29 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	9	7	-2	-22.22 %	8	9	1	12.50 %
		TOTAL FOR PLAN CODE:	9	7	-2	-22.22 %	8	9	1	12.50 %
	LAEX - ST 2	X LIFE APTE								
	o		192	191	-1	-0.52 %	8	8	0	0.00 %
		TOTAL FOR PLAN CODE:	192	191	-1	-0.52 %	8	8	0	0.00 %
	LRE0 - ST R	RED LIFE \$\$								
	o		247	247	0	0.00 %	62	63	1	1.61 %
		TOTAL FOR PLAN CODE:	247	247	0	0.00 %	62	63	1	1.61 %
	LREX - ST R	RED LIFE NO\$								
	o	•	254	249	-5	-1.97 %	71	67	-4	-5.63 %
		TOTAL FOR PLAN CODE:	254	249	-5	-1.97 %	71	67	-4	-5.63 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
W41										
	LUEX - ST 2	X EMPL LIFE								
	0		4,541	4,535	-6	-0.13 %	701	732	31	4.42 %
		TOTAL FOR PLAN CODE:	4,541	4,535	-6	-0.13 %	701	732	31	4.42 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	232	225	-7	-3.02 %	33	30	-3	-9.09 %
		TOTAL FOR PLAN CODE:	232	225	-7	-3.02 %	33	30	-3	-9.09 %
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	1,462	1,453	-9	-0.62 %	275	287	12	4.36 %
	2	EMP & SPOUSE	1,215	1,222	7	0.58 %	104	110	6	5.77 %
	3	EMP & CHILD(REN)	750	746	-4	-0.53 %	151	152	1	0.66 %
	4	FULL FAMILY	1,337	1,329	-8	-0.60 %	179	192	13	7.26 %
		TOTAL FOR PLAN CODE:	4,764	4,750	-14	-0.29 %	709	741	32	4.51 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	: COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
					*				•	
Y23										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Walve	187	188	1	0.53 %	18	18	0	0.00 %
		TOTAL FOR PLAN CODE:	187	188	1	0.53 %	18	18	o	0.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	27	28	1	3.70 %	15	15	0	0.00 %
		TOTAL FOR PLAN CODE:	27	28	1	3.70 %	15	15	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	1,139	1,130	-9	-0.79 %	132	133	1	0.76 %
	2	EMP & SPOUSE	838	844	6	0.72 %	43	50	7	16.28 %
	3	EMP & CHILD(REN)	418	420	2	0.48 %	31	35	4	12.90 %
	4	FULL FAMILY	1,569	1,577	8	0.51 %	120	126	6	5.00 %
		TOTAL FOR PLAN CODE:	3,964	3,971	7	0.18 %	326	344	18	5.52 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	22	22	0	0.00 %	1	1	0	0.00 %
	2	5000SP/2500CH	55	55	0	0.00 %	3	4	1	33.33 %
	3	10000SP/5000CH	264	263	-1	-0.38 %	24	25	1	4.17 %
	4	25000SP/10000CH	1,367	1,389	22	1.61 %	78	86	8	10.26 %
	5	10000 CH ONLY	577	582	5	0.87 %	26	31	5	19.23 %
		TOTAL FOR PLAN CODE:	2,285	2,311	26	1.14 %	132	147	15	11.36 %

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	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	01 11014	OOVERAGE BESORII HOR			Difference	OTARGE	BOL	BOL	DITTERENOL	OHAROL
Y23										
	DLZN - DEF	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	1,563	1,564	1	0.06 %	242	248	6	2.48 %
		TOTAL FOR PLAN CODE:	1,563	1,564	1	0.06 %	242	248	6	2.48 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	20	18	-2	-10.00 %	3	3	0	0.00 %
	2	EMP & SPOUSE	14	13	-1	-7.14 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	18	22	4	22.22 %	4	5	1	25.00 %
	4	FULL FAMILY	58	57	-1	-1.72 %	11	10	-1	-9.09 %
		TOTAL FOR PLAN CODE:	110	110	0	0.00 %	19	19	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	4	4	0	0.00 %	4	4	0	0.00 %
	2	EMP & SPOUSE	2	1	-1	-50.00 %	2	2	0	0.00 %
	4	FULL FAMILY	5	5	o	0.00 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	11	10	-1	-9.09 %	10	10	0	0.00 %

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	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
	0	OUTEROOF TON		DOL	Dillichol	OTIANGE	BUE	BOE	DIFFERENCE	CHANGE
Y23										
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	7	8	1	14.29 %	5	5	o	0.00 %
	2	EMP & SPOUSE	15	15	0	0.00 %	6	6	0	0.00 %
	3	EMP & CHILD(REN)	1	2	1	100.00 %	0	1	1	0.00 %
	4	FULL FAMILY	29	26	-3	-10.34 %	12	13	1	8.33 %
		TOTAL FOR PLAN CODE:	52	51	-1	-1.92 %	23	25	2	8.70 %
	H3ZN - EX/	JD HL WV NO\$								
	1	Health Waive	184	183	-1	-0.54 %	17	17	0	0.00 %
		TOTAL FOR PLAN CODE:	184	183	-1	-0.54 %	17	17	0	0.00 %
	H4ZN - EX/J	ID HL WV \$\$								
	1	HEALTH WAIVE FL	78	77	-1	-1.28 %	25	24	-1	-4.00 %
		TOTAL FOR PLAN CODE:	78	77	-1	-1.28 %	25	24	-1	-4.00 %

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	COVERAGI	≣	4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT	4/1/2010 BEFORE	4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y23										
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	556	527	-29	-5.22 %	62	54	-8	-12.90 %
	2	EMP & SPOUSE	321	311	-10	-3.12 %	10	12	2	20.00 %
	3	EMP & CHILD(REN)	156	160	4	2.56 %	14	15	1	7.14 %
	4	FULL FAMILY	512	486	-26	-5.08 %	42	37	-5	-11.90 %
	5	OPT1 & MEDICARE	2	1	-1	-50.00 %	0	o	o	0.00 %
	6	OPT2 & MEDICARE	20	19	-1	-5.00 %	o	ō	o	0.00 %
	8	OPT4 & MEDICARE	6	6	0	0.00 %	1	1	ō	0.00 %
	31	EMP & OEAI (ADULT)	0	5	5	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		o	0	0.00 %
		TOTAL FOR PLAN CODE:	1,573	1,516	-57	-3.62 %	129	119	-10	-7.75 %
	HCEX - BCN	MID-MI								
	1	EMPLOYEE ONLY	115	105	-10	-8.70 %	13	9	-4	-30.77 %
	2	EMP & SPOUSE	62	58	-4	-6.45 %	4	3	-1	-25.00 %
	3	EMP & CHILD(REN)	65	62	-3	-4.62 %	1	o	-1	-100.00 %
	4	FULL FAMILY	172	154	-18	-10.47 %	7	5	-2	-28.57 %
	31	EMP & OEAI (ADULT)	0	2	2	100.00 %	•	1	1	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	2	2	100.00 %		o	o	0.00 %
		TOTAL FOR PLAN CODE:	414	383	-31	-7.49 %	25	18	-7	-28.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

V23 HD00 - BCN-EAST M	UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
HD00 - BCN-EAST MI 1	 			BEFORE	AFTER	DIFFERENCE		BEFORE	AFTER	DIFFERENCE	
HD00 - BCN-EAST MI 1											
1 EMPLOYEE ONLY 3 1 -2 -66.67% 0 2 2 0.00% 2 EMP & SPOUSE 9 9 9 0 0.00% 1 1 0 0.00% 3 EMP & CHILD(REN) 5 6 1 20.00% 0 0 0 0.00% 4 FULL FAMILY 25 23 -2 -8.00% 3 2 -1 -33.33% TOTAL FOR PLAN CODE: 42 39 -3 -7.14% 4 5 1 25.00% HF00 - PRIORITY HEALTH 1 EMPLOYEE ONLY 19 20 1 5.26% 7 6 -1 -14.29% 2 EMP & SPOUSE 32 35 3 9.38% 5 5 0 0.00% 3 EMP & CHILD(REN) 17 17 0 0.00% 2 1 -1 -50.00% 4 FULL FAMILY 68 76 8 11.76% 5 6 1 20.00% 3 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%	Y23		•								
2 EMP & SPOUSE 9 9 0 0.00% 1 1 0 0.00% 3 EMP & CHILD(REN) 5 6 1 20.00% 0 0 0 0.00% 4 FULL FAMILY 25 23 -2 -8.00% 3 2 -1 -33.33% TOTAL FOR PLAN CODE: 42 39 -3 -7.14% 4 5 1 25.00% 5 1 25.00% 5 1 EMP & SPOUSE 32 35 3 9.38% 5 5 0 0.00% 3 EMP & CHILD(REN) 17 17 0 0.00% 2 1 -1 -50.00% 6 1 20.00% 6 1 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% 7 TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% 6 HF01 - PRIORITY HEALTH		HD00 - BCN	-EAST MI								
3 EMP & CHILD(REN) 5 6 1 20.00% 0 0 0 0.00% 4 FULL FAMILY 25 23 -2 -8.00% 3 2 -1 -33.33% TOTAL FOR PLAN CODE: 42 39 -3 -7.14% 4 5 1 25.00% HF00 - PRIORITY HEALTH 1 EMPLOYEE ONLY 19 20 1 5.26% 7 6 -1 -14.29% 2 EMP & SPOUSE 32 35 3 9.38% 5 5 0 0.00% 3 EMP & CHILD(REN) 17 17 0 0.00% 2 1 -1 5.000% 4 FULL FAMILY 68 76 8 11.76% 5 6 1 20.00% 31 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%		1	EMPLOYEE ONLY	3	1	-2	-66.67 %	0	2	2	0.00 %
## FULL FAMILY 25 23 -2 -8.00% 3 2 -1 -33.33% TOTAL FOR PLAN CODE: ## 42 39 -3 -7.14% ## 5 1 25.00% ### HF00 - PRIORITY HEALTH ### 1 EMPLOYEE ONLY 19 20 1 5.26% 7 6 -1 -14.29% 2 EMP & SPOUSE 32 35 3 9.38% 5 5 5 0 0.00% 3 EMP & CHILD(REN) 17 17 0 0.00% 2 1 -1 -50.00% 4 FULL FAMILY 68 76 8 11.76% 5 6 1 20.00% 31 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% ##################################		2	EMP & SPOUSE	9	9	o	0.00 %	1	1	0	0.00 %
TOTAL FOR PLAN CODE: 42 39 -3 -7.14% 4 5 1 25.00% HF00 - PRIORITY HEALTH 1 EMPLOYEE ONLY 19 20 1 5.26% 7 6 -1 -14.29% 2 EMP & SPOUSE 32 35 3 9.38% 5 5 0 0.00% 3 EMP & CHILD(REN) 17 17 0 0.00% 2 1 -1 -50.00% 4 FULL FAMILY 68 76 8 11.76% 5 6 1 20.00% 31 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%		3	EMP & CHILD(REN)	5	6	1	20.00 %	0	0	0	0.00 %
HF00 - PRIORITY HEALTH 1		4	FULL FAMILY	25	23	-2	-8.00 %	3	2	-1	-33.33 %
1 EMPLOYEE ONLY 19 20 1 5.26 % 7 6 -1 -14.29 % 2 EMP & SPOUSE 32 35 3 9.38 % 5 5 0 0.00 % 3 EMP & CHILD(REN) 17 17 0 0.00 % 2 1 -1 -50.00 % 4 FULL FAMILY 68 76 8 11.76 % 5 6 1 20.00 % 31 EMP & OEAI (ADULT) 0 4 4 100.00 % 0 0 0 0.00 % TOTAL FOR PLAN CODE: 136 152 16 11.76 % 19 18 -1 -5.26 % HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00 % 1 2 1 100.00 %			TOTAL FOR PLAN CODE:	42	39	-3	-7.14 %	4	5	1	25.00 %
2 EMP & SPOUSE 32 35 3 9.38 % 5 5 0 0.00 % 3 EMP & CHILD(REN) 17 17 0 0.00 % 2 1 -1 -50.00 % 4 FULL FAMILY 68 76 8 11.76 % 5 6 1 20.00 % 31 EMP & OEAI (ADULT) 0 4 4 100.00 % 0 0 0.00 % TOTAL FOR PLAN CODE: 136 152 16 11.76 % 19 18 -1 -5.26 % HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00 % 1 2 1 100.00 %		HF00 - PRIO	RITY HEALTH								
3 EMP & CHILD(REN) 17 17 0 0.00 % 2 1 -1 -50.00 % 4 FULL FAMILY 68 76 8 11.76 % 5 6 1 20.00 % 31 EMP & OEAI (ADULT) 0 4 4 100.00 % 0 0 0.00 % TOTAL FOR PLAN CODE: 136 152 16 11.76 % 19 18 -1 -5.26 % HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00 % 1 2 1 100.00 %		1	EMPLOYEE ONLY	19	20	1	5.26 %	7	6	-1	-14.29 %
4 FULL FAMILY 68 76 8 11.76% 5 6 1 20.00% 31 EMP & OEAI (ADULT) 0 4 4 100.00% 0 0 0.00% TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%		2	EMP & SPOUSE	32	35	3	9.38 %	5	5	0	
31 EMP & OEAI (ADULT) 0 4 4 100.00 % 0 0 0.00 % TOTAL FOR PLAN CODE: 136 152 16 11.76 % 19 18 -1 -5.26 % HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00 % 1 2 1 100.00 %		3	EMP & CHILD(REN)	17	17	o	0.00 %	2	1	-1	-50.00 %
TOTAL FOR PLAN CODE: 136 152 16 11.76% 19 18 -1 -5.26% HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%		4	FULL FAMILY	68	76	8	11.76 %	5	6	1	20.00 %
HF01 - PRIORITY HEALTH 1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%		31	EMP & OEAI (ADULT)	o	4	4	100.00 %		0	0	0.00 %
1 EMPLOYEE ONLY 4 6 2 50.00% 1 2 1 100.00%			TOTAL FOR PLAN CODE:	136	152	16	11.76 %	19	18	-1	-5.26 %
		HF01 - PRIO	RITY HEALTH								
		1	EMPLOYEE ONLY	4	6	2	50.00 %	1	2	1	100.00 %
		2	EMP & SPOUSE					o	1	1	
3 EMP & CHILD(REN) 2 3 1 50.00 % 0 0 0 0.00 %		3	EMP & CHILD(REN)	2	3	1			0	0	
4 FULL FAMILY 7 8 1 14.29% 2 4 2 100.00%		4		7	8	1	14.29 %	2	4	2	
TOTAL FOR PLAN CODE: 15 19 4 26.67 % 3 7 4 133.33 %			TOTAL FOR PLAN CODE:	15	19	4	26.67 %	3	7	4	

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE	PRE			POST	POST		
	COVERAGE OPTION		4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	4/1/2010 BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
	,,,,,,,,					1111				
Y23										
	HF02 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	3	4	1	33.33 %	1	1	o	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	o	0	o	0.00 %
	4	FULL FAMILY	17	16	-1	-5.88 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	24	25	1	4.17 %	2	2	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	44	42	-2	<i>-4.55</i> %	5	5	0	0.00 %
	2	EMP & SPOUSE	24	27	3	12.50 %	2	1	-1	-50.00 %
	3	EMP & CHILD(REN)	36	31	-5	-13.89 %	4	4	0	0.00 %
	4	FULL FAMILY	59	60	1	1.69 %	5	7	2	40.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	o	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	163	162	-1	-0.61 %	16	17	1	6.25 %
	HJ00 - HEAL	.TH PLUS								
	1	EMPLOYEE ONLY	5	5	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	6	6	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	9	9	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	21	22	1	4.76 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	41	42	1	2.44 %	3	4	1	33.33 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DESCRIPTION	BUL	- DOF	Direction	Olivillo 2				
Y23										
	HL00 - TOTA	AL HLTH CARE								
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
	·	TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	49	57	8	16.33 %	8	10	2	25.00 %
	2	EMP & SPOUSE	31	37	6	19.35 %	3	6	3	100.00 %
	3	EMP & CHILD(REN)	24	25	1	4.17 %	1	4	3	300.00 %
	4	FULL FAMILY	110	129	19	17.27 %	10	14	4	40.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	214	249	35	16.36 %	22	34	12	54.55 %
	HMEX - PH	P-LANSING								
	1	EMPLOYEE ONLY	298	292	-6	-2.01 %	26	33	7	26.92 %
	2	EMP & SPOUSE	217	220	3	1.38 %	11	13	2	18.18 %
	3	EMP & CHILD(REN)	149	156	7	4.70 %	9	12	3	33.33 %
	4	FULL FAMILY	532	569	37	6.95 %	29	32	3	10.34 %
	31	EMP & OEAI (ADULT)	0	7	7	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	3	3	100.00 %		1	1	0.00 %
	VZ	TOTAL FOR PLAN CODE:	1,196	1,247	51	4.26 %	75	91	16	21.33 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
Y23										
	HN00 - GR	D VALLEY HLTH								
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	HP00 - BCI	N-GR LAKES W								
	1	EMPLOYEE ONLY	7	4	-3	-42.86 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	2	1	100.00 %	0	0	0	0.00 %
	4	FULL FAMILY	16	10	-6	-37.50 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	25	17	-8	-32.00 %	2	2	0	0.00 %
	HX00 - BC	N OF SE MI								
	1	EMPLOYEE ONLY	29	27	-2	-6.90 %	8	8	0	0.00 %
	2	EMP & SPOUSE	18	20	2	11.11 %	4	4	0	0.00 %
	3	EMP & CHILD(REN)	23	23	0	0.00 %	3	3	0	0.00 %
	4	FULL FAMILY	65	65	o	0.00 %	7	7	0	0.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	135	136	1	0.74 %	22	22	o	0.00 %
	L3ZN - ST	LIFE WAIVE								
	1	Life Waive	5	6	1	20.00 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	5	6	1	20.00 %	o	1	1	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		nuiocuz	POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE		BEFORE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	BUE	DIFFERENCE	OHAHOL	BOL			
Y23										
	LAEV ST 2	X LIFE APTE								
	0	X EII E AI 1 E	114	114	0	0.00 %	8	8	0	0.00 %
	U	TOTAL FOR PLAN CODE:	114	114	o	0.00 %	8	8	0	0.00 %
		TOTAL FOR PLAN CODE.	114	7.7	v	0.00 /0	-	-		
	LRE0 - ST R	RED LIFE \$\$								
	0		240	245	5	2.08 %	30	33	3	10.00 %
		TOTAL FOR PLAN CODE:	240	245	5	2.08 %	30	33	3	10.00 %
		RED LIFE NO\$			•	0.04.0/	32	35	3	9.38 %
	o		248	246	-2	-0.81 %				
		TOTAL FOR PLAN CODE:	248	246	-2	-0.81 %	32	35	3	9.38 %
	LUEX - ST 2	X EMPL LIFE								
	0	••• = = = · ·	3,957	3,961	4	0.10 %	364	379	15	4.12 %
	ŭ	TOTAL FOR PLAN CODE:	3,957	3,961	4	0.10 %	364	379	15	4.12 %
		• • • • • • • • • • • • • • • • • • • •	•							
	V3ZN - EX/J	ID VIS WVNO\$							•	0.0004
	1	Vision Waive	210	213	3	1.43 %	24	26	2	8.33 %
		TOTAL FOR PLAN CODE:	210	213	3	1.43 %	24	26	2	8.33 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD COVERAG OPTION		PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y23										
	VBW0 - ST	ATE VISION								
	1	EMPLOYEE ONLY	1,177	1,168	-9	-0.76 %	136	139	3	2.21 %
	2	EMP & SPOUSE	857	864	7	0.82 %	53	61	8	15.09 %
	3	EMP & CHILD(REN)	435	439	4	0.92 %	36	41	5	13.89 %
	4	FULL FAMILY	1.626	1.630	4	0.25 %	136	139	3	2.21 %
	4	TOTAL FOR PLAN CODE:	4,095	4,101	6	0.15 %	361	380	19	5.26 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	0. 11011	OOTEIOROE DECORNI MOR				om area		201		
Y50										
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HMEX - PHP	-LANSING								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	LUEX - ST 2	X EMPL LIFE								
	0		1	1	0	0.00 %	o .	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %

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UNION CODE		AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGE OPTION		BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y51										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	219	226	7	3.20 %	7	8	1	14.29 %
		TOTAL FOR PLAN CODE:	219	226	7	3.20 %	7	8	1	14.29 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	14	14	0	0.00 %	6	4	-2	-33.33 %
		TOTAL FOR PLAN CODE:	14	14	0	0.00 %	6	4	-2	-33.33 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	1,026	1,019	-7	-0.68 %	20	23	3	15.00 %
	2	EMP & SPOUSE	1,163	1,178	15	1.29 %	26	27	1	3.85 %
	3	EMP & CHILD(REN)	608	600	-8	-1.32 %	14	15	1	7.14 %
	4	FULL FAMILY	2,387	2,391	4	0.17 %	39	41	2	5.13 %
		TOTAL FOR PLAN CODE:	5,184	5,188	4	0.08 %	99	106	7	7.07 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	27	28	1	3.70 %	0	0	0	0.00 %
	2	5000SP/2500CH	70	71	1	1.43 %	1	2	1	100.00 %
	3	10000SP/5000CH	361	359	-2	-0.55 %	6	9	3	<i>50.00</i> %
	4	25000SP/10000CH	2,429	2,449	20	0.82 %	44	45	1	2.27 %
	5	10000 CH ONLY	830	825	-5	-0.60 %	15	15	0	0.00 %
		TOTAL FOR PLAN CODE:	3,717	3,732	15	0.40 %	66	71	5	7.58 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		DEDOUNT	
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	
Y51											
	DLZN - DEF	PLIFE WV NO\$\$								0.00.0/	
	1	DEP LIFE WAIVE	1,209	1,224	15	1.24 %	44	48	4	9.09 %	
		TOTAL FOR PLAN CODE:	1,209	1,224	15	1.24 %	44	48	4	9.09 %	
	DMEX - ST	ATE DMO						_	_	0.00.07	
	1	EMPLOYEE ONLY	20	19	-1	-5.00 %	0	0	0	0.00 %	
	2	EMP & SPOUSE	11	9	-2	-18.18 %	2	1	-1	-50.00 %	
	3	EMP & CHILD(REN)	28	27	-1	-3.57 %	2	2	0	0.00 %	
	4	FULL FAMILY	55	52	-3	-5.45 %	1	2	1	100.00 %	
		TOTAL FOR PLAN CODE:	114	107	-7	-6.14 %	5	5	0	0.00 %	
	DP00 - STA	TE PREV DNTL									
	1	EMPLOYEE ONLY	2	2	0	0.00 %	o	0	0	0.00 %	
	2	EMP & SPOUSE	1	1	0	0.00 %	1	1	o	0.00 %	
	3	EMP & CHILD(REN)	2	2	0	0.00 %	0	0	o	0.00 %	
	4	FULL FAMILY	7	5	-2	-28.57 %	1	1	o	0.00 %	
	•	TOTAL FOR PLAN CODE:	12	10	-2	-16.67 %	2	2	0	0.00 %	

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
	OFTION	OO421MOLDEOO!!!! !!O!!								
Y51										
	H2F0 - STAT	TE CAT HLTH					•	•	0	0.00 %
	1	EMPLOYEE ONLY	10	9	-1	-10.00 %	o	0	_	
	2	EMP & SPOUSE	8	8	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	=	FULL FAMILY	19	19	0	0.00 %	7	7	0	0.00 %
	4	TOTAL FOR PLAN CODE:	38	37	-1	-2.63 %	8	8	0	0.00 %
	H3ZN - EX/J	ID HL WV NO\$								44000/
	1	Health Waive	218	224	6	2.75 %	7	8	7	14.29 %
	•	TOTAL FOR PLAN CODE:	218	224	6	2.75 %	7	8	1	14.29 %
	H4ZN - EX/J	ID HL WV \$\$						•	•	-20.00 %
	1	HEALTH WAIVE FL	73	69	-4	-5.48 %	10	8	-2	
	·	TOTAL FOR PLAN CODE:	73	69	-4	-5.48 %	10	8	-2	-20.00 %

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UNION CODE		PLAN CODE AND DESCRIPTION		4/1/2010 4/1/2010 4/1/20 BEFORE AFTER PERCENT BEFO		POST 4/1/2010	POST 4/1/2010		PERCENT	
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE	BEFORE	AFTER BOE	DIFFERENCE	CHANGE
					······································					
Y51										
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	607	590	-17	-2.80 %	14	17	3	21.43 %
	2	EMP & SPOUSE	566	541	-25	-4.42 %	13	12	-1	-7.69 %
	3	EMP & CHILD(REN)	358	344	-14	-3.91 %	8	8	0	0.00 %
	4	FULL FAMILY	1,313	1,291	-22	-1.68 %	19	19	0	0.00 %
	5	OPT1 & MEDICARE	3	3	0	0.00 %	1	1	0	0.00 %
	6	OPT2 & MEDICARE	23	22	-1	-4.35 %	0	1	1	0.00 %
	8	OPT4 & MEDICARE	8	7	-1	-12.50 %	0	0	0	0.00 %
	31	EMP & OEAI (ADULT)	0	6	6	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		1	1	0.00 %
	Q2	TOTAL FOR PLAN CODE:	2,878	2,805	-73	-2.54 %	55	59	4	7.27 %
	HCEX - BCI	N MID-MI								
	1	EMPLOYEE ONLY	43	39	-4	-9.30 %	0	0	o	0.00 %
	2	EMP & SPOUSE	44	46	2	4.55 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	31	29	-2	-6.45 %	0	0	0	0.00 %
	4	FULL FAMILY	109	103	-6	-5.50 %	1	0	-1	-100.00 %
	•	TOTAL FOR PLAN CODE:	227	217	-10	-4.41 %	2	1	-1	-50.00 %

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UNION CODE		PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BEFORE BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y51										
	HD00 - BCN	-EAST MI							_	
	1	EMPLOYEE ONLY	14	12	-2	-14.29 %	o	0	0	0.00 %
	2	EMP & SPOUSE	16	14	-2	-12.50 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	17	18	1	5.88 %	o	0	0	0.00 %
	4	FULL FAMILY	56	51	-5	-8.93 %	0	0	0	0.00 %
	•	TOTAL FOR PLAN CODE:	103	95	-8	-7.77 %	1	1	0	0.00 %
	HF00 - PRIC	RITY HEALTH								0.00.0/
	1	EMPLOYEE ONLY	77	76	-1	-1.30 %	2	2	0	0.00 %
	2	EMP & SPOUSE	118	126	8	6.78 %	3	3	0	0.00 %
	3	EMP & CHILD(REN)	56	62	6	10.71 %	2	2	0	0.00 %
	4	FULL FAMILY	287	318	31	10.80 %	5	7	2	40.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
	O,	TOTAL FOR PLAN CODE:	538	583	45	8.36 %	12	14	2	16.67 %
	HF01 - PRIC	ORITY HEALTH							•	2.224
	1	EMPLOYEE ONLY	7	8	1	14.29 %	1	1	0	0.00 %
	2	EMP & SPOUSE	12	14	2	16.67 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	5	6	1	20.00 %	0	0	0	0.00 %
	4	FULL FAMILY	25	28	3	12.00 %	2	1	-1	-50.00 %
	•	TOTAL FOR PLAN CODE:	49	56	7	14.29 %	3	2	-1	-33.33 %

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UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
			BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DESCRIPTION	BOL	BOL	DITTERCENCE	0,,,,,,,,,,,				
Y51										
	HF02 - PRIO	RITY HEALTH								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	11	12	1	9.09 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	5	6	1	20.00 %	0	0	0	0.00 %
	4	FULL FAMILY	19	20	1	5.26 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	41	44	3	7.32 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	51	52	1	1.96 %	1	1	0	0.00 %
	2	EMP & SPOUSE	44	47	3	6.82 %	1	0	-1	-100.00 %
	3	EMP & CHILD(REN)	66	68	2	3.03 %	3	3	0	0.00 %
	4	FULL FAMILY	130	133	3	2.31 %	1	3	2	200.00 %
	·	TOTAL FOR PLAN CODE:	291	300	9	3.09 %	6	7	1	16.67 %
	HJ00 - HEAI	LTH PLUS								
	1	EMPLOYEE ONLY	12	12	0	0.00 %	0	1	1	0.00 %
	2	EMP & SPOUSE	12	12	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	10	11	1	10.00 %	1	1	o	0.00 %
	4	FULL FAMILY	55	59	4	7.27 %	0	0	0	0.00 %
	•	TOTAL FOR PLAN CODE:	89	94	5	5.62 %	2	3	1	50.00 %

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UNION CODE		PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGE		BEFORE BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DECORN HOR								
Y51		,								
	HL00 - TOTA	AL HLTH CARE							_	
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	•	TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	HMCL - MC	LAREN HEALTH					,		o	0.00 %
	1	EMPLOYEE ONLY	8	12	4	50.00 %	1	7	0	0.00 %
	2	EMP & SPOUSE	17	16	-1	-5.88 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	3	4	1	33.33 %	0	0	0	
	4	FULL FAMILY	50	54	4	8.00 %	o	1	1	0.00 %
		TOTAL FOR PLAN CODE:	78	86	8	10.26 %	2	3	1	50.00 %
	HMEX - PHI	P-LANSING					,	4	o	0.00 %
	1	EMPLOYEE ONLY	108	99	-9	-8.33 %	1	1		0.00 %
	2	EMP & SPOUSE	99	102	3	3.03 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	81	81	0	0.00 %	2	2	0	
	4	FULL FAMILY	338	359	21	6.21 %	2	2	0	0.00 %
	31	EMP & OEAI (ADULT)	o	2	2	100.00 %		0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	5	5	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	626	648	22	3.51 %	5	. 5	o	0.00 %

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UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOL		Dii I Zive.		- 7			
Y51										
	HN00 - GRD	VALLEY HLTH								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	3	2	-1	-33.33 %	0	0	0	0.00 %
	-7	TOTAL FOR PLAN CODE:	6	5	-1	-16.67 %	0	0	0	0.00 %
	HP00 - BCN	-GR LAKES W								
	1	EMPLOYEE ONLY	10	9	-1	-10.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	14	10	-4	-28.57 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	8	8	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	37	35	-2	-5.41 %	3	3	o	0.00 %
	4	TOTAL FOR PLAN CODE:	69	62	-7	-10.14 %	4	4	0	0.00 %
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	47	47	0	0.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	28	28	0	0.00 %	2	2	0	0.00 %
	3	EMP & CHILD(REN)	50	49	-1	-2.00 %	o	0	0	0.00 %
	4	FULL FAMILY	85	87	2	2.35 %	0	0	0	0.00 %
	7	TOTAL FOR PLAN CODE:	210	211	1	0.48 %	3	3	0	0.00 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAG		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
					- 					
Y51										
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	16	16	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	16	16	0	0.00 %	o	0	0	0.00 %
	LAEX - ST	2X LIFE APTE						_		
	0		252	249	-3	-1.19 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	252	249	-3	-1.19 %	2	2	0	0.00 %
	LRE0 - ST F	RED LIFE \$\$								2 22 24
	0		158	162	4	2.53 %	12	12	0	0.00 %
		TOTAL FOR PLAN CODE:	158	162	4	2.53 %	12	12	0	0.00 %
	LREX - ST	RED LIFE NO\$							•	2 22 2/
	0		164	163	-1	-0.61 %	12	12	0	0.00 %
		TOTAL FOR PLAN CODE:	164	163	-1	-0.61 %	12	12	0	0.00 %
	LUEX - ST	2X EMPL LIFE							_	4.40.0/
	o		5,130	5,135	5	0.10 %	112	117	5	4.46 %
		TOTAL FOR PLAN CODE:	5,130	5,135	5	0.10 %	112	117	5	4.46 %

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UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y51										
•	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	226	230	4	1.77 %	10	10	0	0.00 %
	·	TOTAL FOR PLAN CODE:	226	230	4	1.77 %	10	10	0	0.00 %
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	1,058	1,051	-7	-0.66 %	21	24	3	14.29 %
	2	EMP & SPOUSE	1,173	1,188	15	1.28 %	30	31	1	3.33 %
	3	EMP & CHILD(REN)	634	625	-9	-1.42 %	16	16	0	0.00 %
	4	FULL FAMILY	2,454	2,452	-2	-0.08 %	41	45	4	9.76 %
	7	TOTAL FOR PLAN CODE:	5,319	5,316	-3	-0.06 %	108	116	8	7.41 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT	
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	_
				· 							
Y52											
	DBEX - STA	TE DENTAL									
	3	EMP & CHILD(REN)	o	0	0	100.00 %		1	1	0.00 %	
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	1	1	0.00 %	
	DL01 - ST D	EP LIFE									
	3	10000SP/5000CH	1	1	0	0.00 %	0	0	0	0.00 %	
	5	10000 CH ONLY	0	0	0	100.00 %		1	1	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	1	1	0.00 %	
	HF00 - PRIC	ORITY HEALTH							,	0.000/	
	3	EMP & CHILD(REN)	0	0	0	100.00 %		1	1	0.00 %	
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	o	0.00 %	0	1	1	0.00 %	
	LAEX - ST	2X LIFE APTE							•	0.00%	
	0		1	1	0	0.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %	
	LUEX - ST	2X EMPL LIFE					_	,	,	0.00.0/	
	0		1	1	0	0.00 %	0	1	1	0.00 %	
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	o	1	1	0.00 %	

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UNION CODE	PLAN CODE COVERAGE OPTION	E AND DESCRIPTION COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y52										
	VBW0 - STA	TE VISION								
	3	EMP & CHILD(REN)	o	0	0	100.00 %		1	1	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	o	0.00 %	0	1	1	0.00 %

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UNION CODE		AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		DEDOENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BOE	BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DESCRIPTION	BOL		<u> </u>	••••• <u>•</u>		· ·		
Y98										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	51	52	1	1.96 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	51	52	1	1.96 %	6	6	0	0.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	8	8	0	0.00 %	5	3	-2	-40.00 %
		TOTAL FOR PLAN CODE:	8	8	0	0.00 %	5	3	-2	-40.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	269	270	1	0.37 %	22	23	1	4.55 %
	2	EMP & SPOUSE	361	365	4	1.11 %	9	8	-1	-11.11 %
	3	EMP & CHILD(REN)	125	125	0	0.00 %	3	4	1	33.33 %
	4	FULL FAMILY	656	665	9	1.37 %	45	49	4	8.89 %
		TOTAL FOR PLAN CODE:	1,411	1,425	14	0.99 %	79	84	5	6.33 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	5	8	3	60.00 %	0	0	0	0.00 %
	2	5000SP/2500CH	28	28	0	0.00 %	2	1	-1	-50.00 %
	3	10000SP/5000CH	101	104	3	2.97 %	5	6	1	20.00 %
	4	25000SP/10000CH	<i>574</i>	585	11	1.92 %	28	28	0	0.00 %
	5	10000 CH ONLY	204	205	1	0.49 %	5	6	1	20.00 %
		TOTAL FOR PLAN CODE:	912	930	18	1.97 %	40	41	1	2.50 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
0.4.30111										
Y98										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	393	400	7	1.78 %	34	36	2	5.88 %
		TOTAL FOR PLAN CODE:	393	400	7	1.78 %	34	36	2	5.88 %
	DMEX - STA	TE DMO							_	
	1	EMPLOYEE ONLY	1	0	-1	-100.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	3	3	o	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	o	0	0	0.00 %
	4	FULL FAMILY	6	7	1	16.67 %	0	0	0	0.00 %
	·	TOTAL FOR PLAN CODE:	12	13	1	8.33 %	1	1	0	0.00 %
	DP00 - STA	TE PREV DNTL								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	2	1	-1	-50.00 %	0	0	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
	·	TOTAL FOR PLAN CODE:	4	3	-1	-25.00 %	0	0	0	0.00 %
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	0	0	0	0.00 %	1	1	o	0.00 %
	2	EMP & SPOUSE	6	6	0	0.00 %	0	0	o	0.00 %
	4	FULL FAMILY	5	5	0	0.00 %	0	0	o	0.00 %
	•	TOTAL FOR PLAN CODE:	11	11	0	0.00 %	1	1	0	0.00 %

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FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAG		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
Y98										
	H3ZN - EX	JD HL WV NO\$								
*	1	Health Waive	51	52	1	1.96 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	51	52	1	1.96 %	6	6	0	0.00 %
	H4ZN - EX	/JD HL WV \$\$								
	1	HEALTH WAIVE FL	33	33	0	0.00 %	10	9	-1	-10.00 %
		TOTAL FOR PLAN CODE:	33	33	0	0.00 %	10	9	-1	-10.00 %
	HAEX - ST	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	163	158	-5	-3.07 %	13	14	1	7.69 %
	2	EMP & SPOUSE	168	168	0	0.00 %	8	7	-1	-12.50 %
	3	EMP & CHILD(REN)	58	60	2	3.45 %	2	2	0	0.00 %
	4	FULL FAMILY	287	280	<i>-</i> 7	-2.44 %	19	21	2	10.53 %
	5	OPT1 & MEDICARE	5	5	0	0.00 %	0	0	0	0.00 %
	6	OPT2 & MEDICARE	9	11	2	22.22 %	0	0	0	0.00 %
	8	OPT4 & MEDICARE	1	1	0	0.00 %	0	0	0	0.00 %
	J	TOTAL FOR PLAN CODE:	691	683	-8	-1.16 %	42	44	2	4.76 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BUE		DIFFERENCE	OHANGE	BOL			
Y98										
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	30	28	-2	-6.67 %	0	0	0	0.00 %
	2	EMP & SPOUSE	19	18	-1	-5.26 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	17	19	2	11.76 %	1	1	0	0.00 %
	4	FULL FAMILY	51	51	0	0.00 %	2	2	0	0.00 %
	31	EMP & OEAI (ADULT)	o	1	1	100.00 %		0	0	0.00 %
	-	TOTAL FOR PLAN CODE:	117	117	0	0.00 %	3	3	0	0.00 %
	HD00 - BCN	I-EAST MI								
	2	EMP & SPOUSE	4	3	-1	-25.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	2	0	-2	-100.00 %	o	0	0	0.00 %
	4	FULL FAMILY	4	3	-1	-25.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	10	6	-4	-40.00 %	1	1	0	0.00 %
	HF00 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	3	4	1	33.33 %	0	0	0	0.00 %
	2	EMP & SPOUSE	12	12	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	2	2	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	24	25	1	4.17 %	3	3	0	0.00 %
	•	TOTAL FOR PLAN CODE:	41	43	2	4.88 %	3	3	0	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
**************************************		46								
Y98										
	HF01 - PRIC	ORITY HEALTH								
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	4	4	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	1	1	0	0.00 %
	HF02 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	5	4	-1	-20.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	7	6	-1	-14.29 %	0	0	0	0.00 %
	HIOO - HEAI	LTH ALLIANCE								
	1	EMPLOYEE ONLY	13	12	-1	-7.69 %	0	0	0	0.00 %
	2	EMP & SPOUSE	7	7	o	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	6	7	1	16.67 %	0	0	0	0.00 %
	4	FULL FAMILY	18	19	1	5.56 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	44	45	1	2.27 %	1	1	0	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y98										
	HJ00 - HEA	LTH PLUS								
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	4	1	33.33 %	1	1	0	0.00 %
	4	FULL FAMILY	8	11	3	37.50 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	13	17	4	30.77 %	1	1	0	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	7	8	1	14.29 %	1	1	0	0.00 %
	2	EMP & SPOUSE	6	6	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	5	2	66.67 %	0	1	1	0.00 %
	4	FULL FAMILY	33	38	5	15.15 %	0	1	1	0.00 %
		TOTAL FOR PLAN CODE:	49	57	8	16.33 %	1	3	2	200.00 %
	HMEX - PHE	P-LANSING								
	1	EMPLOYEE ONLY	42	44	2	4.76 %	2	2	0	0.00 %
	2	EMP & SPOUSE	65	68	3	4.62 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	42	40	-2	-4.76 %	0	0	0	0.00 %
	4	FULL FAMILY	227	234	7	3.08 %	10	10	0	0.00 %
		TOTAL FOR PLAN CODE:	376	386	10	2.66 %	13	13	0	0.00 %

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UNION CODE	PLAN COL	DE AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
			· · · · · · · · · · · · · · · · · · ·	•				-		
Y98										
	HN00 - GR	D VALLEY HLTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	o	. 0	0	0.00 %
	4	FULL FAMILY	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	2	1	100.00 %	0	0	0	0.00 %
	HP00 - BC	N-GR LAKES W								
	1	EMPLOYEE ONLY	2	1	-1	-50.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	2	1	-1	-50.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	4	5	1	25.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	9	8	-1	-11.11 %	1	1	0	0.00 %
	HX00 - BC	N OF SE MI								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	4	4	0	0.00 %
	2	EMP & SPOUSE	5	5	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	7	8	1	14.29 %	0	0	0	0.00 %
	4	FULL FAMILY	12	14	2	16.67 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	30	33	3	10.00 %	7	7	0	0.00 %
	L3ZN - ST	LIFE WAIVE								
	1	Life Waive	3	2	-1	-33.33 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	3	2	-1	-33.33 %	0	0	0	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
	OF HOX	OOVERAGE PEDOTAL HOR								
Y98										
	LAEX - ST 2	X LIFE APTE								
	0		44	44	0	0.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	44	44	0	0.00 %	3	3	0	0.00 %
	LRE0 - ST F	RED LIFE \$\$								
	o		66	66	0	0.00 %	12	12	0	0.00 %
		TOTAL FOR PLAN CODE:	66	66	0	0.00 %	12	12	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	0		66	66	0	0.00 %	12	12	0	0.00 %
		TOTAL FOR PLAN CODE:	66	66	0	0.00 %	12	12	0	0.00 %
	LUEX - ST 2	2X EMPL LIFE								
	0		1,381	1,397	16	1.16 %	82	83	1	1.22 %
		TOTAL FOR PLAN CODE:	1,381	1,397	16	1.16 %	82	83	1	1.22 %
	V3ZN - EX/J	ID VIS WVNO\$								
	1	Vision Waîve	57	59	2	3.51 %	10	9	-1	-10.00 %
	•	TOTAL FOR PLAN CODE:	57	59	2	3.51 %	10	9	-1	-10.00 %

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FOR PRE AND POST 4/1/2010 HIRE DATES BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		···								
Y98										
	VBW0 - ST	ATE VISION								
	1	EMPLOYEE ONLY	275	276	1	0.36 %	23	24	1	4.35 %
	2	EMP & SPOUSE	366	368	2	0.55 %	11	11	0	0.00 %
	3	EMP & CHILD(REN)	128	128	0	0.00 %	3	4	1	33.33 %
	4	FULL FAMILY	662	672	10	1.51 %	46	48	2	4.35 %
	4	TOTAL FOR PLAN CODE:	1,431	1,444	13	0.91 %	83	87	4	4.82 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE OPTION COVERAGE DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
			BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OFTION	GOVERAGE DESCRIPTION			Difference					
Y99										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	76	81	5	6.58 %	10	9	-1	-10.00 %
		TOTAL FOR PLAN CODE:	76	81	5	6.58 %	10	9	-1	-10.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	3	3	0	0.00 %	11	11	0	0.00 %
		TOTAL FOR PLAN CODE:	3	3	0	0.00 %	11	11	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	333	318	-15	-4.50 %	66	68	2	3.03 %
	2	EMP & SPOUSE	291	302	11	3.78 %	19	22	3	15.79 %
	3	EMP & CHILD(REN)	164	163	-1	-0.61 %	7	8	1	14.29 %
	4	FULL FAMILY	444	445	1	0.23 %	45	44	-1	-2.22 %
		TOTAL FOR PLAN CODE:	1,232	1,228	-4	-0.32 %	137	142	5	3.65 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	4	4	0	0.00 %	0	0	0	0.00 %
	2	5000SP/2500CH	14	15	1	7.14 %	1	2	1	100.00 %
	3	10000SP/5000CH	63	62	-1	-1.59 %	7	10	3	42.86 %
	4	25000SP/10000CH	504	509	5	0.99 %	36	36	0	0.00 %
	5	10000 CH ONLY	228	226	-2	-0.88 %	17	17	0	0.00 %
		TOTAL FOR PLAN CODE:	813	816	3	0.37 %	61	65	4	6.56 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y 99										
100										
	DLZN - DEF	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	390	397	7	1.79 %	65	70	5	7.69 %
		TOTAL FOR PLAN CODE:	390	397	7	1.79 %	65	70	5	7.69 %
	DMEX - STA	ATE DMO								
	1	EMPLOYEE ONLY	12	12	o	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	6	6	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	13	12	-1	-7.69 %	0	0	0	0.00 %
	4	FULL FAMILY	8	8	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	39	38	-1	-2.56 %	0	0	0	0.00 %
	DP00 - STA	TE PREV DNTL								
•	1	EMPLOYEE ONLY	1	1	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	1	0	-1	-100.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	1	-1	-50.00 %	0	0	0	0.00 %
	H2F0 - STA	TE CAT HLTH								
	1	EMPLOYEE ONLY	3	3	o	0.00 %	o	0	0	0.00 %
	2	EMP & SPOUSE	0	0	o	100.00 %		1	1	0.00 %
	3	EMP & CHILD(REN)	1	1	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	7	7	o	0.00 %	3	2	-1	-33.33 %
		TOTAL FOR PLAN CODE:	11	11	0	0.00 %	3	3	0	0.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010	•	
	COVERAGE	.	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y99										
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	75	81	6	8.00 %	10	9	-1	-10.00 %
		TOTAL FOR PLAN CODE:	75	81	6	8.00 %	10	9	-1	-10.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	19	20	1	5.26 %	18	17	-1	-5.56 %
		TOTAL FOR PLAN CODE:	19	20	1	5.26 %	18	17	-1	-5.56 %
	HAEX - STA	TE HLTH PLAN								
	1	EMPLOYEE ONLY	147	133	-14	-9.52 %	29	29	0	0.00 %
	2	EMP & SPOUSE	95	90	-5	-5.26 %	10	11	1	10.00 %
	3	EMP & CHILD(REN)	57	55	-2	-3.51 %	5	2	-3	-60.00 %
	4	FULL FAMILY	141	139	-2	-1.42 %	16	14	-2	-12.50 %
	5	OPT1 & MEDICARE	2	2	o	0.00 %	0	0	0	0.00 %
	6	OPT2 & MEDICARE	11	11	o	0.00 %	0	0	0	0.00 %
	8	OPT4 & MEDICARE	2	3	1	50.00 %	1	1	0	0.00 %
	31	EMP & OEAI (ADULT)	0	2	2	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	455	435	-20	-4.40 %	61	57	-4	-6.56 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER		PERCENT	BEFORE	AFTER	DIFFERENCE	PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y99										
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	33	28	-5	-15.15 %	5	5	0	0.00 %
	2	EMP & SPOUSE	18	17	-1	-5.56 %	1	2	1	100.00 %
	3	EMP & CHILD(REN)	33	30	-3	-9.09 %	0	0	0	0.00 %
	4	FULL FAMILY	50	47	-3	-6.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	134	122	-12	-8.96 %	7	8	1	14.29 %
	HD00 - BCN	I-EAST MI								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	3	3	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	10	10	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	15	15	0	0.00 %	1	1	0	0.00 %
	HF00 - PRIC	DRITY HEALTH								
	1	EMPLOYEE ONLY	9	11	2	22.22 %	4	4	0	0.00 %
	2	EMP & SPOUSE	9	9	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	9	10	1	11.11 %	1	1	0	0.00 %
	4	FULL FAMILY	21	24	3	14.29 %	3	2	-1	-33.33 %
		TOTAL FOR PLAN CODE:	48	54	6	12.50 %	9	8	-1	-11.11 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE	E	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y99										
	HF01 - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	3	3	0	0.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	1	2	1	100.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	4	2	100.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	6	9	3	50.00 %	2	2	0	0.00 %
	HF02 - PRIC	DRITY HEALTH								
	1	EMPLOYEE ONLY	o	1	1	100.00 %		0	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	5	3	-2	-40.00 %	0	0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	o	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	7	7	0	0.00 %	0	0	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	13	13	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	8	10	2	25.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	15	13	-2	-13.33 %	0	0	0	0.00 %
	4	FULL FAMILY	21	20	-1	-4.76 %	2	2	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	2	2	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	57	58	1	1.75 %	3	3	0	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGI OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Y99										
	HJ00 - HEA	LTH PLUS								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	3	2	-1	-33.33 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	o	0	0	0.00 %	1 .	1	0	0.00 %
	4	FULL FAMILY	4	5	1	25.00 %	1	1	0	0.00 %
	·	TOTAL FOR PLAN CODE:	9	9	0	0.00 %	2	2	0	0.00 %
	HL00 - TOT	AL HLTH CARE								
	3	EMP & CHILD(REN)	1	2	1	100.00 %	0	0	0	0.00 %
	•	TOTAL FOR PLAN CODE:	1	2	1	100.00 %	0	0	0	0.00 %
	HMCL - MÇ	LAREN HEALTH								
	1	EMPLOYEE ONLY	10	10	0	0.00 %	3	5	2	66.67 %
	2	EMP & SPOUSE	9	8	-1	-11.11 %	0	1	1	0.00 %
	3	EMP & CHILD(REN)	9	12	3	33.33 %	1	1	0	0.00 %
	4	FULL FAMILY	27	26	-1	-3.70 %	0	0	0	0.00 %
	32	EMP, OEAI & CHILD(REN)	0	1	1	100.00 %		0	0	0.00 %
	V	TOTAL FOR PLAN CODE:	55	<i>57</i>	2	3.64 %	4	7	3	75.00 %

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UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OF HON	OOVERAGE DECORM HOR							<u> </u>	
Y99										
	HMEX - PHI	P-LANSING								-
	1	EMPLOYEE ONLY	89	85	-4	-4.49 %	11	11	0	0.00 %
	2	EMP & SPOUSE	88	96	8	9.09 %	5	4	-1	-20.00 %
	3	EMP & CHILD(REN)	64	67	3	4.69 %	4	7	3	75.00 %
	4	FULL FAMILY	165	173	8	4.85 %	11	14	3	27.27 %
	31	EMP & OEAI (ADULT)	o	2	2	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	406	423	17	4.19 %	31	37	6	19.35 %
	HP00 - BCN	I-GR LAKES W								
	1	EMPLOYEE ONLY	2	1	-1	-50.00 %	2	1	-1	-50.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	6	4	-2	-33.33 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	11	8	-3	-27.27 %	3	2	-1	-33.33 %
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	9	8	-1	-11.11 %	2	3	1	50.00 %
	2	EMP & SPOUSE	6	5	-1	-16.67 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	6	6	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	16	16	0	0.00 %	1	2	1	100.00 %
	31	EMP & OEAI (ADULT)	0	1	1	100.00 %		0	0	0.00 %
		TOTAL FOR PLAN CODE:	37	36	-1	-2.70 %	4	6	2	50.00 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
***************************************		O TENTO E DE COME TION							_	
Y99										
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	1	0	-1	-100.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	1	0	-1	-100.00 %	1	1	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	o		23	23	o	0.00 %	5	5	0	0.00 %
		TOTAL FOR PLAN CODE:	23	23	0	0.00 %	5	5	0	0.00 %
	LRE0 - ST R	ED LIFE \$\$								
	0		61	61	0	0.00 %	14	14	0	0.00 %
		TOTAL FOR PLAN CODE:	61	61	0	0.00 %	14	14	0	0.00 %
	LREX - ST R	RED LIFE NO\$								
	0		67	62	-5	-7.46 %	15	15	0	0.00 %
		TOTAL FOR PLAN CODE:	67	62	-5	-7.46 %	15	15	0	0.00 %
	LUEX - ST 2	X EMPL LIFE								
	o		1,262	1,268	6	0.48 %	144	143	-1	-0.69 %
		TOTAL FOR PLAN CODE:	1,262	1,268	6	0.48 %	144	143	-1	-0.69 %

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UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST		
	COVERAG OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
Y99										
	V3ZN - EX/	ID VIS WVNO\$								
	1	Vision Waive	81	87	6	7.41 %	16	15	-1	-6.25 %
		TOTAL FOR PLAN CODE:	81	87	6	7.41 %	16	15	-1	-6.25 %
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	347	332	-15	-4.32 %	66	67	1	1.52 %
	2	EMP & SPOUSE	296	306	10	3.38 %	19	23	4	21.05 %
	3	EMP & CHILD(REN)	177	177	0	0.00 %	10	11	1	10.00 %
	4	FULL FAMILY	449	447	-2	-0.45 %	46	45	-1	-2.17 %
		TOTAL FOR PLAN CODE:	1,269	1,262	-7	-0.55 %	141	146	5	3.55 %

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UNION CODE		E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	COVERAGE OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z 60										
	DL01 - ST D	EP LIFE								
	3	10000SP/5000CH	11	11	0	0.00 %	3	3	0	0.00 %
	4	25000SP/10000CH	4	4	0	0.00 %	5	5	0	0.00 %
	5	10000 CH ONLY	2	2	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	17	17	0	0.00 %	8	8	0	0.00 %
	LAEX - ST 2	X LIFE APTE					•			
	0		14	14	0	0.00 %	6	6	0	0.00 %
		TOTAL FOR PLAN CODE:	14	14	0	0.00 %	6	6	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	0		7	7	0	0.00 %	9	9	0	0.00 %
		TOTAL FOR PLAN CODE:	7	7	0	0.00 %	9	9	o	0.00 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE		E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		DEDOGNE
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION		BOL	DITTINLITOL	GIMITOL	DOL		Dillakan	- Olimion
Z61										
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	19	19	o	0.00 %	6	6	0	0.00 %
	2	5000SP/2500CH	2	2	o	0.00 %	1	1	0	0.00 %
	3	10000SP/5000CH	24	23	-1	-4.17 %	8	7	-1	-12.50 %
	4	25000SP/10000CH	37	36	-1	-2.70 %	4	4	0	0.00 %
	5	10000 CH ONLY	18	19	1	5.56 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	100	99	-1	-1.00 %	20	19	-1	-5.00 %
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	1	1	o	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	o		104	103	-1	-0.96 %	35	36	1	2.86 %
		TOTAL FOR PLAN CODE:	104	103	-1	-0.96 %	35	36	1	2.86 %
	LREX - ST R	RED LIFE NO\$								
	0	-	90	89	-1	-1.11 %	36	34	-2	<i>-5.56</i> %
		TOTAL FOR PLAN CODE:	90	89	-1	-1.11 %	36	34	-2	-5.56 %

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FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODI	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	E COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	All									
Z62										
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	1	1	0	0.00 %	0	0	0	0.00 %
	2	5000SP/2500CH	1	1	0	0.00 %	0	0	0	0.00 %
	3	10000SP/5000CH	2	2	0	0.00 %	0	0	0	0.00 %
	4	25000SP/10000CH	5	5	0	0.00 %	0	0	0	0.00 %
	5	10000 CH ONLY	3	3	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	12	12	0	0.00 %	0	0	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	0		12	12	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	12	12	0	0.00 %	1	1	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	o		6	6	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	o	0.00 %	0	0	0	0.00 %

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FOR PATEND DATES. STITZUTT AND TOTIZO

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI	Ē	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z63										
	DL01 - ST D	EP LIFE								
	3	10000SP/5000CH	1	1	0	0.00 %	1	0	-1	-100.00 %
	4	25000SP/10000CH	33	31	-2	-6.06 %	36	34	-2	-5.56 %
	5	10000 CH ONLY	1	2	1	100.00 %	0	2	2	0.00 %
		TOTAL FOR PLAN CODE:	35	34	-1	-2.86 %	37	36	-1	-2.70 %
	LAEX - ST 2	X LIFE APTE								
	o		43	41	-2	-4.65 %	45	44	-1	-2.22 %
		TOTAL FOR PLAN CODE:	43	41	-2	-4.65 %	45	44	-1	-2.22 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OFFICI	OOYERAGE BEOOKII HOM								
Z64 °										
	DL01 - ST D	EP LIFE								
	2	5000SP/2500CH	o	0	0	0.00 %	2	0	-2	-100.00 %
	3	10000SP/5000CH	14	10	-4	-28.57 %	1	2	1	100.00 %
	4	25000SP/10000CH	58	61	3	5.17 %	15	16	1	6.67 %
	5	10000 CH ONLY	17	14	-3	-17.65 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	89	85	-4	-4.49 %	20	20	0	0.00 %
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	2	2	0	0.00 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	1	2	1	100.00 %
	LAEX - ST 2	X LIFE APTE								
	o		216	212	-4	-1.85 %	104	102	-2	-1.92 %
		TOTAL FOR PLAN CODE:	216	212	-4	-1.85 %	104	102	-2	-1.92 %

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UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
 	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	
Z 65											
	DL01 - ST D	EP LIFE									
	3	10000SP/5000CH	1	1	0	0.00 %	0	0	0	0.00 %	
	4	25000SP/10000CH	4	5	1	25.00 %	o	0	0	0.00 %	
	5	10000 CH ONLY	4	3	-1	-25.00 %	o	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	9	9	0	0.00 %	0	0	0	0.00 %	
	LAEX - ST 2	X LIFE APTE									
	o		22	22	0	0.00 %	o	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	22	22	o	0.00 %	0	0	0	0.00 %	

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE	<u> </u>	BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z67										
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	5	5	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	1	1	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	22	23	1	4.55 %	4	5	1	25.00 %
	2	EMP & SPOUSE	21	21	0	0.00 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	11	10	-1	-9.09 %	1	1	0	0.00 %
	4	FULL FAMILY	31	31	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	85	85	0	0.00 %	8	10	2	25.00 %
	DL01 - ST D	EP LIFE								
	2	5000SP/2500CH	2	2	o	0.00 %	0	0	0	0.00 %
	3	10000SP/5000CH	7	7	0	0.00 %	0	0	0	0.00 %
	4	25000SP/10000CH	35	35	0	0.00 %	1	1	0	0.00 %
	5	10000 CH ONLY	14	14	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	58	58	0	0.00 %	1	1	0	0.00 %
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	33	33	0	0.00 %	4	5	1	25.00 %
		TOTAL FOR PLAN CODE:	33	33	0	0.00 %	4	5	1	25.00 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

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Sorted by: Union Code Plan Code and Coverage Option with Descriptions

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	COVERAGI		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER	DIECEDENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	OHAROL
Z67										
	DMEX - STA	ATE DMO								
	2	EMP & SPOUSE	2	2	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	3	3	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	0	0	0	0.00 %
	H4ZN - EX/J	JD HL WV \$\$								
	1	HEALTH WAIVE FL	9	8	-1	-11.11 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	9	8	-1	-11.11 %	1	1	0	0.00 %
	HAEX - STA	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	1	2	1	100.00 %
	2	EMP & SPOUSE	6	5	-1	-16.67 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	3	3	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	9	9	o	0.00 %	1	1	0	0.00 %
	7	TOTAL FOR PLAN CODE:	24	23	-1	-4.17 %	3	4	1	33.33 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER	DIFFEDENCE	PERCENT	BEFORE	AFTER	DIFFERENCE	PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z67										
	HCEX - BC	N MID-MI								
	1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	0	0	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	3	3	0	0.00 %	1	1	o	0.00 %
	HMCL - MCI	LAREN HEALTH								
	1	EMPLOYEE ONLY	5	5	0	0.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	0	0	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	7	6	-1	-14.29 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	14	13	-1	-7.14 %	3	3	o	0.00 %
	HMEX - PHE	P-LANSING								
	1	EMPLOYEE ONLY	10	10	0	0.00 %	o	0	o	0.00 %
	2	EMP & SPOUSE	11	12	1	9.09 %	0	1	1	0.00 %
	3	EMP & CHILD(REN)	7	7	0	0.00 %	0	0	o	0.00 %
	4	FULL FAMILY	16	18	2	12.50 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	44	47	3	6.82 %	0	1	1	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Z67										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	0	0	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	2	2	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	1	1	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	o		91	91	0	0.00 %	8	10	2	25.00 %
		TOTAL FOR PLAN CODE:	91	91	0	0.00 %	8	10	2	25.00 %
	LRE0 - ST R	ED LIFE \$\$								
	o		5	5	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	1	1	0	0.00 %
	LREX - ST R	RED LIFE NO\$								
	0		5	5	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	1	1	0	0.00 %
	V4ZN - LSB	VIS WAIVE \$								
	1	LL VISION WV FL	6	6	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	1	1	0	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGI		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z67										
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	22	23	1	4.55 %	4	5	1	25.00 %
	2	EMP & SPOUSE	23	23	o	0.00 %	2	3	1	50.00 %
	3	EMP & CHILD(REN)	11	10	-1	-9.09 %	1	1	0	0.00 %
	4	FULL FAMILY	34	34	0	0.00 %	1	1	o	0.00 %
		TOTAL FOR PLAN CODE:	90	90	0	0.00 %	8	10	2	25.00 %
Z68										
	DL01 - ST D	EP LIFE								
	4	25000SP/10000CH	1	1	0	0.00 %	0	0	0	0.00 %
	5	10000 CH ONLY	1	1	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	0		1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	LREX - ST R	RED LIFE NO\$								
	o		2	2	o	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	o	0.00 %

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INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z 75										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	o	0	0.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1 .	1	0	0.00 %	0	0	0	0.00 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	6	6	o	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	12	12	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	3	0	0.00 %	o	0	0	0.00 %
	4	FULL FAMILY	10	10	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	31	31	0	0.00 %	0	0	0	0.00 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	3	3	0	0.00 %	o	0	0	0.00 %
	2	5000SP/2500CH	9	9	0	0.00 %	o	0	0	0.00 %
	3	10000SP/5000CH	19	19	o	0.00 %	0	0	0	0.00 %
	4	25000SP/10000CH	108	108	0	0.00 %	4	4	0	0.00 %
	5	10000 CH ONLY	17	17	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	156	156	0	0.00 %	5	5	0	0.00 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

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Sorted by: Union Code Plan Code and Coverage Option with Descriptions

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TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT

POST

4/1/2010

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4/1/2010

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FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION
FOR PAY END DATES: 9/17/2011 AND 10/1/2011

PRE

4/1/2010

PRE

4/1/2010

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PERCENT BEFORE AFTER **BEFORE** AFTER PERCENT COVERAGE DIFFERENCE CHANGE BOE DIFFERENCE CHANGE BOE BOE OPTION COVERAGE DESCRIPTION BOE Z75 **DLZN - DEPLIFE WV NO\$\$** 0 0 0 0.00% 55 1 1.85 % 54 DEP LIFE WAIVE 0 0 0.00 % 55 1 1.85 % **TOTAL FOR PLAN CODE:** 54 H3ZN - EX/JD HL WV NO\$ 0.00 % 0 0 0 1 14.29 % 1 Health Waive 7 8 0 0.00 % 0 0 8 1 14.29 % **TOTAL FOR PLAN CODE:** H4ZN - EX/JD HL WV \$\$ 0 0.00 % 2 0 0.00 % 0 0 HEALTH WAIVE FL 2 1 0.00% 0 2 0 0.00 % 0 2 **TOTAL FOR PLAN CODE: HAEX - STATE HLTH PLAN**

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MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

1

2

3

4

5

6

PLAN CODE AND DESCRIPTION

EMPLOYEE ONLY

EMP & CHILD(REN)

OPT1 & MEDICARE

OPT2 & MEDICARE

OPT4 & MEDICARE

TOTAL FOR PLAN CODE:

EMP & SPOUSE

FULL FAMILY

Universe: HR Human Resources - Benefits

UNION CODE

Sorted by: Union Code Plan Code and Coverage Option with Descriptions

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0.00 %

TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BUE		DIFFERENCE	CHANGE	DOL		Dittalication	0.0.002
275										
	HF00 - PRIC	RITY HEALTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	o	0.00 %
	LJEX - CIR/I	DIS/HRP 2X								
	0		266	267	1	0.38 %	12	12	0	0.00 %
	•	TOTAL FOR PLAN CODE:	266	267	1	0.38 %	12	12	0	0.00 %
	LRE0 - ST R	ED LIFE \$\$								
	0	• •	1	1	o	0.00 %	o	0	0	0.00 %
	_	TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	0	··· - ·	2	1	-1	-50.00 %	0	0	0	0.00 %
	· ·	TOTAL FOR PLAN CODE:	2	1	-1	-50.00 %	0	0	0	0.00 %
	HIEY - ST 2	X EMPL LIFE								
	0	71 mill w 1017 ha	31	32	1	3.23 %	0	0	0	0.00 %
	U	TOTAL FOR PLAN CODE:	31	32	1	3.23 %	0	0	0	0.00 %

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FOR PRE AND POST 4/1/2010 HIRE DATES BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Z 75										
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %
	VBW0 - STA	TE VISION								
	1	EMPLOYEE ONLY	6	6	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	13	13	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	3	3	o	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	10	10	0	0.00 %	0	0	0	0.00 %
	,	TOTAL FOR PLAN CODE:	32	32	0	0.00 %	0	0	o	0.00 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COD	E AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
		A STATE OF S								
Z76										
	D3ZN - EX I	DN WAIVE NO\$								
	1	Dental Waive	9	9	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	9	9	0	0.00 %	o	0	0	0.00 %
	D4ZN - EX/L	LL DN WV \$\$								
	1	DENTAL WAIVE FL	7	8	1	14.29 %	7	8	1	14.29 %
		TOTAL FOR PLAN CODE:	7	8	1	14.29 %	7	8	1	14.29 %
	DBEX - STA	ATE DENTAL								
	1	EMPLOYEE ONLY	93	92	-1	-1.08 %	26	26	0	0.00 %
	2	EMP & SPOUSE	79	78	-1	-1.27 %	6	6	0	0.00 %
	3	EMP & CHILD(REN)	35	37	2	5.71 %	3	3	0	0.00 %
	4	FULL FAMILY	119	121	2	1.68 %	15	16	1	6.67 %
		TOTAL FOR PLAN CODE:	326	328	2	0.61 %	50	51	1	2.00 %
	DL01 - ST D	DEP LIFE							•	
	1	1500SP/1000CH	2	2	0	0.00 %	0	0	0	0.00 %
	2	5000SP/2500CH	6	7	1	16.67 %	1	2	1	100.00 %
	3	10000SP/5000CH	27	25	-2	-7.41 %	0	1	1	0.00 %
	4	25000SP/10000CH	107	112	5	4.67 %	14	15	1	7.14 %
	5	10000 CH ONLY	48	49	1	2.08 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	190	195	5	2.63 %	17	20	3	17.65 %

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE			4/1/2010 4/1/2010					POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER		PERCENT	
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE	
Z76											
	DLZN - DEP	LIFE WV NO\$\$									
	1	DEP LIFE WAIVE	143	144	1	0.70 %	7	9	2	28.57 %	
		TOTAL FOR PLAN CODE:	143	144	1	0.70 %	7	9	2	28.57 %	
	DMEX - STA	TE DMO									
	2	EMP & SPOUSE	2	2	0	0.00 %	o	0	0	0.00 %	
	4	FULL FAMILY	2	2	0	0.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	4	4	o	0.00 %	0	0	0	0.00 %	
	DDAG STAT	TE PREV DNTL									
	DEUU-SIAI										
	1	EMPLOYEE ONLY	1	1	o	0.00 %	0	0	0	0.00 %	
	4	FULL FAMILY	1	0	-1	-100.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	2	1	-1	-50.00 %	0	0	0	0.00 %	
	H2F0 - STAT	E CAT HLTH									
	1	EMPLOYEE ONLY	o	0	o	100.00 %		1	1	0.00 %	
	2	EMP & SPOUSE	2	2	o		0	,	•		
					-	0.00 %	0	0	0	0.00 %	
	4	FULL FAMILY	4	3	-1	-25.00 %	0	0	0	0.00 %	
		TOTAL FOR PLAN CODE:	6	5	-1	-16.67 %	0	1	1	0.00 %	

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BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

OPTION COVERAGE DESCRIPTION BOE BOE DIFFERENCE CHANGE BOE BOE DIFFERENCE CHANGE Z76 H3ZN - EX/JD HL WV NO\$ 1 Health Waive 9 9 0 0.00 % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <th>ERCENT HANGE</th>	ERCENT HANGE
H3ZN - EX/JD HL WV NO\$ 1	
H3ZN - EXIJD HL WV NO\$ 1 Health Waive 9 9 0 0.00 % 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
1 Health Waive 9 9 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
TOTAL FOR PLAN CODE: 9 9 0 0.00% 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
H4ZN - EX/JD HL WV \$\$ 1 HEALTH WAIVE FL 16 17 1 6.25 % 8 10 2 28	0.00 %
1 HEALTH WAIVE FL 16 17 1 6.25 % 8 10 2 28	0.00 %
MARKEL MAD DI ALLOADIR (A. 47 4 AARR) A. 47 A. 48 A. 4	5.00 %
TOTAL FOR PLAN CODE: 16 17 1 6.25 % 8 10 2 25	5.00 %
HAEX - STATE HLTH PLAN	
1 EMPLOYEE ONLY 61 57 -4 -6.56 % 19 18 -1 •8	5.26 %
2 EMP & SPOUSE 37 39 2 5.41 % 2 2 0 0	0.00 %
3 EMP & CHILD(REN) 23 22 -1 -4.35 % 0 0 0 0	0.00 %
4 FULL FAMILY 76 76 0 0.00% 6 5 -1 -10	6.67 %
6 OPT2 & MEDICARE 5 5 0 0.00 % 0 0 0	0.00 %
TOTAL FOR PLAN CODE: 202 199 -3 -1.49 % 27 25 -2 -7	7.41 %
HCEX - BCN MID-MI	
1 EMPLOYEE ONLY 2 2 0 0.00% 0 0 0	0.00 %
2 EMP & SPOUSE 4 4 0 0.00 % 0 0 0	0.00 %
3 EMP & CHILD(REN) 5 3 -2 -40.00 % 0 0 0 0	0.00 %
4 FULL FAMILY 8 7 -1 -12.50 % 1 1 0 0	
TOTAL FOR PLAN CODE: 19 16 -3 -15.79 % 1 1 0 0	0.00 %

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	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z76										
	HD00 - BCN	-EAST MI								
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	1	-1	-50.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	3	2	-1	-33.33 %	1	1	0	0.00 %
	HEOD - PRIC	ORITY HEALTH								
	1	EMPLOYEE ONLY	3	3	0	0.00 %	0	0	0	0.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	3	3	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	7	7	0	0.00 %	0	0	0	0.00 %
	-1	TOTAL FOR PLAN CODE:	15	15	0	0.00 %	1	1	0	0.00 %
	LIEGA BDIO	DRITY HEALTH								
			0	o	o	100.00 %		1	1	0.00 %
	2	EMP & SPOUSE	0	o	o	100.00 %		1	1	0.00 %
		TOTAL FOR PLAN CODE:	U	U	U	100.00 /6		•	•	******
	HI00 - HEAL	TH ALLIANCE								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	3	2	1	-33.33 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	4	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	2	3	1	50.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	11	11	0	0.00 %	2	2	0	0.00 %

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UNION CODE	PLAN CODE	AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	BUE	DIFFERENCE	OHANGE	DOL		Dill I LICENSE	011/11/02
276										
	HJ00 - HEAL	TH PLUS								
	4	FULL FAMILY	2	2	0	0.00 %	o	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	0	0	0	0.00 %
	HMCL - MCL	AREN HEALTH								
	1	EMPLOYEE ONLY	2	2	0	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	3	3	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	0	0	o	0.00 %
	HMEX - PHP	-LANSING				•				
	1	EMPLOYEE ONLY	12	15	3	25.00 %	2	2	0	0.00 %
	2	EMP & SPOUSE	11	11	0	0.00 %	0	0	0	0.00 %
	3	EMP & CHILD(REN)	4	8	4	100.00 %	1	1	0	0.00 %
	4	FULL FAMILY	14	15	1	7.14 %	5	5	0	0.00 %
		TOTAL FOR PLAN CODE:	41	49	8	19.51 %	8	8	o	0.00 %
	HP00 - BCN-	-GR LAKES W		*						
	1	EMPLOYEE ONLY	0	0	o	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	1	0	-1	-100.00 %	1	1	0	0.00 %
	_	TOTAL FOR PLAN CODE:	1	0	-1	-100.00 %	2	2	0	0.00 %

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UNION CODE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
1 11 12				-						
Z7 6										
	HX00 - BCN	OF SE MI								
	1	EMPLOYEE ONLY	5	6	1	20.00 %	2	3	1	50.00 %
	2	EMP & SPOUSE	2	2	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	2	3	1	50.00 %	1	1	0	0.00 %
	4	FULL FAMILY	7	8	1	14.29 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	16	19	3	18.75 %	6	7	1	16.67 %
	LRE0 - ST R	ED LIFE \$\$								
	0		57	57	0	0.00 %	18	18	0	0.00 %
		TOTAL FOR PLAN CODE:	57	57	0	0.00 %	18	18	0	0.00 %
	LREX - ST F	RED LIFE NO\$								
	o		58	57	-1	-1.72 %	22	21	-1	-4.55 %
		TOTAL FOR PLAN CODE:	58	57	-1	-1.72 %	22	21	-1	-4.55 %
	LUEX - ST 2	X EMPL LIFE								
	0		298	301	3	1.01 %	45	47	2	4.44 %
		TOTAL FOR PLAN CODE:	298	301	3	1.01 %	45	47	2	4.44 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	14	17	3	21.43 %	3	2	-1	-33.33 %
		TOTAL FOR PLAN CODE:	14	17	3	21.43 %	3	2	-1	-33.33 %

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UNION CODE	E PLAN COD	PLAN CODE AND DESCRIPTION		PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG OPTION	E COVERAGE DESCRIPTION	4/1/2010 BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
Z 76										
	VBW0 - STA	ATE VISION								
	1	EMPLOYEE ONLY	93	94	1	1.08 %	29	28	-1	-3.45 %
	2	EMP & SPOUSE	83	82	-1	-1.20 %	7	10	3	42.86 %
	3	EMP & CHILD(REN)	36	36	0	0.00 %	4	4	0	0.00 %
	4	FULL FAMILY	120	121	1	0.83 %	17	17	0	0.00 %
		TOTAL FOR PLAN CODE:	332	333	1	0.30 %	57	59	2	3.51 %

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UNION CODE			PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE		BEFORE	AFTER	DIFFERDEROF	PERCENT	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BUE	BUE	DIFFERENCE	OHMIGE
Z80										
	DBEX - STA	TE DENTAL								
	4	FULL FAMILY	0	0	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	2	2	0	0.00 %
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	o	0	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	HAEX - STA	TE HLTH PLAN								
	4	FULL FAMILY	0	0	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	2	2	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	0		0	0	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	2	2	0	0.00 %
	VBW0 - STA	TE VISION								
	4	FULL FAMILY	0	0	0	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	2	2	0	0.00 %

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UNION CODE	PLAN COE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAG		4/1/2010 BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	<u> </u>	TOTAL DECOMM NOT	502	502	DIFFERENCE	UIANUL	BOL	BOE	DITTENENCE	ONANGE
Z81										
	D4ZN - EX/	LL DN WV \$\$								
	1	DENTAL WAIVE FL	o	0	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	DLZN - DE	PLIFE WV NO\$\$								
	1	DEP LIFE WAIVE	o	0	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	H4ZN - EX/	JD HL WV \$\$								
	1	HEALTH WAIVE FL	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	LAEX - ST	2X LIFE APTE								
	0		o	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	V3ZN - EX/	3ZN - EX/JD VIS WVNO\$								
	1	Vision Walve	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %

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UNION CODE		AND DESCRIPTION	PRE PRE 4/1/2010 4/1/2010			PEROFUE	POST 4/1/2010	POST 4/1/2010		PERCENT
	COVERAGE		BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	CHANGE
	OPTION	COVERAGE DESCRIPTION	BOE	DOL	DITTERCHOL	OHAHOL	DOL			
Z82										
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	o	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	DL01 - ST D	EP LIFE								
	4	25000SP/10000CH	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	LAEX - ST 2	X LIFE APTE								
	0		0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %

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UNION CODE	PLAN CODE AND DESCRIPTION		PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
	OFTION	GOVERAGE DESCRIPTION			Dit I EILEITOE	0.17.11.02				
Z84										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	o	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	DLZN - DEPI	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	o	0	o	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %
	V3ZN - EX/J	D VIS WVNO\$								
	1	Vision Waive	0	0	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	o	0.00 %

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UNION CODE	UNION CODE PLAN CODE AND DESCRIPTION	PRE 4/1/2010	PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010			
	COVERAGE		BEFORE	AFTER		PERCENT	BEFORE	AFTER	DIFFERENCE	PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z86										
	D3ZN - EX D	N WAIVE NO\$								
	1	Dental Waive	7	8	1	14.29 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	7	8	1	14.29 %	2	3	1	50.00 %
	D4ZN - EX/L	L DN WV \$\$								
	1	DENTAL WAIVE FL	2	2	0	0.00 %	7	6	-1	-14.29 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	7	6	-1	-14.29 %
	DBEX - STA	TE DENTAL								
	1	EMPLOYEE ONLY	8	9	1	12.50 %	9	9	0	0.00 %
	2	EMP & SPOUSE	17	17	0	0.00 %	13	15	2	15.38 %
•	3	EMP & CHILD(REN)	3	3	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	17	16	-1	-5.88 %	28	29	1	3.57 %
		TOTAL FOR PLAN CODE:	45	45	0	0.00 %	51	54	3	5.88 %
	DL01 - ST D	EP LIFE								
	1	1500SP/1000CH	1	1	o	0.00 %	1	1	0	0.00 %
	3	10000SP/5000CH	2	2	0	0.00 %	4	4	0	0.00 %
	4	25000SP/10000CH	15	15	0	0.00 %	19	19	0	0.00 %
	5	10000 CH ONLY	3	3 `	0	0.00 %	3	4	1	33.33 %
		TOTAL FOR PLAN CODE:	21	21	o	0.00 %	27	28	1	3.70 %

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UNION CODE		LAN CODE AND DESCRIPTION		PRE 4/1/2010			POST 4/1/2010	POST 4/1/2010		DEDOENT
	COVERAGE OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE
•		"				7.47				
Z86										
	DLZN - DEP	LIFE WV NO\$\$								
	1	DEP LIFE WAIVE	25	26	1	4.00 %	25	26	1	4.00 %
		TOTAL FOR PLAN CODE:	25	26	1	4.00 %	25	26	1	4.00 %
	H2F0 - STAT	E CAT HLTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	1	1	0	0.00 %
	H3ZN - EX/J	D HL WV NO\$								
	1	Health Waive	6	7	1	16.67 %	2	3	1	50.00 %
		TOTAL FOR PLAN CODE:	6	7	1	16.67 %	2	3	1	50.00 %
	H4ZN - EX/J	D HL WV \$\$								
	1	HEALTH WAIVE FL	5	5	o	0.00 %	10	9	-1	-10.00 %
		TOTAL FOR PLAN CODE:	5	5	o	0.00 %	10	9	-1	-10.00 %

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			BEFORE							PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z 86										
	HAEX - STA	ATE HLTH PLAN								
	1	EMPLOYEE ONLY	8	9	1	12.50 %	7	7	0	0.00 %
	2	EMP & SPOUSE	5	5	0	0.00 %	6	6	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	10	9	-1	-10.00 %	22	22	0	0.00 %
	5	OPT1 & MEDICARE	o	0	0	0.00 %	1	1	0	0.00 %
	6	OPT2 & MEDICARE	2	2	0	0.00 %	0	1	1	0.00 %
	8	OPT4 & MEDICARE	1	1	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	27	27	o	0.00 %	37	38	1	2.70 %
	HF00 - PRIC	DRITY HEALTH								
	2	EMP & SPOUSE	1	1	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	0	0.00 %	0	0	0	0.00 %
	4	FULL FAMILY	3	. 3	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	5	5	0	0.00 %	2	2	0	0.00 %
	HI00 - HEAL	TH ALLIANCE								
	2	EMP & SPOUSE	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates Universe: HR Human Resources - Benefits

Sorted by: Union Code Plan Code and Coverage Option with Descriptions

Page 158 of 162

TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		
										PERCENT
	OPTION	COVERAGE DESCRIPTION	BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z86										
	HMEX - PHF	-LANSING								
	1	EMPLOYEE ONLY	0	0	0	0.00 %	1	1	0	0.00 %
	2	EMP & SPOUSE	4	4	0	0.00 %	1	1	0	0.00 %
	3	EMP & CHILD(REN)	1	1	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	1	2	1	100.00 %
		TOTAL FOR PLAN CODE:	6	6	0	0.00 %	4	5	1	25.00 %
	HP00 - BCN	-GR LAKES W								
	2	EMP & SPOUSE	1	1	o	0.00 %	o	0	0	0.00 %
	3	EMP & CHILD(REN)	0	0	0	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	1	1	0	0.00 %	0	0	0	0.00 %
		TOTAL FOR PLAN CODE:	2	2	0	0.00 %	1	1	0	0.00 %
	HX00 - BCN	OF SE MI								
	2	EMP & SPOUSE	0	0	o	0.00 %	1	1	0	0.00 %
	4	FULL FAMILY	0	0	o	0.00 %	2	2	0	0.00 %
		TOTAL FOR PLAN CODE:	0	0	0	0.00 %	3	3	0	0.00 %
	L3ZN - ST L	IFE WAIVE								
	1	Life Waive	1	1	0	0.00 %	1	1	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	1	1	0	0.00 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Union Code Plan Code and Coverage Option with Descriptions

Page 159 of 162

TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

UNION CODE	PLAN COI	DE AND DESCRIPTION GE	PRE 4/1/2010 BEFORE	PRE 4/1/2010 AFTER		PERCENT	POST 4/1/2010 BEFORE	POST 4/1/2010 AFTER		PERCENT
	OPTION		BOE	BOE	DIFFERENCE	CHANGE	BOE	BOE	DIFFERENCE	CHANGE
Z86										
	LAEX - ST	2X LIFE APTE								
	0		54	55	1	1.85 %	64	63	-1	-1.56 %
		TOTAL FOR PLAN CODE:	54	55	1	1.85 %	64	63	-1	-1.56 %
	LRE0 - ST	RED LIFE \$\$								
	0		1	1	o	0.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	3	3	0	0.00 %
	LREX - ST	RED LIFE NO\$								
	0		1	1	0	0.00 %	3	3	0	0.00 %
		TOTAL FOR PLAN CODE:	1	1	0	0.00 %	3	3	0	0.00 %
	V3ZN - EX	JD VIS WVNO\$								
	1	Vision Waive	8	9	1	12.50 %	4	4	0	0.00 %
		TOTAL FOR PLAN CODE:	8	9	1	12.50 %	4	4	0	0.00 %
	VBW0 - ST	ATE VISION								
	1	EMPLOYEE ONLY	9	10	1	11.11 %	10	10	0	0.00 %
	2	EMP & SPOUSE	18	18	o	0.00 %	15	17	2	13.33 %
	3	EMP & CHILD(REN)	2	2	o	0.00 %	2	2	0	0.00 %
	4	FULL FAMILY	17	16	-1	-5.88 %	29	30	1	3.45 %
		TOTAL FOR PLAN CODE:	46	46	0	0.00 %	56	59	3	5.36 %

MBN-0098 insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Universe: HR Human Resources - Benefits

Sorted by: Union Code Plan Code and Coverage Option with Descriptions

Page 160 of 162

TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

	UNION CODE		PLAN CODE AND DESCRIPTION COVERAGE		PRE 4/1/2010		DEDOCNIT	POST 4/1/2010	POST 4/1/2010			
-		OPTION	COVERAGE DESCRIPTION	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	BEFORE BOE	AFTER BOE	DIFFERENCE	PERCENT CHANGE	
	Z88											
		DBEX - STA	TE DENTAL									
		1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	0	0.00 %	
			TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %	
		HMEX - PHP	-LANSING									
		1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	o	0.00 %	
			TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %	
		LAEX - ST 2	X LIFE APTE									
		0		o	0	o	0.00 %	1	1	o	0.00 %	
			TOTAL FOR PLAN CODE:	0	0	0	0.00 %	1	1	0	0.00 %	
		LUEX - ST 2	X EMPL LIFE									
		0		1	1	0	0.00 %	2	2	0	0.00 %	
			TOTAL FOR PLAN CODE:	1	1	0	0.00 %	2	2	0	0.00 %	
		VBW0 - STA	TE VISION									
		1	EMPLOYEE ONLY	1	1	0	0.00 %	0	0	o	0.00 %	
			TOTAL FOR PLAN CODE:	1	1	0	0.00 %	0	0	0	0.00 %	
		GRAND TOT	AI · DENTAI	42,965	42,890	-75	-0.17 %	5,124	5,303	179	3.49 %	
		OUTAID TO	APP PERIAL	72,000	42,030	-10	-0.11 /0	0,124	0,000	119	3.40 /6	

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates

Page 161 of 162

Universe: HR Human Resources - Benefits

Sorted by: Union Code Plan Code and Coverage Option with Descriptions

TODAY'S DATE: 10/21/2011

INSURANCE ENROLLMENT ANALYSIS BEFORE AND AFTER BENEFITS OPEN ENROLLMENT FOR PRE AND POST 4/1/2010 HIRE DATES

BY UNION CODE PLAN CODE AND COVERAGE OPTION

FOR PAY END DATES: 9/17/2011 AND 10/1/2011

 UNION CODE	PLAN CODE AND DESCRIPTION COVERAGE OPTION COVERAGE DESCRIPTION	PRE 4/1/2010 BEFORE BOE	PRE 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE	POST 4/1/2010 BEFORE BOE	POST 4/1/2010 AFTER BOE	DIFFERENCE	PERCENT CHANGE
	GRAND TOTAL: DEPENDENT LIFE	38,153	38,335	182	0.48 %	4,971	5,200	229	4.61 %
	GRAND TOTAL: EMPLOYEE LIFE	45,735	45,663	-72	-0.16 %	6,030	6,138	108	1.79 %
	GRAND TOTAL: HEALTH	42,867	42,784	-83	-0.19 %	5,131	5,305	174	3.39 %
	GRAND TOTAL: VISION	42,967	42,889	-78	-0.18 %	5,132	5,316	184	3.59 %

MBN-0098 Insurance Enrollment Analysis - Pre and Post 4/1/2010 Hire Dates
Universe: HR Human Resources - Benefits
Sorted by: Union Code Plan Code and Coverage Option with Descriptions

Page 162 of 162

Exhibit 3.F

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI DENISE MILLER and MICHELLE JOHNSON,

No. 2:12-cv-10038

HON. DAVID M. LAWSON

MAG. MICHAEL J. HLUCHANIUK

Plaintiffs,

 \mathbf{v}

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

Michael J. Steinberg (P43085) American Civil Liberties Union Fund of Michigan Attorney for Plaintiffs 2966 Woodward Avenue Detroit, MI 48201 (313) 578-6814

Margaret A. Nelson (P30342) Mark E. Donnelly (P39281) Attorney for Defendant Michigan Department of Attorney General Public Employment, Elections & Tort Division P.O. Box 30736 Lansing, MI 48909 (517) 373-6434 Amanda C. Goad American Civil Liberties Union Foundation Attorney for Plaintiffs 125 Broad Street, 18th Floor New York, NY 10004 (212) 549-2661

John A. Knight American Civil Liberties Foundation Attorney for Plaintiffs 180 N. Michigan Ave, Ste 2300 Chicago, IL 60601 (312) 201-9740

DEFENDANT'S ANSWERS TO PLAINTIFFS' REQUESTS
FOR ADMISSIONS

REQUEST FOR ADMISSION NO. 1:

Admit that P.A. 297 is the first Michigan statute to place any limits on the categories of Insureds to whom local governmental units could provide health insurance benefits.

ANSWER: The Defendant cannot truthfully admit nor deny the request because the Defendant—after having made reasonable inquiries—lacks knowledge or information sufficient to form a belief as to its ultimate truth. Further answering, the Defendant is unaware of any law passed prior to the enactment of PA 297 that placed any limits on the categories of Insureds to whom local governmental units could provide health insurance benefits.

REQUEST FOR ADMISSION NO. 2:

Admit that there are no Michigan statutes other than P.A. 297 that limit the categories of Insureds to whom local governmental units could provide health insurance benefits.

ANSWER: The Defendant cannot truthfully admit nor deny the request because the Defendant—after having made reasonable inquiries—lacks knowledge or information sufficient to form a belief as to its ultimate truth. Further answering, the Defendant is unaware of any statutes other than PA 297 that limits the categories of Insureds to whom local governmental units could provide health insurance benefits.

REQUEST FOR ADMISSION NO. 3:

Admit that the amount of funding that the State provides to local

governmental units does not depend on whether or not the local governmental unit

provides health insurance benefits to Other Insured Adults.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 4:

Admit that the State provides funding to most cities, villages, townships, and

counties, including funding provided through shared sales tax revenue and grants.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 5:

Admit that the State does not require cities, villages, townships, and counties

to spend shared sales tax revenue on any particular expenditures.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 6:

Admit that the amount of shared sales tax revenue that the State provides to

cities, villages, townships, and counties does not depend on the number of Insureds

to whom the cities, villages, townships, or counties provide health insurance

benefits.

ANSWER: Admitted.

3

REQUEST FOR ADMISSION NO. 7:

Admit that the amount of shared sales tax revenue that the State provides to

cities, villages, townships, and counties does not depend on whether cities, villages,

townships, or counties provide health insurance benefits to Other Insured Adults.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 8:

Admit that the amount of grants and other state funding (exclusive of shared

sales tax revenue) that the State provides to cities, villages, townships, and counties

does not depend on the number of Insureds to whom the cities, villages, townships,

or counties provide health insurance benefits.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 9:

Admit that the amount of grants and other state funding (exclusive of shared

sales tax revenue) that the State provides to cities, villages, townships, and counties

does not depend on whether cities, villages, townships, or counties provide health

insurance benefits to Other Insured Adults.

ANSWER: Admitted.

4

REQUEST FOR ADMISSION NO. 10:

Admit that the State provides state funding to public school districts,

community colleges, and other governmental units (including but not limited to

authorities, commissions, boards, and other branches of public service).

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 11:

Admit that the amount of state funding that the State provides to public

school districts, community colleges, and other governmental units (including but

not limited to authorities, commissions, boards, and other branches of public

service) does not depend on the number of Insureds to whom the public school

districts, community colleges, and other governmental units provide health

insurance benefits.

ANSWER: Admitted.

REQUEST FOR ADMISSION NO. 12:

Admit that the State does not measure or track the amount of shared sales

tax revenue and/or grants, or other state funding that cities, villages, townships,

counties, public school districts, community colleges, and other governmental units

(including but not limited to authorities, commissions, boards, and other branches

of public service) spend on health insurance benefits for Insureds other than Public

Employees.

5

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could measure or track the information contemplated in this request.

REQUEST FOR ADMISSION NO. 13:

Admit that the State does not track the amount of shared sales tax revenue and/or grants or other state funding that cities, villages, townships, counties, public school districts, community colleges, and other governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) spend on health insurance benefits for Other Insured Adults.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could track the information contemplated in this request.

REQUEST FOR ADMISSION NO. 14:

Admit that the State does not require cities, villages, townships, counties, public school districts, community colleges, and other governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) to report to the State how much shared sales tax revenue and/or grants or

other state funding they spend on health insurance benefits for Insureds other than Public Employees.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could require local units to report the information contemplated in this request.

REQUEST FOR ADMISSION NO. 15:

Admit that the State does not require cities, villages, townships, counties, public school districts, community colleges, and other governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) to report to the State how much shared sales tax revenue and/or grants or other state funding they spend on health insurance benefits for Other Insured Adults.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could require local units to report the information contemplated in this request.

REQUEST FOR ADMISSION NO. 16:

Admit that the State does not receive information from cities, villages, townships, counties, public school districts, community colleges, and other

governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) regarding how much shared sales tax revenue and/or grants or other state funding they spend on health insurance benefits for Insureds other than Public Employees.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could require local units to report the information contemplated in this request.

Moreover, the State does require that the approximately 1856 local unit of government in Michigan (not including local school districts) to file audit reports and F65 reports documenting their expenditures. Depending on the detail supplied by each individual local unit of government costs related to health insurance benefits could be included in the reports.

REQUEST FOR ADMISSION NO. 17:

Admit that the State does not receive information from cities, villages, townships, counties, public school districts, community colleges, and other governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) regarding how much shared sales tax revenue and/or grants or other state funding they spend on health insurance benefits for Other Insured Adults.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could require local units to report the information contemplated in this request.

Moreover, the State does require that the approximately 1856 local unit of government in Michigan (not including local school districts) to file audit reports and F65 reports documenting their expenditures. Depending on the detail supplied by each individual local unit of government costs related to health insurance benefits could be included in the reports.

REQUEST FOR ADMISSION NO. 18:

Admit that the State does not require cities, villages, townships, counties, public school districts, community colleges, and other governmental units (including but not limited to authorities, commissions, boards, and other branches of public service) to report to the State how much they spend on health insurance benefits for Insureds other than Public Employees.

ANSWER: In a broad and general sense the request is admitted. However, there may be instances where a local governmental unit is either being governed by an emergency manager or has been identified as fiscally unstable where the state could require local units to report the information contemplated in this request.

REQUEST FOR ADMISSION NO. 19:

Admit that You do not know the number of domestic partners who will marry in order to continue receiving health benefits after passage of P.A. 297.

ANSWER: Admitted.

Respectfully submitted,

Bill Schuette Attornev General

Mark E. Donnelly (P39281)
Assistant Attorney General
Public Employment, Elections
& Tort Division

P.O. Box 30736 Lansing MI 4890

Lansing, MI 48909-8236

(517) 373-6434

Email: donnellym@michigan.gov

Dated: April 16, 2012

CERTIFICATE OF SERVICE

I hereby certify that on April 16, 2012, I served a copy of the above document in this matter on all counsel of record and parties *in pro per* at their last known addresses via first class mail by depositing same in a United States Post Office depository in Lansing, Michigan with first class postage fully paid.

Wendy Todd

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Exhibit 3.G

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI DENISE MILLER and MICHELLE JOHNSON,

No. 2:12-cv-10038

HON. DAVID M. LAWSON

MAG. MICHAEL J. HLUCHANIUK

Plaintiffs,

ν

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

Michael J. Steinberg (P43085) American Civil Liberties Union Fund of Michigan Attorney for Plaintiffs 2966 Woodward Avenue Detroit, MI 48201 (313) 578-6814

Amanda C. Goad American Civil Liberties Union Foundation Attorney for Plaintiffs 125 Broad Street, 18th Floor New York, NY 10004 (212) 549-2661

Margaret A. Nelson (P30342)
Mark E. Donnelly (P39281)
Attorney for Defendant
Michigan Department of Attorney General
Public Employment, Elections & Tort Division
P.O. Box 30736
Lansing, MI 48909
(517) 373-6434

John A. Knight American Civil Liberties Foundation Attorney for Plaintiffs 180 N. Michigan Ave, Ste 2300 Chicago, IL 60601 (312) 201-9740

DEFENDANT'S SUPPLEMENTAL ANSWERS TO PLAINTIFFS' INTERROGATORIES NUMBER 1 AND 15

INTERROGATORY NO. 1:

Identify the amount of State funds spent on health insurance benefits for Insureds in the following governmental units and specify the figures, calculations, or statistics the State maintains related to these expenditures: (i) counties; (ii) cities; (iii) villages; (iv) townships; (v) K-12 school districts; (vi) intermediate school districts (ISDs) and/or regional educational service agencies (RESAs); (vii) community colleges; and (viii) authorities, including but not limited to airport, harbor, or port authorities, identifying the precise nature and form of the figures, calculations, or statistics that are maintained, the source of such information, how often this information is updated, and the individuals and/or agencies responsible for compiling and/or maintaining this information.

ANSWER: The Defendant does not know the amount of State funds spent on health insurance benefits for Insureds in the governmental units identified in this interrogatory.

Further, and specific to K-12 school districts, Michigan public school districts report financial information to the Center for Education Performance and Information (CEPI) via the Financial Information Database (FID). That dataset includes information related to how the district utilized funds. The information is public and may be accessed at: http://www.michigan.gov/cepi/0,4546,7-113-21423_35782_40437---,00.html

FID Data is available for fiscal years 2005-2011, and the data can be used to show how much the district expended for health care benefits (Object Codes 21xx) in each major functional category (classroom instruction, support services, etc.). It does not provide the funding source for those benefits.

INTERROGATORY NO. 2:

Provide the total amount of state funding that You distribute to local governmental units (including but not limited to counties, cities, villages, townships, K-12 school districts, ISDs, RESAs, community colleges, and authorities), both in the aggregate and broken down by category, including but not limited to: shared sales tax revenue, grant funding, public school funding, and community college funding.

ANSWER: See attached copy of Actual Revenue Sharing Payments FY 2007 – FY 2012, bate stamped page SOM000993, provided on the attached CD.

Also attached in electronic format only is a spreadsheet (provided in password protected native format) with information related to the total amount of State School Aid funding distributed to Michigan Public Schools for fiscal year 2007-2011. The spreadsheet also includes the funds distributed to public schools during fiscal year 2012. The 2012 funding includes payments made between October 2011 and April 2012 or approximately 7/11 of the total 2012 State School Aid. There are four remaining payments to be made in fiscal year 2012 (May-August).

The State School Aid payments may be used at the districts discretion to fund school operations. The local school board and administration determine how the district will utilize the district revenues.

On Information and Belief:

David Murley

Deputy Legal Counsel Governor Rick Snyder

Subscribed and sworn to before me, a notary public in and for the County of Clinton , this 27th day of

Notary Public/

April, 2012.

My commission expires: 12

COUNTY OF CLINTON

My Commission Expires Dec. 29, 2016 CERTIFICATE OF SERVICE

I hereby certify that on April <u>27</u>, 2012, I served a copy of the above document in this matter on all counsel of record and parties in pro per at their last known addresses via first class mail by depositing same in a United States Post Office depository in Lansing, Michigan with first class postage fully paid.

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Exhibit 3.H

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI DENISE MILLER and MICHELLE JOHNSON,

No. 2:12-cv-10038

HON. DAVID M. LAWSON

MAG. MICHAEL J. HLUCHANIUK

Plaintiffs,

v

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

Michael J. Steinberg (P43085) American Civil Liberties Union Fund of Michigan Attorney for Plaintiffs 2966 Woodward Avenue Detroit, MI 48201 (313) 578-6814

Margaret A. Nelson (P30342)
Mark E. Donnelly (P39281)
Attorney for Defendant
Michigan Department of Attorney General
Public Employment, Elections & Tort Division
P.O. Box 30736
Lansing, MI 48909
(517) 373-6434

Amanda C. Goad American Civil Liberties Union Foundation Attorney for Plaintiffs 125 Broad Street, 18th Floor New York, NY 10004 (212) 549-2661

John A. Knight American Civil Liberties Foundation Attorney for Plaintiffs 180 N. Michigan Ave, Ste 2300 Chicago, IL 60601 (312) 201-9740

DEFENDANT'S SUPPLEMENTAL RESPONSE TO INTERROGATORY 10

INTERROGATORY NO. 1:

Provide all reasons why the State provides health insurance benefits not only to its employees, but also to its employees' spouses and dependents.

ANSWER: See attached minutes from various Michigan Civil Service Commission meetings:

- 4/24/53, item no. 22, bates stamped SOM001015: The Commission first requested staff to explore the possibilities of health and hospital insurance programs for state employees;
- 1/3/56, item 21, bates stamped SOM001016 SOM001018: The Commission received a statement from staff regarding the study of group insurance in the state's civil service; the Commission requested a progress report for later in the year;
- 1/3/56, Longevity Compensation Plan, bates stamped SOM001019: statement
 of the Commission's rationale for offering certain benefits, including health
 insurance;
- 11/7/60, item 14, bates stamped SOM001020: Commission's adoption of the motion to make a group health plan available to all classified employees; and that those employees of the state not under civil service jurisdiction, including employees of the judiciary and the legislature as well as elected and appointed state officials be allowed to participate if the Legislature so desires;

Subsequent minutes discussing the adoption of a contract; providing enrollment numbers; and subsequent discussion of contribution rates – bates stamped SOM001021 - SOM001028.

On Information and Belief

David Murley

Deputy Legal Counsel Governor Rick Snyder

Subscribed and sworn to before me, A notary public in and for the County ___, this <u>Zq</u>44 day of EALEN

2012

Notary Public, Ester Courty, Acting in Incham My commission expires: ルンパナラ

LYNN DENISE SEAKS

NOTARY PUBLIC . EATON COUNTY, MI MY COMMISSION EXPIRES: 11-24-2013 (MAHDAI NI BAITGA)

CERTIFICATE OF SERVICE

I hereby certify that on May 29, 2012, I served a copy of the above document in this matter on all counsel of record and parties in proper at their last known addresses via e-mail and first class mail by depositing same in a United States Post Office depository in Lansing, Michigan with first class postage fully paid.

April 24, 1953

Page 4

- 18. The Commission considered the request of the Michigan State Waterways Commission to provisionally appoint Charles W. Latimer at a salary above the minimum for the classification. Site Technician II, effective May 3, 1953. On motion duly made and supported, the Commission unanimously approved the employment of Mr. Latimer at the second year step (\$174.25 biweekly) for the class.
- 19. The Commission considered the request of the Liquor Control Commission to approve the appointment of Zoorl L. Mitchell, Liquor Store Clerk 01 at a salary above the minimum for the classification. On motion duly made and supported, the Commission unanimously approved the employment of Mr. Mitchell at the second step (\$110.34 biweekly) for the class.
- 20. The Commission considered the request of the Department of Labor to approve the appointment of Echc H. Younglove. Typist Clerk A2, at a salary above the minimum for the classification. On motion duly made and supported, the Commission unanimously approved the employment of Miss Younglove at the second year step (\$120.00 biweekly) for the class.
- 21. The Commission considered the request of the Liquor Control Commission to approve the provisional appointment of Bernice E.

 Zlotorzynski, Calculating Machine Clerk A2, at a salary above the minimum for the classification. On motion duly made and supported, the Commission unanimously approved the employment of Miss Zlotorzynski at the first year step (\$114.94 biweekly) for the class.
- 22
- On motion duly made and supported, the Commission requested staff to explore the possibilities of (a) 100% state financed and (b) employee contributing health and hospitalization insurance programs for state employees, a memorandum covering this subject to be prepared and presented to the Commission as early as possible.
- 23. On motion duly made and supported, the Commission ordered staff to evaluate all fringe benefit proposals currently before the Commission, definite recommendations to be prepared and presented to the Commission for consideration at its next meeting.
- 24. The Director presented to the Commission for consideration suggested changes in the salary schedules for the state classified service. After considerable discussion and deliberation, on motion duly made and supported, the Commission unanimously ordered an additional one per cent across the board adjustment to Table A. Table B (Teachers' classes) and Table C. The additional one per cent adjustment was added in order to partially offset the low base rates existing January, 1941. Tables A. B and C as adjusted were then adopted and ordered to be placed into effect on July 12, 1953. The proposed new VIIa classification, indicated in Table A. was not adopted.
- 25. There being no further business the Commission adjourned at 1:00 p.m. Next meeting is to be scheduled for May 28 and 29, 1953 in Detroit, if time and place are satisfactory to Commissioner Muelder.

M. L. Dunnelake

State of Michigan CIVIL SERVICE COMMISSION

Minutes of Civil Service Commission

January 3, 1956

The meeting of the Civil Service Commission was held in the offices of the Commission, Lewis Cass Building, Lansing, Michigan, at 12:00 noon, January 3, 1956.

PRESENT: Mr. Milton E. Muelder, Chairman Miss Sarah Robinson, Commissioner Mr. James M. Moses, Commissioner

Mr. Vernon J. Brown, Commissioner

Mr. Arthur G. Resch, Director
Mr. C. J. Hess, Deputy Director

1. The Michigan Civil Service Commission on motion duly made and supported unanimously adopted the following resolution:

WHEREAS one of the members of the Civil Service Commission and his gracious and devoted wife celebrated a memorable occasion on December 31, 1955, and

WHEREAS his fellow Commissioners, staff members and the rank and file of state employees are deeply appreciative to both for their many contributions to the betterment of government at all levels in Michigan, and

WHEREAS the members of this Commission consider themselves indeed fortunate in having available the sage counsel and wisdom of one so well grounded in the fundamentals and operations of State government: Therefore be it

RESOLVED, That the Civil Service Commission takes this opportunity to express to Commissioner Vernon J. Brown and to Mrs. Brown its sincerest congratulations on their Sixtieth Wedding Anniversary and extends best wishes to both for continuance of this devoted partnership for many more years to come.

- 2. The Commission, on motion duly made and supported, expresses its sincerest appreciation and most heartfelt thanks to Commissioner Milton E. Muelder for the services rendered to the Commission in the capacity of Chairman for the year, 1955. Current problems have been recognized and to a large extent solved. Overall improvement and continued advancement of the State's personnel program is being achieved.
- 2. In accordance with the Commission's established policy of rotating the chairmanship the question of election of the chairman for 1956 was considered. Commissioner James E. Moses, due to pressing business matters, requested that he not be elected to the chairmanship at this time. The Commission respected Commissioner Moses' request. The Commission then.

January 3, 1956

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on motion duly made and supported, moved that Commissioner Muelder continue as chairman for the present and that during his absence abroad Commissioner Sarah Robinson act in the capacity of vice-chairman and preside at Commission meetings.

- 4. On motion duly made and supported, the Commission acknowledges receipt of the complaint filed by Attorney George E. Lee on behalf of his client Leo Donigan in the matter of Harold G. Groehn.
- 5. The Commission considered a number of longevity pay plans presented to it by the Director and staff. On motion duly made and supported, Commissioner Brown voting "No", the Commission adopted the plan designated by the staff as "Plan Va" which by reference is made a part of these minutes.

The Commission on motion duly made and supported, Commissioner Brown voting "No", ordered that the longevity pay plan be made effective December 1, 1956, and first payments under the plan be due on that date.

- 6. The minutes of the meeting of December 15, 1955 were unanimously approved.
- 7. The Director presented the Commission with requests to accept late applications for examinations, which were unanimously approved as per list submitted and by reference made a part of these minutes.
- 8. The Director presented the Commission with the request of James H. Eddy to have his late application for the Adult Corrections Trainee I open competitive examination accepted. After discussion, the Commission, on motion duly made and supported, unanimously decided the request.
- 9. The Commission considered and unanimously approved classes established and abolished and specifications processed during November, 1955.
- 10. The Commission considered requests for waiver of residence requirements as per list submitted and by reference made a part of these minutes. On motion duly made and supported, the requests were unanimously approved.
- 11. On motion duly made and supported, the Commission unanimously approved the extension of certain eligible registers three years old in February, 1956, for a period of six months, as per list submitted, and by reference made a part of these minutes. The Commission further ordered that new registers established for any of these classes within the next six months period supersede the extended registers.
- 12. On motion duly made and supported, the Commission unanimously approved the request of the Coldwater State Home and Training School to pay a starting salary of \$2.29 per hour to Carl Hillborg, Carpenter I.
- 13. On motion duly made and supported, the Commission unanimously approved the request of the Department of Public Instruction to pay Dr. Reed P. Johnson the maximum salary for the Physician V classification.
- 14. On motion duly made and supported, the Commission approved the request of the Department of Social Welfare to waive the maximum age requirement in order that Eleanor Henderson might be approved for short term appointments in the Graduate Nurse Al class at the Boys Vocational School.

January 3, 1956

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- 15. On motion duly made and supported, the Commission waived the maximum age requirement of 60 in order that Samuel D. Frane might be considered for provisional appointment to the Attorney VI classification.
- 16. The Commission considered the request of the Direct Recruitment and Placement Section to waive the requirement of status in order to permit the interdepartmental transfer of Marjorie Clark, General Clerk C, during her probationary period. Marjorie Clark is a former employee of the Bonus Division of the Military Establishment. After discussion, and on motion duly made and supported, the Commission unanimously approved the request.
- 17. The Commission considered the request of the Ionia State Hospital to waive the minimum height requirement for the female Guard Attendant A2 classification in order that Mrs. Myrtle Hosg might have her application accepted for the currently announced open competitive examination for the class.
 - Mrs. Hoag has been employed at the Ionia State Hospital since 1926. On motion duly made and supported, the Commission unanimously approved the request.
- 18. The Commission considered the request of the State Highway Department to appoint James J. Lowman as a Highway Laborer C effective March 11, 1955, consider his probationary period as having been served in order that his present appointment as Highway Worker B might be approved on a provisional promotional basis. On motion duly made and supported, the Commission unanimously approved the request.
- 19. The Director presented to the Commission for its consideration application of Rule XII, D, Sick Leave, Disability Payment in the case of Edith Ide former Psychiatric Graduate Nurse I at Kalemazoo State Hospital. On motion duly made and supported, the Commission unanimously referred the case back to the Director.
- 20. The Commission considered the request of the Department of Health to announce open competitive examinations for the Chemist I and Bacteriologist I classifications an a nationwide basis. After discussion, on motion duly made and supported, the Commission unanimously approved the request.
- 21. The Commission received a statement from steff outlining the procedure that is being followed in conducting the current study of group insurance in the state's civil service. The Commission previously requested that such a study be made. The Commission requests that a progress report be made when the matter of annual salary surveys are discussed the latter part of this year.
- 22. The Commission invites the members of the State Ferry Employees Committee and management representatives of the State Highway Department to meet with it at its regularly scheduled March meeting date to be announced later for the purpose of discussing any problems which should be considered prior to the start of the 1956 sailing season.
- 23. There being no further business, the Commission adjourned at 5:00 p.m. to reconvene in Lansing the evening of Tuesday, February 14 and the day of Wednesday, February 15, 1956.

SOM001018

STATEMENT BY MICHIGAN STATE CIVIL SERVICE COMMISSION CONCERNING ADOPTION OF LONGEVITY COMPENSATION PLAN JANUARY 3, 1956

In establishing a new longevity pay plan for the Michigan state classified service the Commission adds another to a number of features already adopted or planned to make the state government as an employer sufficiently and properly competitive with private business. The Commission is convinced that to do this is necessary if the many important and ever-increasing technical and professional services are to be properly and efficiently rendered which are now being required of state government by its citizens.

Services to the people by state government require workers, paid employees. These must be secured, and retained, in a highly competitive labor market, ninety-five per cent of which is composed of private employers, and eighty per cent of which is geographically located in the higher paying industrial and urban areas of the state.

Most private employers, particularly the larger ones hiring the major portion of the state's total available labor supply, no longer compensate their employees solely through the weekly pay envelope or pay check. These employers offer their employees and prospective employees many other forms of compensation including such things as unemployment compensation, retirement pay, premium pay for overtime, premium shift pay, low cost stock purchase privileges, right to purchase products and services at discounted rates, paid holidays, production bonuses, Thanksgiving, Christmas and New Year bonuses and gifts, paid vacations and paid sick leave, suggestion awards, and group life insurance, hospital and medical insurance and accident and disability insurance, paid for in part or in full by the employers. These are all forms of compensation.

In fulfilling the constitutional requirements placed upon it of fixing rates of compensation for all classes of state employees, and of regulating all of their conditions of employment, the Commission recognizes fully that these requirements were intended as a means to an end -- the maintaining of a state service of competence, efficiency and integrity, with equity both to the people of the state and the state's employees.

In seeking this end the Commission has maintained and will continue to maintain adequate and fair pay rates for state classified employees. It has added other compensatory benefits for state employees: more liberal paid sick leave allowances; more liberal allowance of vacation with pay; payment of two-thirds of salary for employees unable to work because of duty-incurred injury or illness; payment of fifty per cent of the wage value of accumulated unused sick leave at retirement or death; and double pay for work on allowed holidays.

In fulfilling its responsibilities with respect to compensation of state classified employees the Commission recognizes that not all compensatory benefits granted to employees by private employers can or should be accorded to state governmental employees, but it as fully recognizes that sufficient similar or alternative compensatory benefits must be provided for state governmental employees as may be necessary in order to compete with private employers, and to act with equity and fairness to state employees.

In line with this the Commission has, for example, ordered a study of the subject of a group insurance program, contributed to by the state for state classified employees. Such a study is now under way and at some future date the Commission will be prepared to act in this matter.

SOM001019

November 7, 1960 Page 3

13. On motion duly made and supported, the Commission unanimously approved the extension of certain eligible registers three years old in November and December, 1960 for a period of six months, as per list submitted and by reference made a part of these minutes. The Commission further ordered that any new registers established for any of these classes within the next six month's period supersede the extended registers. The Commission instructed the Examination Division to give priority in announcing new examinations for certain cases discussed.

(14) Commissioner Higgins presented to the Commission the following motion:

"I move the Civil Service Commission proceed with plans to make a group health and life insurance program, in which the State shares approximately fifty per cent of the cost, available to all classified employees of the State as a fringe benefit of employment, effective July 1, 1961 or as soon thereafter as practicable; and that those employees of the State not under civil service jurisdiction, including employees of the judiciary and the legislature as well as elected and appointed state officials be allowed to participate if the Legislature so desires. The State will not share in the cost of insurance for dependents or retirees."

The motion was supported by Commissioner Moses and unanimously approved.

- 15. The Commission considered request of the State Treasurer's Office to appoint Mary Bricker as a Typist Clerk A2, consider her probationary period as having been served in order that her present appointment as a Secretary II might be approved on a provisional promotional basis. Mrs. Bricker has served as a Secretary II since January 2, 1955. After discussion, on motion duly made and supported, the Commission unanimously approved the request.
- 16. The Commission considered request of the Civil Service Department to waive the balance of the probationary period for Dolores Janet Hatt as a Typist Clerk Cl. Mrs. Hatt had six months of combined service at the Typist Clerk Cl and A2 levels. After discussion, on motion duly made and supported, the Commission unanimously approved the request.
- 17. The Commission considered request of the Liquor Control Commission to appoint Hugh Morrison as a Liquor Store Clerk A2, consider his probationary period as having been served in order that his present appointment as a Liquor Store Manager Ia might be approved on a provisional promotional basis. Mr. Morrison has been with the Liquor Control Commission since December 4, 1952. During his occupancy of the Liquor Store Clerk C1 and A2 classes he was deprived of the opportunity of gaining status. After discussion, on motion duly made and supported, the Commission unanimously approved the request.
- 18. The Commission considered request of the State Highway Department to appoint Melvin H. Musselman as a Field Project Clerk A, consider his probationary period as having been served in order that his present appointment as a Procurement Executive III might be approved on a provisional promotional basis. Mr. Musselman provisionally occupied the position of Field Project Clerk A for approximately eleven months. He took and passed the required examination high enough to be certified but was provisionally promoted to a Procurement Executive III position before this could take place. After discussion, on motion duly made and supported, the Commission unanimously approved the request.

C.S. Pearson

State of Michigan CIVIL SERVICE COMMISSION

March 9, 1961

The meeting of the Civil Service Commission was held in the Park Shelton Hotel, 15 East Kirby Street, Detroit, Michigan at 9:00 a.m., Thursday, March 9, 1961.

PRESENT: Mr. George N. Higgins, Chairman
Miss Sarah Robinson, Commissioner
Mr. John N. Seaman, Commissioner

Mr. Franklin DeWald, Director

The meeting was called to order by the Chairman, who stated it was a special meeting to hear and to interview invited representatives of life and health insurance underwriters selected from those who had earlier submitted written proposals for group insurance for state employees. Invitations were based on written proposals deemed most competitive and desirable. Twenty-four life proposals and 12 proposals on health insurance had been received. Ten companies had submitted combined proposals on both health and life.

Based on a review of written proposals, the Commission invited Aetna Life Insurance Company; Bankers Life Company of Iowa; Blue Cross-Blue Shield; Continental Casualty Company; Federal Life and Casualty Company; Michigan Life Insurance Company; and the United Benefit Life Insurance Company of Omaha for presentations and interviews.

The following appearances were made:

Actna Life Insurance Company (proposals on both life and health insurance)
T. H. Johnson, Vice President Group Division
L. M. Cathles, Vice President Federal Liaison
William Doelle, Grand Rapids Group Office
Walter Groth, Group Representative, Lansing

Bankers Life Insurance Company of Iowa (life insurance only)
Jack C. Archibald, Vice President
Robert E. Larson, Group Secretary
Frank Casey, Regional Group Manager

Blue Cross-Blue Shield (health insurance only)
William McNary, Executive Vice President and General Manager
Harold G. Pearce, Director Enrollment Division
Thomas Paton, Professional Relations Director
Stanley Gwillim, Administrative Assistant

Continental Casualty Company (hospital only)
Mark Williams, Sales Manager
Herbert Grubb, Underwriting Manager
Kenneth Caterer, District Manager
William O'Keefe, Group Representative

The Commission recessed for lunch at 12:30 p.m. and reconvened at 1:30 p.m.

March 9, 1961

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Further appearances:

Federal Life and Casualty Company (life only)

E. H. Newman, Vice President

H. C. Reed, Executive Vice President

S. J. Lauigna, Assistant Vice President

Michigan Life Insurance Company (life only)

Scott E. Lamb, President

R. E. Henne, Vice President

N. E. Wyse, Assistant Vice President

United Benefit Life Insurance Company of Omaha (life and hospital)

A. W. Randall, Vice President J. C. Walters, Walters Agency, Lansing

The Commission recessed at 3:25 p.m. and reconvened at 4:00 p.m.

Having studied written proposals and interviewed companies submitting the most competitive and desirable proposals and after discussion by the Commission members, it was moved by Commissioner Robinson and seconded that the Group Health Insurance contract for state employees be negotiated by the Director with the Aetna Insurance Company of Hartford, Connecticut, in view of the Aetna Company's reputation and proposed rates. All three Commissioners voted yes.

After a discussion of the group life proposals, it was moved by Commissioner Seaman and seconded that the Director be authorized to negotiate the group life insurance contract with the United Benefit of Omaha as prime underwriter, and that United Benefit seek an arrangement with two Michigan insurance companies, Federal Life and Casualty and Michigan Life Insurance Company, to have these companies re-insure 20 per cent (10 per cent each) of the face value of the group policy at no increase in retention costs to the state. The United Benefit retention rate, which was considerably lower than any of the other life proposals, was cited as the controlling factor in the decision. All three Commissioners voted "yes".

Public announcement was left at the discretion of the Director, but the Commission indicated it would be desirable to delay the announcement until any reinsurance arrangements with the Michigan companies were known.

Because of a rate differential between the two optional group health plans to be offered employees (\$3.06 biweekly basic plan, \$2.27 biweekly comprehensive plan) it was moved by Commissioner Robinson and seconded that the State's share of either biweekly insurance premium be \$1.53. All three Commissioners voted "yes".

There being no further business the Commission adjourned at 6:00 p.m. to reconvene at 4:00 p.m. Tuesday, April 25, 1961 and 9:00 a.m. Wednesday, April 26, 1961 in Lansing.

August 7, 1961

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- 23. The Commission considered a request from Mr. P. R. Peck, Assistant Controller, and Director of Office Services, Department of Administration, for a review of his lost longevity rights. The Commission tabled the request until its next meeting.
- The Director presented copies of the proposed "Disciplinary Guide" of the Department of Mental Health to the Commissioners for study. The Director explained that this "Guide" was prepared on instruction of the Commission in order to bring about a greater degree of uniformity of disciplinary action in the state's mental institutions. The Director informed the Commission that he had worked with Mr. Estes on the preparation of this report but had not had an opportunity to review it in its final form. The Commission instructed the Director to place the matter on the agenda for consideration at its next meeting.
- 25). The Director brought the Commission up to date on the insurance program advising them that as of 5:00 p.m. Friday, August 4, cut of 8,589 who had returned their insurance enrollment cards, 7,798 employees had signed up for the Commission sponsored life insurance program -- or roughly 90.8%. These cards represented a cross section of the state's classified service.

The Director also made a progress report to the Commissioners on the status of the Commission sponsored Health Insurance plan. Brochures outlining this plan were given to the Commissioners and plans for enrollment outlined.

- 26. The Director called the Commission's attention to the fact that they had been given copies of the Political Activity Report at last month's meeting in Escanaba. The Director stated that he did not consider the subject of the report to be a rule change but since it comes so close to being one he suggested that it be circularized to agencies and employee groups for their comments. The Commission accepted the Director's suggestion ordering the report to be circulated for written comments.
- 27. There being no further business the Commission adjourned at 6:05 p.m. to reconvene at 9:00 a.m., Tuesday, August 8, 1961 at its offices in the Lewis Cass Building, Lansing.

State of Michigan CIVIL SERVICE COMMISSION

Minutes of the Civil Service Commission

September 19, 1961

The meeting of the Civil Service Commission was held in the offices of the Commission, 3rd Floor, Lewis Cass Building, Lansing, Michigan at 9:30 a.m., Tuesday, September 19, 1961.

PRESENT: Mr. George N. Higgins, Chairman
Miss Sarah Robinson, Commissioner
Mr. John N. Seaman, Commissioner
Mr. Forrest F. Green, Commissioner

Mr. Franklin DeWald, Director
Mr. C. J. Hess, Deputy Director

- 1. The Commission appointed Mr. Don Stevens, Lansing, to the Hearing Board in accordance with Civil Service Rule 40, Section 1 (a).
- The Commission directed the staff to proceed with a study concerning the placing of longevity payments on a total service basis. The Commission considered and again tabled the P. R. Peck case reaching no decision at this time.
- A progress report on insurance enrollment was made to the Commission. The Director reported that 92.6% of active and retired employees enrolled in the state-sponsored life insurance plan. The total amount of life insurance in force under this plan is estimated to be in excess of \$175,000,000.

The Director further reported that the most recent tabulation, that of September 13, showed a total of 23,018 individuals enrolled in the state-sponsored health insurance plan. Of the enrollment to date 19,594 had selected the basic plan and 3,424 had selected the comprehensive plan. A total of 9,017, for various reasons, declined participation in the plan. Enrollment in this plan will be concluded by the end of the week of September 18, 1961.

- 4. The Commission complimented staff, participating in the insurance program, on a job well done.
- The Director reported to the Commission on the Hearing Board indoctrination program. All except three of the old and new members attended the two day meeting.
- (6) The Commission, on motion duly made and supported, authorized the Director to return to the General Fund of the State of Michigan the 1959-60 fiscal year's unused balance of \$219,751.11.
- 7. Mr. Walter L. Haas, former employee of the Department of Agriculture, together with his attorney, Mr. Jerry O'Connor, appeared before the Commission in connection with Mr. Haas' appeal from the Hearing Board's decision

State of Michigan CIVIL SERVICE COMMISSION

Minutes of the Civil Service Commission

December 21, 1961

The meeting of the Civil Service Commission was held in the Conference Room of the Commission, Third Floor, Lewis Cass Building, Lansing, Michigan at 9:00 a.m., Thursday, December 21, 1961.

PRESENT: Mr. George N. Higgins, Chairman
Miss Sarah Robinson, Commissioner
Mr. John N. Seaman, Commissioner
Mr. Forrest F. Green, Commissioner

Mr. Franklin DeWald, Director
Mr. C. J. Hess, Deputy Director

- 1. Noting that state employees salaries were last adjusted on July 2, 1961 and a state contributing life and health insurance program was instituted shortly thereafter, the Commission, after giving due consideration to all current information presented to it in the form of public hearings, employee organizations, and management requests, staff salary studies and reports of both public and private employers, together with recommendations from the Director, umanimously decided as follows:
 - (1) A general pay increase for the next fiscal year is not in order
 - (2) Adjustments are needed and are ordered for approximately 359 employees in specialized job classifications, estimated cost \$107,100, to be distributed as follows:

Trainee Classes

Physical Science Classes

Public Health Biological

Science Classes

Psychological Science Classes

Total

\$16,400
21,200
21,200
\$18,300
51,200

- (3) To increase the amount of the state's contribution in the group life insurance plan from 50% to 75%.
- (4) To increase the amount of the state's contribution in the group health insurance plan from \$1.53 to \$2.00 biweekly.

The salary adjustments for specialized classes are to be made effective July 1, 1962. The group insurance adjustments are to be made effective July 1, 1962 or as soon thereafter as is administratively feasible.

The estimated cost of the salary adjustment is \$107,100, the insurance adjustments \$440,000, with a total of \$547,100 for all adjustments.

May 25, 1962 Page 2

4. The appeal hearing of John A. MacLellan versus the Department of Corrections scheduled for 9:00 a.m. was postponed at the request of the State Personnel Director.

- 5. Dr. V. A. Stehman, Deputy Director, and Mr. Ivan Estes, Personnel Officer, Department of Mental Health, met with the Commission for the purpose of reviewing the Department's proposed uniform physical standards program. The Commission instructed staff to study the standards further and come up with a suggested policy statement for consideration of the Commission at a later date.
- 6. After consideration of a staff report on negetiations with the United Benefit Life Insurance Company of Omaha, the Commission unanimously agreed to reduce the group Life premium for the State-contributory insurance program from 44 to 32 cents biweekly per thousand dollars of insurance in the second policy year starting next agust 28, and to increase the premium for dependents from 40 to 41 cents biweekly. It was agreed an increase in the State contribution to the life program from one-half to three-quarters of the employee premium would be delayed until the end of the first policy year to preclude the necessity on the part of the Department of Administration to make two changes in employee deductions for group life insurance.

The Commission considered a report on the group health insurance program.

It was pointed out the carrier, Aetna Life Insurance Company, included in the contract a provision they would be hiable for extended maternity benefits in the event of cancellation of the contract even though such a requirement was not a part of the specifications of the Commission for carriers who submitted proposals. The Company has estimated a \$450,000 reserve is needed in the first policy year for this purpose. The Commission unanimously agreed to release the carrier from this liability and to so amend the contract releasing this money for payment of claims.

The Commission was advised that increasing costs of hospital care would undoubtedly require an increase in premium in the group health area at a future date, but that the underwriter had advised the Commission if the contract requirement of six months notice on increase in premium was reduced to two months, no increase would be necessary at the end of the first policy year. The Commission unanimously agreed to reduce the six months notice to two months this year to enable the carrier and the Commission to obtain more extensive group claim experience to determine what, if any, adjustment in premium would be necessary for the health plan.

The Commission was advised the Payroll Section of the Department of Administration had indicated because of the press of other work it would have trouble making necessary changes in employee deductions the first payroll period in July for the increase in the State's contribution to the health premium from \$1.53 to \$2.00. The Commission was also advised if there was any future health rate adjustment which would require another change in deductions, the Payroll Section had preferred dates because of work load problems.

May 25, 1962

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The Commission unanimously agreed the State contribution to the group health premium for classified employees be increased from \$1.53 biweekly to \$2.00 at the start of fiscal 1962 as planned. Being advised that because of budgetary cutbacks and other work load the change would cause difficulty in the Department of Administration Tabulation and Payroll Section, the Commission authorized the Director to contract for outside machine time and other clerical assistance the Department of Administration may find necessary to make payroll changes at the start of the fiscal year.

7. The Commission discussed the request of Northern Michigan College to allow the College's employees to enroll in the State spensored life insurance program.

The Commission decided it would agree to such enrollment under certain conditions:

- 1. That the Gollege would authorize an employer contribution in the same amount as for classified employees.
- 2. That amounts of insurance be made available on the same scale as provided by the Civil Service program.
- 3. Such enrollment be approved by the Attorney General.

The Commission felt the high average age of those presently enrolled in the College program would have an adverse effect on the State program's claim experience, but that an employer contribution would increase participation in the program and have the desirable effect of lowering the average age of enrollees.

8. There being no further business the Commission adjourned at 10:45 a.m. to reconvene at 4:00 p.m., Monday, June 18, 1962 and Tuesday, June 19, 1962 at its offices in the Lewis Cass Building, Lansing.

C. S. Rearson

State of Michigan CIVIL SERVICE COMMISSION

Minutes of the Civil Service Commission

November 21, 1962

On Wednesday, November 21, 1962, at 9:00 a.m., the Director held a telephone conference with Chairman Robinson and Commissioners Seaman, Green, and Lewis. The Commission discussed the group health insurance program. The Commission considered and unanimously approved the following:

1. Rates for the two-step increase in premiums in connection with the group health program are approved as follows on a blweekly basis:

Employee Contribution

		Employee	Employee and One	Full Family
_	Present	\$1.06	\$5.74	\$8,22
State con-) fribution) increases) from \$2 to) \$3.19	Januáry, L.	1.50	6.86	9.70
	July 1	1.50	6.86	9.70

	Retiree Contribution			
	Retiree	Retiree and One	Retiree and Full Family	
Present	\$3.06	\$7.74	\$10.22	
January 1	3.83	9,68	12.78	
July 1	(no increase)	(no increase)	(no increase)	

- Increases average 25 per cent over the 18-month period.
- 3. Based on a continued active employee enrollment of 21,757, the annual increase in cost to employees will total \$795,000 and \$673,000 to the State. Employees' contributions will be increased from \$2.8 million to \$3.6 million, and the State contribution from \$1.1 million to \$1.8 million.

Exhibit 3.I

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MICHIGAN SOUTHERN DIVISION

THERESA BASSETT and CAROL KENNEDY, PETER WAYS and JOE BREAKEY, JOLINDA JACH and BARBARA RAMBER, DOAK BLOSS and GERARDO ASCHERI DENISE MILLER and MICHELLE JOHNSON,

No. 2:12-cv-10038

HON, DAVID M, LAWSON

MAG. MICHAEL J. HLUCHANIUK

Plaintiffs,

v

RICHARD SNYDER, in his official capacity as Governor of the State of Michigan,

Defendant.

Michael J. Steinberg (P43085) American Civil Liberties Union Fund of Michigan Attorney for Plaintiffs 2966 Woodward Avenue Detroit, MI 48201 (313) 578-6814

Amanda C. Goad American Civil Liberties Union Foundation Attorney for Plaintiffs 125 Broad Street, 18th Floor New York, NY 10004 (212) 549-2661

Margaret A. Nelson (P30342)
Mark E. Donnelly (P39281)
Attorney for Defendant
Michigan Department of Attorney General
Public Employment, Elections & Tort Division
P.O. Box 30736
Lansing, MI 48909
(517) 373-6434

John A. Knight American Civil Liberties Foundation Attorney for Plaintiffs 180 N. Michigan Ave, Ste 2300 Chicago, IL 60601 (312) 201-9740

DEFENDANT'S ANSWERS TO PLAINTIFFS' SECOND SET OF INTERROGATORIES

INTERROGATORY NO. 17:

For Fiscal Year 2012, provide the average amount paid by the State to insure one Insured adult, and provide any data, calculations, or information indicating that the average cost of insuring an Insured adult is less than the average cost of insuring an Other Insured Adult.

ANSWER: Defendants object to this interrogatory as it repeats Plaintiff's Interrogatory 8 which was answered by Defendants. Additionally, Defendants object to this interrogatory on the grounds it is overly burdensome, costly and seeks information that is not relevant or likely to lead to relevant information.

Defendants further state, the state does not maintain information in a format that readily provides a basis to respond. Defendants have provided information on the premium cost to the State per individual adult based on the insurance plan and the coverage, i.e., employee; employee and spouse, family coverage. This indicates the increase in premium costs to the State for one insured adult (employee) and one insured adult and other insured adult (employee and OEAI) for each available insurance plan.

INTERROGATORY NO. 18:

Identify the number of "domestic partners" who received health insurance as Other Insured Adults in FY 2012. Provide this information both in the aggregate as well as broken down between same-sex domestic partners and opposite-sex domestic partners.

ANSWER: The State does not insure or identify "domestic partners." Rather, the State provides coverage for and identifies Other Eligible Adult Individuals (OEAIs) when certain qualifying criteria are met. No "domestic relationship" is required.

- Total adults receiving health coverage through the State's health plan as an OEAI: 18
- Number of OEAIs who are the same sex as the state employee: 46
- Number of OEAIs who are the opposite sex of the state employee: 72
- Number of OEAIs' dependents also covered: 20

INTERROGATORY NO. 19:

Identify any cost savings the State experiences or has experienced when a city, village, township, county, public school district, or community college denies health insurance coverage to Other Insured Adults, including an explanation of the nature of the cost savings and identifying any data, calculations, or information relied upon to determine these savings.

ANSWER:

The State has no information responsive to this interrogatory.

INTERROGATORY NO. 20:

For each of the Fiscal Years 2007-2012, identify the local governmental units that were "governed by an emergency manager or have been identified as fiscally unstable" as indicated in your responses to Plaintiffs' First Set of Requests for Admissions Nos. 12-18.

ANSWER:

• Local government Units governed by an emergency manager for Fiscal Years 2007-2012:

2007

City of Highland Park

2008

City of Highland Park Three Oaks Village

2009

City of Ecorse City of Pontiac Three Oaks Village Detroit School District

2010

City of Benton Harbor City of Ecorse City of Pontiac Detroit Public District

<u>2011</u>

City of Benton Harbor City of Ecorse City of Fling City of Pontiac Detroit School District

2012

City of Benton Harbor
City of Ecorse
City of Flint
City of Pontiac
Detroit Public School District
Highland Park School District
Muskegon Heights School District

• Local government units identified as "fiscally unstable."

The use of the term "fiscally unstable" in answer to Requests For Admissions 12-18 is incorrect and inadvertent mistake by Counsel. The Department of Treasury measures the "fiscal stress" of local government units based on "Fiscal Indicator Scores." The Fiscal Indicator Scores for those local governments that are evaluated is available on the Michigan Department of Treasury's web cite:

www.michigan.gov. Click on the web site; go to Executive Branch; Treasury; Local Government Services; Fiscal Indicator Scores. The site provides an explanation of the factors; a description of the "Fiscal Health Score Significance" and links to a list of local government units by County that provides their respective Fiscal Indicator Score. Currently, Fiscal Indicator Scores exist only for years 2006 – 2009.

INTERROGATORY NO. 21:

For each of the local governmental units identified in your response to Interrogatory No. 20, state (a) whether the State monitored the local governmental unit's employee health care expenditures during the time the local governmental unit was "governed by an emergency manager" or "identified as fiscally unstable," (b) whether the local governmental unit provided coverage to Other Insured Adults in the year before and during the time it was "governed by an emergency manager" or "identified as fiscally unstable," (c) how much the local governmental unit spent on Other Insured Adult coverage in the year before and during the time it was "governed by an emergency manager" or "identified as fiscally unstable," and (d) what portion of these expenditures were paid by the State.

ANSWER:

- a) The State did not monitor the local governmental unit's employee health care expenditures;
- b) The State does not have possession of information responsive to this request.
- c) The State does not have possession of information responsive to this request.
- d) Unknown. See response to Interrogatory 1.

INTERROGATORY NO. 22:

For Fiscal Year 2012, state (i) the estimated cost to the State of providing health insurance benefits to Other Insured Adults, and (ii) the actual costs the State incurred by providing health insurance benefits to Other Insured Adults.

ANSWER: Defendant objects to this interrogatory for the reason it seeks information not maintained by the State and would be unduly burdensome and costly to identify and create; the interrogatory seeks information that is not relevant and/or is not likely to lead to relevant information.

Defendant further objects to interrogatory 22 (ii) as contrary to F.R.Civ.P. 33(a)(1) because it exceeds the 25 interrogatories allowed by the Rule. No stipulation or order by the Court authorizes the parties to exceed 25 interrogatories.

INTERROGATORY NO. 23:

Identify the number of unclassified employees (i) who had Other Insured Adults on their health care plans for each of Fiscal Years 2007 to 2012; and (ii) whose benefits have been or will be changed as a result of PA. 297.

ANSWER: Defendant objects to interrogatory 22 (ii) as contrary to F.R.Civ.P. 33(a)(1) because it exceeds the 25 interrogatories allowed by the Rule. No stipulation or order by the Court authorizes the parties to exceed 25 interrogatories. Defendant further objects because this information was asked in Interrogatory 18 and answered.

On Information and Belief:

David Murley

Deputy Legal Counsel Governor Rick Snyder

Subscribed and sworn to before me, this ____ th day of June, 2012.

Notary Public

State of Michigan, County of Chinton

My commission expires: 12-29-2016

AFRACO FUBLIC STATE OF MICHIGAN COUNTY OF CLINTON Opmaission Expires Dec. 29, 2016

CERTIFICATE OF SERVICE

I hereby certify that on June 6th, 2012, I served a copy of the above document in this matter on all counsel of record and parties *in pro per* at their last known addresses via email and first class mail by depositing same in a United States Post Office depository in Lansing, Michigan with first class postage fully paid.

Wendy Todd

S:\PEET_Assignment_Control\Cases\Open\2012\Bassett, T - USDC-ED 2012-0001512-A\Resp 2 Pls' 2nd Rogs.doc

Exhibit 3.J

Murley, David (GOV)

From: Rustem, William (GOV)

Sent: Tuesday, December 13, 2011 11:55 AM

To: Lasher, Geralyn (GOV); Roberts, John (GOV); Posthumus, Dick (GOV); Reid, Terri (GOV);

Durfee, Sally (GOV); Ackerman, Darin (GOV)

Cc: Muchmore, Dennis (GOV)

Subject: RE; MML Veto letter HBs 4770 & 4771

We've received emails and calls against HBs 4770 & 4771, and in support of vetoing this legislation, from the below list of individuals:

• Jeff Padnos: President of Louis Padnos Iron & Company of Holland

- Sam Cummings: Principal and Managing Partner of CWD Real Estate Investment of Grand Rapids; board member
 of the Economic Club of Grand Rapids and a member of the National Association of Realtors
- Brian C. Walker: Chief Executive Officer Herman Miller, Inc. of Zeeland
- Fred Keller: Chairman & CEO of Cascade Engineering of Grand Rapids
- Bob Eleveld: Counsel, McGarry Bair PC of Grand Rapids
- Melissa Janes: representing Progressive Women's Alliance of West Michigan and Board of Directors, and their over 600 contributors

----Original Message-----

From: Lasher, Geralyn (GOV)

Sent: Monday, December 12, 2011 4:54 PM

To: Roberts, John (GOV); Posthumus, Dick (GOV); Reid, Terri (GOV); Durfee, Sally (GOV); Ackerman, Darin (GOV)

Cc: Muchmore, Dennis (GOV); Rustem, William (GOV)

Subject: RE: MML Veto letter HBs 4770 & 4771

I believe Rustem has also had contact from Hayworth and Grand Rapids Talent 2025 urging a veto.

It is one issue that actually brought the Detroit News AND Free Press editorial writers together on in the Sunday paper as well...which is no small feat getting them to agree.

http://www.detnews.com/article/20111211/OPINION03/112110309/1008/OPINION01/Column--Social-meddling-will-trip-Michigan-GOP

http://www.freep.com/article/20111211/COL33/112110442/Stephen-Henderson-Our-ever-positive-governor-must-say-no-sometimes?odyssey=tab|topnews|text|Opinion

http://www.freep.com/article/20111212/OPINION01/112120311/Editorial-Veto-ban-partner-benefits?odyssey=tab|topnews|text|Opinion

----Original-Message----

From: Roberts, John (GOV)

Sent: Monday, December 12, 2011 4:48 PM

To: Posthumus, Dick (GOV); Lasher, Geralyn (GOV); Reid, Terri (GOV); Durfee, Sally (GOV); Ackerman, Darin (GOV)

Cc: Muchmore, Dennis (GOV); Rustem, William (GOV)

Subject: MML Veto letter HBs 4770 & 4771

FYI

Murley, David (GOV)

From:

Sent: Wednesday, December 14, 2011 10:57 AM

Calley, Brian (GOV)

To: Lasher, Geralyn (GOV)

Cc: Rustem, William (GOV); Snyder, Rick (GOV); Muchmore, Dennis (GOV); Roberts, John

(GOV); Posthumus, Dick (GOV); Reid, Terri (GOV); Durfee, Sally (GOV); Baird, Richard

(GOV)

Subject: Re: Resolution of Delta College Board of Trustees Opposing HB 4770 and 4771

On Dec 14, 2011, at 10:47 AM, "Lasher, Geralyn (GOV)" < lasherg@michigan.gov> wrote:

Another resolution urging a veto, this one from Delta College where we just were when the Governor unveiled the talent message.

From: Myles-Sanders, Leslie - Staff < lsanders@delta.edu > [mailto:lsanders@delta.edu]

Sent: Wednesday, December 14, 2011 8:49 AM

To: Snyder, Rick (GOV)

Cc: Emery, Douglas (GOV); Emmitt, Beth (GOV); Lasher, Geralyn (GOV); Reid, Terri (GOV); Rexford, Tori (GOV); Wurfel, Sara (GOV); Wycoff, Sara (GOV); Goodnow, Jean - Staff < jeangoodnow@delta.edu>

Subject: Resolution of Delta College Board of Trustees Opposing HB 4770 and 4771

Dear Governor Snyder,

At its Board meeting Tuesday evening, December 13, the Board of Trustees of Delta College voted to approve the attached Resolution Supporting Equal Benefits and Opposing HB 4770 and 4771. The Delta College Board of Trustees consists of nine elected members representing the counties of Bay, Midland and Saginaw, which constitute the Delta College district.

Leslie Myles-Sanders

General Counsel and Secretary, Delta College Board of Trustees

Delta College

University Center, MI 48710

989/686-9203

2:12-cv-10038-DML-MJH Doc # 47-4 Filed 06/13/12 Pg 253 of 264 Pg ID 2442

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<2011 12 13 Resolution re Benefits Equity.pdf>

RESOLUTION SUPPORTING EQUAL BENEFITS & OPPOSING HB 4770 AND 4771 DELTA COLLEGE

December 13, 2011

WHEREAS, Delta College includes among its values diversity, integrity, leadership, respect, and excellence; and

WHEREAS, the Michigan House recently passed House Bill 4770 and 4771 which prohibits public employers from providing certain benefits to public employees and will eliminate benefits for Other Qualified Adults; and

WHEREAS, employees at over 30 Michigan corporations and 30 national corporations with a major presence in Michigan can extend benefits to partners of either gender; and

WHEREAS, many public entities provide health care benefits for domestic partners of either gender, including the State of Michigan, at least 10 public universities, at least five city and county governments, and numerous public school districts; and

WHEREAS, major employers in Michigan and across the country recognize that extending health care benefit eligibility to domestic partners is crucial to attracting and keeping talent; and

WHEREAS, Delta College and other public employers in our state must be able to compete with the private sector and with public employers in other states to attract the best and brightest talent to our workforce;

NOW THEREFORE BE IT RESOLVED that Delta College affirms its ongoing commitment to a diverse and accepting workplace.

BEIT FURTHER RESOLVED that the Delta College urges the rejection of HB 4770, HB 4771 and any legislation that codifies discrimination.

BE IT FURTHER RESOLVED that Delta College

directs that a copy of this resolution be sent to Governor Snyder, the Michigan Senate

and the Michigan House of Representatives.

Dr. Robert Emrich

Chair, Delta College Board of Trustees:

Secretary, Delta College Board of Trustees

eslie Myles Sanders

Communication Plan for 4770 and 4771

At approximately 3:00 p.m. on Thursday, December 22, 2011, the press release will be distributed regarding HB 4770 and 4771.

At approximately 2:30 p.m.

Dennis Muchmore will call: Wayne State University President Gilmour

Michigan State University President Simon University of Michigan President Coleman

Sam Cummings

Dick Posthumus will call: CEO of Herman Miller Brian Walker

President of Louis Padnos Iron & Company Jeff Padnos

Bill Rustem will call: Delta College President Goodnow

MML CEO Dan Gilmartin

Chairman and CEO of Cascade Engineering Fred Keller

Calls should indicate that:

• The Governor has always looked at this issue from an economic point of view.

- When the Civil Service Commission moved forward with providing domestic partnership benefits to civil servants they did so without regard to what the budgetary impact would be on the state.
- Initial estimates for the cost of the program were as much as \$8 million annually and we still do not know what claims will come in at so total costs are unknown.
- Pushing through policy changes without regard for the budgetary implications is not responsible
 and is exactly the type of behavior that got Michigan into deficit spending year after year.
- The Governor has been focused on jobs and creating an environment where jobs can grow.
 While domestic partnership benefits have not been a focus of the Governor's work, the administration understands it has been a priority for the legislature.
- The Governor has been clear that the Constitutional Autonomy of universities in the state has been clearly established and has been upheld time after time by the court system which is why we believe the universities are not included as part of this legislation.
- We believe based on their constitutional autonomy that universities would not be included in this bill.

At approximately 3:00 p.m.

Governor's Communications office will issue the release with the signing of 4770 and veto message for 4771.

From:

Murley, David (GOV)

Sent:

Thursday, June 07, 2012 1:31 PM

To:

Nelson, Margaret (AG)

Subject:

FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Rustem, William (GOV)

Sent: Thursday, June 07, 2012 1:24 PM

To: Murley, David (GOV)

Subject: FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Sam Cummings [mailto:SCummings@cwdRealEstate.com]

Sent: Thursday, December 08, 2011 9:30 PM

To: Snyder, Rick (GOV)

Cc: Dennis Muchmore; Rustem, William (GOV)

Subject: Fwd: HB4770. A VETO for a negative bill is "Relentlessly Positive"

Hi!!

It was great to see you last week. I am honored to be a disciple and soldier in the reinvention of Michigan.

Just a quick note to indicate my opposition to this bill. By definition, exclusion is not positive--it is divisive. It seems disingenuous to me--masking a religious position and as an opportunity for State savings. It is certainly one thing if the State wishes to limit or reduce certain benefits to all employees--an initiative to mirror the benefits packages that are present in the private sector. I am sure that we all agree on that.

If however, we are going to be an inclusive place, it seems impossible to have veracity in that brand if we are singling out certain groups as being more or less eligible for whatever suite of benefits that the State offers. Either we impose such a restriction on all or we impose it on none.

In addition, I truly believe that this will damage our ability to attract talent to Michigan and the passage of this bill will most certainly go "viral" and add additional beta to our chances to continue the relentless positive action that we all believe in and fight for.

XOXO

Sincerely,

Sam Cummings, Managing Partner CWD Real Estate Investment 15 Ionia Avenue SW, Suite 630 Grand Rapids, MI. 49503

Voice: 616-726-1700. Fax: 616-726-5222

www.cwdrealestate.com

SCummings@cwdRealEstate.com

Sent from my iPad

Begin forwarded message:

From: <Sam@cwdRealEstate.com> Date: December 8, 2011 8:41:00 PM EST To: Jeff Padnos < jeff@padnos.com>

Cc: "Bill Rustem (rustemw@michigan.gov)" <rustemw@michigan.gov>

Subject: Re: HB4770. A VETO for a negative bill is "Relentlessly Positive"

Jeff--

Thanks for bringing this to my attention. I feel a bit badly that I have not been aware of it previously. I am certainly with you on this. We do not need to be in the business of judging and excluding. This would not be helpful for long-term political prospects. Our cities will certainly feel the impact as the gay and lesbian community has been invaluable in the revitalization of every urban area across the country.

What an incredible waste of time. I am embarrassed for Dave Agema that he actually spent time on this. I will help you however I can and will encourage the Governor to veto it if it gets to his desk.

Sincerely,

Sam Cummings, Managing Partner CWD Real Estate Investment 15 Ionia Avenue SW, Suite 630 Grand Rapids, MI. 49503

Voice: 616-726-1700. Fax: 616-726-5222 www.cwdrealestate.com SCummings@cwdRealEstate.com Sent from my iPad

On Dec 8, 2011, at 6:16 PM, "Jeff Padnos" < jeff@padnos.com > wrote:

Last week a number of ceo's from West Michigan had the chance to meet with Gov Snyder on the topic of developing, attracting, and retaining talent here in Michigan. During the discussion the question came up, "whom should we contact if he have serious thoughts on this or other topics of importance." Without hesitation, he responded—Bill Rustem.

I had no idea that a situation like this would present itself so quickly, but here it It is hard to stay relentlessly positive in thinking or talking about the mindset behind HB4770. I guess one way to stay positive is to say that a VETO (a negative) of a mean-spirited, negative bill is itself a positive, just like in math. And that is what we need for this bill, a VETO.

HB4770 adds insult to the injury caused by Proposal 2 a few years ago. I know that this is NOT a battle that Rick is looking for. He has done an admirable job of maintaining focus on the highest priority tasks facing our state. But the far right in the GOP will simply not cooperate in maintaining this focus. Now the same people who brought Michigan unwelcome attention on the comedy news channels with their attempt to protect bullying if it is motivated by sincere religious convictions have put through anti-gay legislation that works directly against Rick's "Reinvent Michigan" agenda. This legislation is strongly opposed by our institutions of higher education. It would hurt their ability to attract and retain talent. Many of us in the business community feel exactly the same way. Legislation like this hurts our businesses and hurts our state. Plus it is just plain depressing to those of us already here. It discourages thoughts of expansion, and encourages thoughts of moving elsewhere. We urge you to let the Governor know that we support a decision to VETO this very negative bill.

Please let me know what you think, and specifically if you think a veto is possible. Thanks very much.

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From:

Murley, David (GOV)

Sent:

Thursday, June 07, 2012 1:31 PM

To:

Nelson, Margaret (AG)

Subject:

FW:

From: Rustem, William (GOV)

Sent: Thursday, June 07, 2012 1:23 PM

To: Murley, David (GOV)

Subject: FW:

From: Sam Cummings [mailto:SCummings@cwdRealEstate.com]

Sent: Friday, December 09, 2011 10:39 AM

To: Rustem, William (GOV); Muchmore, Dennis (GOV)

Cc: Snyder, Rick (GOV); Hollins, Harvey (GOV)

Subject:

Sorry to clog your screen with this stuff but I believe it that important. I thought that I would share a note (below) from a good friend of mine who is a Michigan native and one of the two or three most highly regarded HR folks in the world.

Brian Schipper is currently Senior VP—HR and Benefits for Groupon, a move that he took to be closer to his home State (he has a place in Saugatuck). He has held the same position at Microsoft, Pepsi and most recently Cisco. He lectures virally and all over the world on talent attraction and retention. He has an intimate understanding about how to attract talent and if you recall, was one of the folks that I recommended to serve on the OUMI. He is one of the smartest and "switched on" people that I have ever met.

The constitution certainly allows the decision but it seems to me that the document's intention was to articulate and preserve rights not enable their removal. This measure is certainly not very forward-thinking and frankly, is "typically republican", which, in my opinion, will weaken our broad base of support and selfishly, produces a simply indefensible action with naysayers that I so frequently run into.

I guess that if it is to pass, I would like to understand the motive and be therefore armed with an understanding of how I am to spin it—a regrettable action that frankly saddens me to have to do as it is contrary to the "vision" that I pitched so many folks.

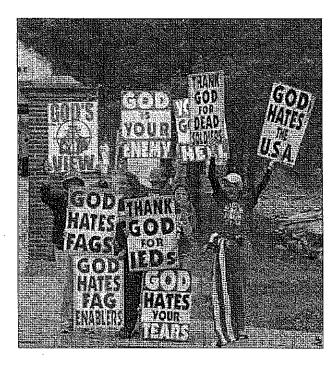
I will call to set up a time to chat.

Have a great day!

Unfortunately while we pay first-class tax dollars, LGBT citizens are (still) second class in most states, including Michigan, where it's perfectly politically expedient and acceptable to ban the ability of institutions to offer benefits. But it's consistent with the state constitution, which specifically prohibits extending other rights to same-sex couples, passed by citizen initiative.

It saddens me that Michigan has the capacity to be just like many other states that are in the grip of religious fundamentalists.

This has nothing to do with the budget; it is part of the agenda of the Tea Party, which are nothing more than rebranded so-called social conservatives who distrust government to do everything but take away the rights of people they despise.



Sam Cummings Managing Partner

CWD Real Estate Investment

15 Ionia SW Suite 630 | Grand Rapids | Michigan 49503 cwdrealestate.com | Phone 616.726.1700 | Cell 616.460.9653



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Sent:

Thursday, June 07, 2012 1:31 PM

To:

Nelson, Margaret (AG)

Subject:

FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Rustem, William (GOV)

Sent: Thursday, June 07, 2012 1:24 PM

To: Murley, David (GOV)

Subject: FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Sam Cummings [mailto:SCummings@cwdRealEstate.com]

Sent: Thursday, December 08, 2011 8:46 PM

To: Jeff Padnos

Cc: Rustem, William (GOV)

Subject: Re: HB4770. A VETO for a negative bill is "Relentlessly Positive"

Jeff--

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Sincerely,

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I had no idea that a situation like this would present itself so quickly, but here it is. It is hard to stay relentlessly positive in thinking or talking about the mindset behind HB4770. I guess one way to stay positive is to say that a VETO (a negative) of a mean-spirited, negative bill is itself a positive, just like in math. And that is what we need for this bill, a VETO.

HB4770 adds insult to the injury caused by Proposal 2 a few years ago. I know that this is NOT a battle that Rick is looking for. He has done an admirable job of maintaining focus on the highest priority tasks facing our state. But the far right in the GOP will simply not cooperate in maintaining this focus. Now the same people who brought Michigan unwelcome attention on the comedy news channels with their attempt to protect bullying if it is motivated by sincere religious convictions have put through anti-gay legislation that works directly against Rick's "Reinvent Michigan" agenda. This legislation is strongly opposed by our institutions of higher education. It would hurt their ability to attract and retain talent. Many of us in the business community feel exactly the same way. Legislation like this hurts our businesses and hurts our state. Plus it is just plain depressing to those of us already here. It discourages thoughts of expansion, and encourages thoughts of moving elsewhere. We urge you to let the Governor know that we support a decision to VETO this very negative bill.

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From:

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Sent:

Thursday, June 07, 2012 1:32 PM

To:

Nelson, Margaret (AG)

Subject:

FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Rustem, William (GOV)

Sent: Thursday, June 07, 2012 1:25 PM

To: Murley, David (GOV)

Subject: FW: HB4770. A VETO for a negative bill is "Relentlessly Positive"

From: Keller, Fred [mailto:fred.keller@cascadeng.com]

Sent: Friday, December 09, 2011 9:55 AM

To: Rustem, William (GOV)

Subject: Fwd: HB4770. A VETO for a negative bill is "Relentlessly Positive"

Bill,

I am very supportive of a veto on this bill since it makes law what should be an option for businesses and governments alike. This goes too far toward satisfying a particular wing of a political party and does not in any way benefit the common good as far as I can see. If the state wants to drop domestic partner benefits, so be it, but to make it law that a particular benefit is illegal, seems to go beyond the middle ground the Governor has worked so hard to stake out. If I can be of any help to support the governor in taking a tough political position, let me know!

Fred Keller Chairman & CEO Cascade Engineering

Begin forwarded message:

From: "Jeff Padnos" < ieff@padnos.com > Date: December 8, 2011 6:16:28 PM EST

To: <rustemw@michigan.gov>

Subject: HB4770. A VETO for a negative bill is "Relentlessly Positive"

Last week a number of ceo's from West Michigan had the chance to meet with Gov Snyder on the topic of developing, attracting, and retaining talent here in Michigan. During the discussion the question came up, "whom should we contact if he have serious thoughts on this or other topics of importance." Without hesitation, he responded—Bill Rustem.

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