

Dental and Vision Care Plan

The SAMBA Dental and Vision Care Plan is a valuable supplement to your regular health insurance plan. Although we have been able to avoid increasing the premium for the last four years, escalating dental and vision care costs have increased to the point where the plan is now paying out more in benefits than it receives in premiums. Consequently, to keep plan benefits at the same high levels, we find it necessary to impose a modest increase in premiums at this time.

- The new premium rates will become effective with the pay period beginning April 7, 2002.
- To avoid any interruption in your coverage, **please sign, date, and return the enclosed SAMBA Payroll Allotment Form 299 by March 15, 2002.** If you do not return the Payroll Allotment Form your Dental and Vision coverage will be cancelled effective April 7, 2002.
- A pre-addressed, postage paid envelope is enclosed for your convenience.

Dental and Vision Care Plan		
Coverage For	Current Biweekly Premium	New Biweekly Premium
Member Only	\$18.00	\$21.00
Member Plus One	\$25.00	\$29.00
Member Plus Family	\$30.00	\$35.00
Child (Age 22-27) who is also enrolled in the SAMBA <i>Dependent Children Health Benefit Plan</i>	\$18.00 (Each Child)	\$21.00 (Each Child)
Disabled child over age 22 covered under a Federal Employees Health Benefits (FEHB) Plan	\$18.00 (Each Child)	\$21.00 (Each Child)