

BP's benefit rates

This rate sheet can help you determine your portion of the costs for some BP benefit plans for the April 1, 2012 – March 31, 2013 plan year.

Medical Program

BP pays the vast majority of the overall cost of the BP Medical Plan or HMO option you choose.

Your portion of the monthly contributions for the BP Medical Plan depends on the option and coverage level you choose, as shown below. Contributions are deducted from your pay on a before-tax basis.*

Coverage level	HealthPlus Options**	Standard Options**
You	\$ 95.00	\$ 95.00
You + spouse/domestic partner	\$200.00	\$200.00
You + child(ren)	\$180.00	\$180.00
You + family	\$285.00	\$285.00

If an HMO option is available to you, you can determine your portion of the monthly contributions online at the BP Benefits Center.

Dental Program

BP pays 80% of the cost of dental coverage. Your portion of the monthly contributions is shown below. Contributions are deducted from your pay on a before-tax basis.*

Coverage level	BP Dental Plan	Dental Health Maintenance Organization (DHMO)
You	\$ 9.00	\$ 9.00
You + spouse/domestic partner	\$19.00	\$19.00
You + child(ren)	\$19.00	\$19.00
You + family	\$29.00	\$29.00

* If you cover an individual who is not your dependent for federal income tax purposes — such as your domestic partner — contributions will be taken on an after-tax basis. You will also have additional income imputed to you based on the value of the BP subsidized coverage. If you cover a same-sex domestic partner, when you enroll, you will have the option to accept a gross up of base pay to replace the taxes applied for covering a federal non-tax dependent. This will result in your benefits deductions being treated the same as employees covering federal tax dependent spouses.

** Includes Out-of-Area.

Vision Plan

You pay 100% of the cost of vision coverage under the BP Vision Plan. Your monthly contributions are shown below. Contributions are deducted from your pay on a before-tax basis.*

Coverage level	Vision Plan
You	\$ 8
You + spouse/domestic partner	\$12
You + child(ren)	\$13
You + family	\$21

* If you cover an individual who is not your dependent for federal income tax purposes — such as your domestic partner — contributions will be taken on an after-tax basis.

Short-Term Disability (STD) Plan

BP pays the full cost of your STD coverage.

Long-Term Disability (LTD) Plan

BP pays the full cost of your basic LTD coverage. The maximum monthly eligible pay considered for basic LTD is \$40,000.

Your contributions for optional LTD coverage are based on your age as of December 31 of the prior year and monthly eligible pay and are made through payroll deductions on an after-tax basis. The maximum monthly eligible pay considered for optional LTD is:

- 60% coverage — \$33,333
- 65% coverage — \$30,769

If your age is ...	The cost per \$100 of your eligible pay is ...	
	60% Coverage Option	65% Coverage Option
18 – 39	\$.060	\$.106
40 – 44	\$.095	\$.173
45 – 49	\$.131	\$.239
50 – 54	\$.151	\$.319
55 – 59	\$.171	\$.279
60 – 64	\$.151	\$.279
65 – 69	\$.141	\$.266
70 and older	\$.131	\$.239

Basic Life Insurance Plan

BP pays the full cost of basic life insurance coverage equal to two times your base pay, and Accidental Death and Dismemberment (AD&D) coverage that pays:

- An additional two times your base pay if your death is due to an accident; and
- A specified percentage of your base pay if you suffer a covered loss, such as dismemberment.

The value of company-paid life insurance in excess of \$50,000 is considered 'imputed income' to you by the IRS and is included in your taxable income and reported on your annual W-2 form and on your paychecks during the year. If your basic life insurance coverage exceeds \$50,000, you may elect to reduce your benefit amount to \$50,000, which exempts you from having imputed income applied to your taxable earnings for this coverage.

This year, the monthly rates used in calculating imputed income are as follows:

If your age is ...	The monthly rate per \$1,000 is ...
Under 25	\$.05
25 – 29	\$.06
30 – 34	\$.08
35 – 39	\$.09
40 – 44	\$.10
45 – 49	\$.15
50 – 54	\$.23
55 – 59	\$.43
60 – 64	\$.66
65 – 69	\$1.27
70 and older	\$2.06

Your age is calculated as of December 31 of the current year. So, if you are age 34 but will be turning age 35 before the end of this year, your imputed income for the current year will be calculated using an age of 35.

Group Universal Life (GUL) Insurance Plan

You pay the cost of GUL coverage through payroll deductions on an after-tax basis.

The cost of coverage for you and your spouse/domestic partner is based on:

- Age;
- The level of coverage you elect; and
- Whether you and/or your spouse/domestic partner uses tobacco products (use of any tobacco products at any time during the 12 months prior to enrollment constitutes tobacco use).

The monthly rates for coverage are as follows:

If your age is ...	The cost per \$1,000 of your eligible pay is ...	
	Non-tobacco user	Tobacco user*
Under 25	\$.031	\$.038
25 – 29	\$.036	\$.041
30 – 34	\$.036	\$.042
35 – 39	\$.036	\$.043
40 – 44	\$.070	\$.086
45 – 49	\$.112	\$.135
50 – 54	\$.180	\$.218
55 – 59	\$.287	\$.346
60 – 64	\$.493	\$.590
65 – 69	\$.757	\$.928
70 and older	Call MetLife at 1-800-438-6388	

* Use of any tobacco products at any time during the 12 months prior to enrollment constitutes tobacco use.

The cost of coverage for eligible children is \$1.00 per month for \$10,000 of coverage per child, regardless of the number of children you choose to cover.

Occupational Accidental Death (OAD) Plan

BP pays the full cost of your OAD coverage.