

## Bunge 2024 Monthly Employee Benefits Rate Sheet

|                       | Basic (HDHP)  |               | Core (HDHP)   |               | Premium (PPO) |               |
|-----------------------|---------------|---------------|---------------|---------------|---------------|---------------|
|                       | Employee Cost | Employer Cost | Employee Cost | Employer Cost | Employee Cost | Employer Cost |
| <b>Medical</b>        |               |               |               |               |               |               |
| Employee Only         | \$85.81       | \$673.58      | \$143.52      | \$673.58      | \$212.71      | \$673.58      |
| Employee + Spouse     | \$185.59      | \$1,495.35    | \$313.71      | \$1,495.35    | \$458.24      | \$1,509.32    |
| Employee + Child(ren) | \$171.63      | \$1,347.15    | \$287.05      | \$1,347.15    | \$425.42      | \$1,347.15    |
| Family                | \$249.46      | \$1,919.70    | \$413.94      | \$1,919.70    | \$591.89      | \$1,934.03    |

|                       | Basic         |               | Premium       |               |
|-----------------------|---------------|---------------|---------------|---------------|
|                       | Employee Cost | Employer Cost | Employee Cost | Employer Cost |
| <b>Dental</b>         |               |               |               |               |
| Employee Only         | \$29.81       | \$0.00        | \$35.08       | \$0.00        |
| Employee + Spouse     | \$59.61       | \$0.00        | \$70.15       | \$0.00        |
| Employee + Child(ren) | \$74.52       | \$0.00        | \$87.69       | \$0.00        |
| Family                | \$81.97       | \$0.00        | \$96.46       | \$0.00        |

|                       | Employee Cost | Employer Cost |
|-----------------------|---------------|---------------|
| <b>Vision</b>         |               |               |
| Employee Only         | \$8.91        | \$0.00        |
| Employee + Spouse     | \$13.63       | \$0.00        |
| Employee + Child(ren) | \$14.44       | \$0.00        |
| Family                | \$23.07       | \$0.00        |

| <b>Accidental Injury</b> | Low Plan | High Plan |
|--------------------------|----------|-----------|
| Employee                 | \$5.25   | \$10.04   |
| Employee + Spouse        | \$8.93   | \$17.12   |
| Employee + Child(ren)    | \$9.08   | \$17.42   |
| Family                   | \$12.24  | \$23.50   |

| <b>Hospital Stay</b>  | Low Plan | High Plan |
|-----------------------|----------|-----------|
| Employee              | \$13.23  | \$25.80   |
| Employee + Spouse     | \$33.32  | \$65.31   |
| Employee + Child(ren) | \$24.26  | \$47.51   |
| Family                | \$44.34  | \$87.01   |

| <b>Dependent Life Insurance</b>                                                                                                                                                         |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| \$0.70                                                                                                                                                                                  |  |
| Rate is \$0.70 per month if you elect optional spouse coverage or if you elect optional spouse and child coverage. The rate is the same regardless of the number of children you cover. |  |

| <b>Identity Protection</b> |         |
|----------------------------|---------|
| Employee                   | \$6.50  |
| Family                     | \$12.50 |

| <b>Legal Plan</b>   |         |
|---------------------|---------|
| Employee and Family | \$13.53 |

| <b>Long Term Disability</b>  |
|------------------------------|
| \$ .39 per \$100 base salary |

| <b>Critical Illness Plan- Low Plan</b> |          |             |               |        |
|----------------------------------------|----------|-------------|---------------|--------|
| Issue Age                              | Employee | EE + Spouse | EE+Child(ren) | Family |
| 0-24                                   | 4.05     | 6.86        | 5.65          | 8.46   |
| 25-29                                  | 4.40     | 7.61        | 6.00          | 9.20   |
| 30-34                                  | 5.54     | 9.72        | 7.13          | 11.31  |
| 35-39                                  | 7.74     | 13.44       | 9.33          | 15.04  |
| 40-44                                  | 9.93     | 17.19       | 11.52         | 18.78  |
| 45-49                                  | 14.51    | 24.63       | 16.10         | 26.22  |
| 50-54                                  | 21.71    | 35.08       | 23.31         | 36.67  |
| 55-59                                  | 31.11    | 48.67       | 32.70         | 50.26  |
| 60-64                                  | 39.72    | 61.27       | 41.32         | 62.86  |
| 65-69                                  | 47.11    | 73.39       | 48.71         | 74.98  |
| 70-74                                  | 63.78    | 100.16      | 65.38         | 101.75 |
| 75-79                                  | 86.99    | 131.38      | 88.59         | 132.98 |
| 80-84                                  | 110.74   | 162.74      | 112.33        | 164.33 |
| 85+                                    | 145.89   | 219.05      | 147.48        | 220.65 |

| <b>Critical Illness Plan- High Plan</b> |          |             |               |        |
|-----------------------------------------|----------|-------------|---------------|--------|
| Issue Age                               | Employee | EE + Spouse | EE+Child(ren) | Family |
| 0-24                                    | 8.10     | 13.72       | 11.30         | 16.92  |
| 25-29                                   | 8.80     | 15.22       | 12.00         | 18.40  |
| 30-34                                   | 11.08    | 19.44       | 14.26         | 22.62  |
| 35-39                                   | 15.48    | 26.88       | 18.66         | 30.08  |
| 40-44                                   | 19.86    | 34.38       | 23.04         | 37.56  |
| 45-49                                   | 29.02    | 49.26       | 32.20         | 52.44  |
| 50-54                                   | 43.42    | 70.16       | 46.62         | 73.34  |
| 55-59                                   | 62.22    | 97.34       | 65.40         | 100.52 |
| 60-64                                   | 79.44    | 122.54      | 82.64         | 125.72 |
| 65-69                                   | 94.22    | 146.78      | 97.42         | 149.96 |
| 70-74                                   | 127.56   | 200.32      | 130.76        | 203.50 |
| 75-79                                   | 173.98   | 262.76      | 177.18        | 265.96 |
| 80-84                                   | 221.48   | 325.48      | 224.66        | 328.66 |
| 85+                                     | 291.78   | 438.10      | 294.96        | 441.30 |