

MSCI Inc.
 2023 Benefit Program
 Monthly Rates and Contributions

Carrier / Coverage Level	2023 Premium	2023 Employer Cost	2023 Employee Cost	% Ee. Pays	% Er. Pays
Medical - UHC Saver PPO					
Employee	\$618.42	\$515.50	\$102.92	17%	83%
Employee + Spouse	\$1,210.51	\$1,009.05	\$201.46	17%	83%
Employee + Child(ren)	\$1,020.52	\$850.68	\$169.84	17%	83%
Employee + Family	\$1,726.21	\$1,438.92	\$287.29	17%	83%
Medical - UHC Classic PPO					
Employee	\$736.01	\$613.52	\$122.49	17%	83%
Employee + Spouse	\$1,440.69	\$1,200.92	\$239.77	17%	83%
Employee + Child(ren)	\$1,214.58	\$1,012.44	\$202.14	17%	83%
Employee + Family	\$2,054.47	\$1,712.55	\$341.92	17%	83%
Medical - Kaiser (Closed Plan)					
Employee	\$828.47	\$654.06	\$174.41	21%	79%
Employee + Spouse	\$1,822.63	\$1,438.92	\$383.71	21%	79%
Employee + Child(ren)	\$1,449.82	\$1,144.60	\$305.22	21%	79%
Employee + Family	\$2,651.10	\$2,092.97	\$558.13	21%	79%
Medical - Priority Health (MI only)					
Employee	\$1,069.01	\$855.21	\$213.80	20%	80%
Employee + Spouse	\$2,351.82	\$1,881.46	\$470.36	20%	80%
Ee & Child (Hypothetical)	\$1,817.32	\$1,453.86	\$363.46	20%	80%
Employee + Family	\$3,100.13	\$2,480.10	\$620.03	20%	80%
Dental - Delta Option 1					
Employee	\$32.13	\$19.29	\$12.84	40%	60%
Employee + Spouse	\$70.77	\$42.47	\$28.30	40%	60%
Employee + Child(ren)	\$80.75	\$48.45	\$32.30	40%	60%
Employee + Family	\$134.24	\$80.54	\$53.70	40%	60%
Dental - Delta Option 2					
Employee	\$60.72	\$36.44	\$24.28	40%	60%
Employee + Spouse	\$133.58	\$80.16	\$53.42	40%	60%
Employee + Child(ren)	\$149.59	\$89.75	\$59.84	40%	60%
Employee + Family	\$246.32	\$147.80	\$98.52	40%	60%
Vision - EyeMed					
Employee	\$11.27	\$9.85	\$1.42	13%	87%
Employee + Spouse	\$21.38	\$18.69	\$2.69	13%	87%
Employee + Child(ren)	\$22.50	\$19.67	\$2.83	13%	87%
Employee + Family	\$33.07	\$28.90	\$4.17	13%	87%

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Other

Legal - ARAG	\$24.24	Monthly
ID Watchdog	\$7.95	Employee Only Monthly
	\$9.95	Family Monthly
UNUM - Life Insurance and Disability Rates		
Group Life	\$0.09	(Per \$1,000 of coverage/\$500,000 coverage maximum)
Basic AD&D	\$0.01	(Per \$1,000 of coverage/\$500,000 coverage maximum)

Supplemental Life Insurance Rates

(Per \$1,000 of coverage)

<u>Age</u>	<u>EE</u>	<u>Spouse</u>
0-19	\$0.059	0.053
20-24	\$0.059	0.053
25-29	\$0.070	0.065
30-34	\$0.094	0.086
35-39	\$0.105	0.096
40-44	\$0.117	0.107
45-49	\$0.176	0.160
50-54	\$0.270	0.246
55-59	\$0.504	0.459
60-64	\$0.773	0.705
65-69	\$1.487	1.358
70 and up	\$2.412	2.202

Supplemental AD&D

(Employee)	\$0.023	(per \$1,000 of coverage)
(Spouse)	\$0.024	(per \$1,000 of coverage)

Dependent Child Life \$0.24 (\$10,000 coverage)

Long Term Disability (LTD) \$0.180 (Per \$100 of coverage)
 Maximum salary - \$270,000

Short Term Disability (STD) \$1.92 (per employee per month)

NY DBL \$2.40 (per employee per month)

NY PFL 0.511% of weekly wage (up to max. wage of \$971.61)

FMLA Administration \$2.03 (per employee per month)

MSCI Inc.
 2023 Benefit Program
 Monthly COBRA Rates

Carrier / Coverage Level	Full Monthly Premium	Monthly COBRA Premium
Medical - UHC Saver PPO		
Employee	\$618.42	\$630.79
Employee + Spouse	\$1,210.51	\$1,234.72
Employee + Child(ren)	\$1,020.52	\$1,040.93
Employee + Family	\$1,726.21	\$1,760.73
Medical - UHC Classic PPO		
Employee	\$736.01	\$750.73
Employee + Spouse	\$1,440.69	\$1,469.50
Employee + Child(ren)	\$1,214.58	\$1,238.87
Employee + Family	\$2,054.47	\$2,095.56
Medical - Kaiser (Closed Plan)		
Employee	\$828.47	\$845.04
Employee + Spouse	\$1,822.63	\$1,859.08
Employee + Child(ren)	\$1,449.82	\$1,478.82
Employee + Family	\$2,651.10	\$2,704.12
Medical - Priority Health (MI residents)		
Employee	\$1,069.01	\$1,090.39
Employee + Spouse	\$2,351.82	\$2,398.86
Employee + Family	\$3,100.13	\$3,162.13
Dental - Delta Option 1		
Employee	\$32.13	\$32.77
Employee + Spouse	\$70.77	\$72.19
Employee + Child(ren)	\$80.75	\$82.37
Employee + Family	\$134.24	\$136.92
Dental - Delta Option 2		
Employee	\$60.72	\$61.93
Employee + Spouse	\$133.58	\$136.25
Employee + Child(ren)	\$149.59	\$152.58
Employee + Family	\$246.32	\$251.25
Vision - EyeMed		
Employee	\$11.27	\$11.50
Employee + Spouse	\$21.38	\$21.81
Employee + Child(ren)	\$22.50	\$22.95
Employee + Family	\$33.07	\$33.73