



YOUR 2023 EMPLOYEE CONTRIBUTIONS: BI-WEEKLY

HEALTH PLANS				
	Employee Only	Employee + Working Spouse/ Domestic Partner*	Employee + Child/Children	Employee + Family
Your pre-tax bi-weekly cost				
MEDICAL PLANS - Collective Health CDHP				
CDHP	\$0.00	\$80.00	\$68.00	\$108.00
CDHP: Working Spouse/DP Surcharge	N/A	\$126.15	N/A	\$154.15
CDHP: Tobacco User Surcharge	\$18.46	\$98.46	\$86.46	\$126.46
CDHP: Working Spouse/DP + Tobacco User Surcharges	\$18.46	\$144.61	\$86.46	\$172.61
MEDICAL PLANS - Collective Health PPO 500				
PPO 500	\$95.00	\$230.00	\$196.00	\$338.00
PPO 500: Working Spouse/DP Surcharge	N/A	\$276.15	N/A	\$384.15
PPO 500: Tobacco User Surcharge	\$113.46	\$248.46	\$214.46	\$356.46
PPO 500: Working Spouse/DP + Tobacco User Surcharges	\$113.46	\$294.61	\$214.46	\$402.61
MEDICAL PLANS - Kaiser HMO (CA only)				
Kaiser HMO	\$79.00	\$199.00	\$171.00	\$274.00
Kaiser HMO Working Spouse/DP Surcharge	N/A	\$245.15	N/A	\$320.15
Kaiser HMO Tobacco User Surcharge	\$97.46	\$217.46	\$189.46	\$292.46
Kaiser HMO Working Spouse/DP + Tobacco User Surcharges	\$97.46	\$263.61	\$189.46	\$338.61
MEDICAL PLANS - Centivo Coordinated Care (So. CA only)				
Centivo Coordinated Care	\$44.00	\$119.00	\$102.00	\$164.00
Centivo Coordinated Care Spouse/DP Surcharge	N/A	\$165.15	N/A	\$210.15
Centivo Coordinated Care Tobacco User Surcharge	\$62.46	\$137.46	\$120.46	\$182.46
Centivo Coordinated Care Spouse/DP + Tobacco User Surcharge	\$62.46	\$183.61	\$120.46	\$228.61
MEDICAL PLANS - Collective Health In-Network** (not accepting new enrollments)				
In-Network	\$67.00	\$182.00	\$156.00	\$250.00
In-Network Working Spouse/DP Surcharge	N/A	\$228.15	N/A	\$296.15
In-Network Tobacco User Surcharge	\$85.46	\$200.46	\$174.46	\$268.46
In-Network Working Spouse/DP + Tobacco User Surcharge	\$85.46	\$246.61	\$174.46	\$314.61
DENTAL PLANS - Delta Dental				
Delta Dental HMO	\$4.00	\$8.00	\$7.00	\$11.00
Delta Dental PPO	\$7.00	\$13.00	\$14.00	\$19.00
VISION PLANS - VSP				
VSP Vision Plan	\$2.00	\$4.00	\$4.00	\$8.00

*Cost to the employee to cover a Domestic Partner will be deducted on an after-tax basis. The cost to Activision Blizzard to cover a Domestic Partner is considered income to the employee and employees will be subjected to imputed income and related income tax expenses.

**Not open to new enrollments

SUPPLEMENTAL TERM LIFE INSURANCE

Age As Of 1/1/2023	Employee, Working Spouse/ Domestic Partner	Children
Your after-tax bi-weekly cost		
Under 35	\$0.0240	Children Up to Age 26: \$0.1075 per \$1,000 of coverage
35-39	\$0.0300	
40-44	\$0.0425	
45-49	\$0.0646	
50-54	\$0.1020	
55-59	\$0.1638	
60-64	\$0.2515	
65-69	\$0.4611	
70-74	\$0.9406	
75+	\$1.8997	

For every \$1,000 of coverage you choose, multiply by the rate shown to determine your per pay period costs.

SUPPLEMENTAL ACCIDENT INSURANCE (AD&D)

Employee Only	Family
Your after-tax bi-weekly cost	
\$0.0055 per \$1,000	\$0.0083 per \$1,000

METLIFE LEGAL PLANS

Employee Only
Your after-tax bi-weekly cost
\$7.62

SUPPLEMENTAL DISABILITY INSURANCE

Buy-Up STD	Buy-Up LTD
Your pre-tax bi-weekly cost	
\$0.0309 per \$10 of weekly benefit	\$0.0738 per \$100 of covered benefits

IDENTITY GUARD

Employee Only	Family
Your after-tax bi-weekly cost	
\$4.13	\$7.82