

**LOCKHEED MARTIN AERONAUTICS COMPANY – MARIETTA  
2008 IAM NEGOTIATIONS  
HMO SUMMARY COMPARISON (ACTIVES AND UNDER AGE 65 RETIREES)**

<b>BENEFIT *</b>	<b>CURRENT HMO PLAN</b>	<b>PROPOSED HMO PLAN</b>
Office Visit Copay	\$15 copay – PCP visit \$15 copay – Specialist visit	\$20 copay – PCP visit \$20 copay – Specialist visit
Inpatient Hospital Copay	\$100 copay per admission	\$150 copay per admission
Emergency Room/Emergency Care Facility (including urgent care facilities) Copay	\$50 copay (waived if admitted, but inpatient hospital copay will apply)	\$75 copay (waived if admitted, but inpatient hospital copay will apply)
Prescription Drugs		
Retail (30-day supply)	Generic: \$5 copay Preferred brand-name: \$15 copay Non-preferred brand-name: \$30 copay	Generic: \$5 copay Preferred brand-name: \$20 copay Non-preferred brand-name: \$40 copay
Mail Order (90-day supply)	Generic: \$10 copay Preferred brand-name: \$30 copay Non-preferred brand-name: \$60 copay	Generic: \$10 copay Preferred brand-name: \$40 copay Non-preferred brand-name: \$80 copay
* Or the nearest available plan offering filed with the state.		

This comparison of benefits is intended for use as a summary only. In the event any information contained in this document is inconsistent with the terms of the plan documents, the plan documents will govern. The terms of the Plan will be summarized in a separate Summary Plan Description.