

Monthly Premiums for Current Employees

Plan Year Jan. 1 through Dec. 31, 2016

HEALTH PLANS	MEMBER	SPOUSE	CHILD	CHILDREN			
Aetna INTEGRIS HMO	\$ 515.82	\$ 845.76	\$ 271.72	\$ 433.22			
BlueLincs HMO	\$ 595.34	\$ 976.40	\$ 313.76	\$ 500.18			
CommunityCare HMO	\$ 796.14	\$ 1,159.68	\$ 405.48	\$ 648.78			
GlobalHealth HMO	\$ 499.76	\$ 737.68	\$ 269.98	\$ 440.86			
HealthChoice High and High Alternative	\$ 526.88	\$ 661.22	\$ 267.50	\$ 412.72			
HealthChoice Basic and Basic Alternative	\$ 397.82	\$ 488.38	\$ 227.82	\$ 351.14			
HealthChoice High Deductible Health Plan (HDHP)	\$ 345.86	\$ 421.76	\$ 197.08	\$ 302.92			
HealthChoice USA	\$ 806.48	\$ 806.48	\$ 264.86	\$ 408.46			
DISABILITY (Employee only) \$9.10 (Limited county participation only)							
DENTAL PLANS	MEMBER	SPOUSE	CHILD	CHILDREN			
Assurant Freedom Preferred	\$ 28.82	\$ 28.66	\$ 21.50	\$ 57.80			
Assurant Heritage Plus with SBA (Prepaid)	\$ 11.74	\$ 8.86	\$ 7.60	\$ 15.20			
Assurant Heritage Secure (Prepaid)	\$ 7.20	\$ 5.98	\$ 5.20	\$ 10.38			
Cigna Dental Care Plan (Prepaid)	\$ 9.26	\$ 6.06	\$ 7.08	\$ 15.32			
Delta Dental PPO	\$ 33.64	\$ 33.62	\$ 29.26	\$ 74.04			
Delta Dental PPO Plus Premier	\$ 44.52	\$ 44.52	\$ 38.78	\$ 98.06			
Delta Dental PPO — Choice	\$ 15.06	\$ 34.18	\$ 34.44	\$ 83.60			
HealthChoice Dental	\$ 32.00	\$ 32.00	\$ 27.40	\$ 68.20			
VISION PLANS	MEMBER	SPOUSE	CHILD	CHILDREN			
Humana Vision Care Plan	\$ 7.14	\$ 12.46	\$ 10.90	\$ 11.84			
Primary Vision Care Services (PVCS)	\$ 9.36	\$ 8.00	\$ 8.00	\$ 11.00			
Superior Vision	\$ 7.40	\$ 7.36	\$ 6.96	\$ 14.30			
UnitedHealthcare Vision	\$ 8.18	\$ 5.78	\$ 4.58	\$ 6.98			
Vision Care Direct	\$ 15.90	\$ 9.74	\$ 9.74	\$ 13.00			
Vision Service Plan (VSP)	\$ 9.50	\$ 6.36	\$ 6.12	\$ 13.72			
LIFE							
HealthChoice Basic Life (\$20,000) \$4.00		First \$20,000 of Supplemental Life \$4.00					
SUPPLEMENTAL LIFE — Age Rated Cost Per \$20,000 Unit							
< 30 ----	\$ 1.20	30 - 34 ----	\$ 1.20	35 - 39 ----	\$ 1.20	40 - 44 ----	\$ 1.60
45 - 49 ----	\$ 2.80	50 - 54 ----	\$ 5.20	55 - 59 ----	\$ 8.00	60 - 64 ----	\$ 9.20
65 - 69 ----	\$ 14.80	70 - 74 ----	\$ 25.60	75+ ----	\$ 39.20		
DEPENDENT LIFE	Low Option \$2.60	Standard Option \$4.32	Premier Option \$8.64				
Spouse	\$6,000 of coverage	\$10,000 of coverage	\$20,000 of coverage				
Child (live birth to age 26)	\$3,000 of coverage	\$ 5,000 of coverage	\$10,000 of coverage				

Dependent Life does not include Accidental Death and Dismemberment (AD&D).