

STATE HEALTH BENEFIT PLAN RATES JANUARY 1 - DECEMBER 31, 2018

| | YOU | | | YOU + CHILD(REN) | | | YOU + SPOUSE | | | YOU + FAMILY | | |
|-----------------|------------|----------|----------------|------------------|----------|----------------|--------------|----------|----------------|--------------|----------|----------------|
| | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION |
| BCBS Gold HRA | \$168.73 | \$ 94.70 | \$ 74.03 | \$307.13 | \$ 94.70 | \$ 212.43 | \$418.09 | \$ 94.70 | \$ 323.39 | \$556.50 | \$ 94.70 | \$ 461.80 |
| BCBS Silver HRA | \$110.89 | \$ 94.70 | \$ 16.19 | \$208.80 | \$ 94.70 | \$ 114.10 | \$296.62 | \$ 94.70 | \$ 201.92 | \$394.54 | \$ 94.70 | \$ 299.84 |
| BCBS Bronze HRA | \$ 72.45 | \$ 94.70 | \$ - | \$143.46 | \$ 94.70 | \$ 48.76 | \$215.91 | \$ 94.70 | \$ 121.21 | \$286.92 | \$ 94.70 | \$ 192.22 |
| BCBS HMO | \$135.65 | \$ 94.70 | \$ 40.95 | \$250.90 | \$ 94.70 | \$ 156.20 | \$348.63 | \$ 94.70 | \$ 253.93 | \$463.89 | \$ 94.70 | \$ 369.19 |
| UHC HMO | \$172.56 | \$ 94.70 | \$ 77.86 | \$313.65 | \$ 94.70 | \$ 218.95 | \$426.14 | \$ 94.70 | \$ 331.44 | \$567.22 | \$ 94.70 | \$ 472.52 |
| UHC HDHP | \$ 58.03 | \$ 94.70 | \$ - | \$118.94 | \$ 94.70 | \$ 24.24 | \$185.62 | \$ 94.70 | \$ 90.92 | \$246.54 | \$ 94.70 | \$ 151.84 |
| Kaiser HMO | \$142.71 | \$ 94.70 | \$ 48.01 | \$262.59 | \$ 94.70 | \$ 167.89 | \$362.49 | \$ 94.70 | \$ 267.79 | \$482.37 | \$ 94.70 | \$ 387.67 |

WITH \$80 TOBACCO SURCHARGE ADDED

| | YOU | | | YOU + CHILD(REN) | | | YOU + SPOUSE | | | YOU + FAMILY | | |
|-----------------|------------|----------|----------------|------------------|----------|----------------|--------------|----------|----------------|--------------|----------|----------------|
| | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION | STATE RATE | BCS PAYS | YOUR DEDUCTION |
| BCBS Gold HRA | \$248.73 | \$ 94.70 | \$ 154.03 | \$387.13 | \$ 94.70 | \$ 292.43 | \$498.09 | \$ 94.70 | \$ 403.39 | \$636.50 | \$ 94.70 | \$ 541.80 |
| BCBS Silver HRA | \$190.89 | \$ 94.70 | \$ 96.19 | \$288.80 | \$ 94.70 | \$ 194.10 | \$376.62 | \$ 94.70 | \$ 281.92 | \$474.54 | \$ 94.70 | \$ 379.84 |
| BCBS Bronze HRA | \$152.45 | \$ 94.70 | \$ 57.75 | \$223.46 | \$ 94.70 | \$ 128.76 | \$295.91 | \$ 94.70 | \$ 201.21 | \$366.92 | \$ 94.70 | \$ 272.22 |
| BCBS HMO | \$215.65 | \$ 94.70 | \$ 120.95 | \$330.90 | \$ 94.70 | \$ 236.20 | \$428.63 | \$ 94.70 | \$ 333.93 | \$543.89 | \$ 94.70 | \$ 449.19 |
| UHC HMO | \$252.56 | \$ 94.70 | \$ 157.86 | \$393.65 | \$ 94.70 | \$ 298.95 | \$506.14 | \$ 94.70 | \$ 411.44 | \$647.22 | \$ 94.70 | \$ 552.52 |
| UHC HDHP | \$138.03 | \$ 94.70 | \$ 43.33 | \$198.94 | \$ 94.70 | \$ 104.24 | \$265.62 | \$ 94.70 | \$ 170.92 | \$326.54 | \$ 94.70 | \$ 231.84 |
| Kaiser HMO | \$222.71 | \$ 94.70 | \$ 128.01 | \$342.59 | \$ 94.70 | \$ 247.89 | \$442.49 | \$ 94.70 | \$ 347.79 | \$562.37 | \$ 94.70 | \$ 467.67 |

TRICARE SUPPLEMENT RATES JANUARY 1 - DECEMBER 31, 2017

| YOU | | | YOU + CHILD(REN) | | | YOU + SPOUSE | | | YOU + FAMILY | | |
|------------|----------|---------------|------------------|----------|----------------|--------------|----------|----------------|--------------|----------|----------------|
| State Rate | BCS pays | You pay | State Rate | BCS pays | You pay | State Rate | BCS pays | You pay | State Rate | BCS pays | You pay |
| \$60.50 | \$94.70 | \$0.00 | \$119.50 | \$94.70 | \$24.80 | \$119.50 | \$94.70 | \$24.80 | \$160.50 | \$94.70 | \$65.80 |

*Remember payroll deductions for State Health will change with your December 2017 paycheck.
December premiums/payroll deductions pay for your January 2018 coverage.*