

| Health Plan Type/Tier (Per Month) | <u>ACCORD</u> Premium | <u>AWARE</u> Premium | City Contribution to Premium | Employee Cost for <u>Accord</u> Network | Employee Cost for <u>Aware</u> Network | City Contribution to VEBA | Total City Contribution Per Contract Option A |
|-------------------------------------|--------------------------|-------------------------|------------------------------------|--|---|---------------------------------|--|
| Single Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$972.00 | \$1,008.50 | \$517.14 | \$454.86 | \$491.36 | NA | \$517.14 |
| BCBS \$1500 Ded. Plan w/VEBA | \$825.00 | \$855.50 | \$637.00 | \$188.00 | \$218.50 | \$130.00 | \$767.00 |
| BCBS \$2500 Ded. Plan w/VEBA | \$760.00 | \$788.50 | \$637.00 | \$123.00 | \$151.50 | \$130.00 | \$767.00 |
| BCBS \$4000 Ded. Plan w/VEBA | \$670.00 | \$695.00 | \$670.00 | 0 | \$25.00 | \$114.00 | \$784.00 |
| Employee + Spouse Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,041.50 | \$2,118.50 | \$831.56 | \$1,209.94 | \$1,286.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,733.00 | \$1,797.50 | \$908.00 | \$825.00 | \$889.50 | \$160.00 | \$1,068.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,596.50 | \$1,656.50 | \$908.00 | \$688.50 | \$748.50 | \$160.00 | \$1,068.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,408.00 | \$1,460.50 | \$908.00 | \$500.00 | \$552.50 | \$160.00 | \$1,068.00 |
| Employee + Children Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$1,945.00 | \$2,018.00 | \$831.56 | \$1,113.44 | \$1,186.44 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,649.50 | \$1,712.00 | \$990.00 | \$659.50 | \$722.00 | \$160.00 | \$1,150.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,520.00 | \$1,577.00 | \$990.00 | \$530.00 | \$587.00 | \$160.00 | \$1,150.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,340.50 | \$1,391.00 | \$990.00 | \$350.50 | \$401.00 | \$160.00 | \$1,150.00 |
| Family Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,529.00 | \$2,623.50 | \$831.56 | \$1,697.44 | \$1,791.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$2,145.50 | \$2,225.00 | \$1,166.00 | \$979.50 | \$1,059.00 | \$192.00 | \$1,358.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,976.50 | \$2,051.50 | \$1,166.00 | \$810.50 | \$885.50 | \$192.00 | \$1,358.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,743.00 | \$1,808.50 | \$1,166.00 | \$577.00 | \$642.50 | \$192.00 | \$1,358.00 |
| Waivers | | | | | | | |
| | | | | | | (Waivers) | \$295.00 |

| Health Plan Type/Tier (Per Month) | <u>ACCORD</u> Premium | <u>AWARE</u> Premium | City Contribution to Premium | Employee Cost for <u>Accord</u> Network | Employee Cost for <u>Aware</u> Network | City Contribution to VEBA | Total City Contribution Option B |
|-------------------------------------|--------------------------|-------------------------|------------------------------------|--|---|---------------------------------|--|
| Single Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$972.00 | \$1,008.50 | \$517.14 | \$454.86 | \$491.36 | NA | \$517.14 |
| BCBS \$1500 Ded. Plan w/VEBA | \$825.00 | \$855.50 | \$654.00 | \$171.00 | \$201.50 | \$130.00 | \$784.00 |
| BCBS \$2500 Ded. Plan w/VEBA | \$760.00 | \$788.50 | \$654.00 | \$106.00 | \$134.50 | \$130.00 | \$784.00 |
| BCBS \$4000 Ded. Plan w/VEBA | \$670.00 | \$695.00 | \$629.00 | \$41.00 | \$66.00 | \$155.00 | \$784.00 |
| Employee + Spouse Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,041.50 | \$2,118.50 | \$831.56 | \$1,209.94 | \$1,286.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,733.00 | \$1,797.50 | \$932.00 | \$801.00 | \$865.50 | \$160.00 | \$1,092.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,596.50 | \$1,656.50 | \$932.00 | \$664.50 | \$724.50 | \$160.00 | \$1,092.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,408.00 | \$1,460.50 | \$932.00 | \$476.00 | \$528.50 | \$160.00 | \$1,092.00 |
| Employee + Children Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$1,945.00 | \$2,018.00 | \$831.56 | \$1,113.44 | \$1,186.44 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,649.50 | \$1,712.00 | \$1,016.00 | \$633.50 | \$696.00 | \$160.00 | \$1,176.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,520.00 | \$1,577.00 | \$1,016.00 | \$504.00 | \$561.00 | \$160.00 | \$1,176.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,340.50 | \$1,391.00 | \$1,016.00 | \$324.50 | \$375.00 | \$160.00 | \$1,176.00 |
| Family Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,529.00 | \$2,623.50 | \$831.56 | \$1,697.44 | \$1,791.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$2,145.50 | \$2,225.00 | \$1,166.00 | \$979.50 | \$1,059.00 | \$192.00 | \$1,358.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,976.50 | \$2,051.50 | \$1,166.00 | \$810.50 | \$885.50 | \$192.00 | \$1,358.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,743.00 | \$1,808.50 | \$1,166.00 | \$577.00 | \$642.50 | \$192.00 | \$1,358.00 |
| Waivers | | | | | | | |
| | | | | | (Waivers) | | \$295.00 |

| Health Plan Type/Tier (Per Month) | <u>ACCORD</u> Premium | <u>AWARE</u> Premium | City Contribution to Premium | Employee Cost for <u>Accord</u> Network | Employee Cost for <u>Aware</u> Network | City Contribution to VEBA | Total City Contribution Option C |
|-------------------------------------|--------------------------|-------------------------|------------------------------------|--|---|---------------------------------|--|
| Single Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$972.00 | \$1,008.50 | \$517.14 | \$454.86 | \$491.36 | NA | \$517.14 |
| BCBS \$1500 Ded. Plan w/VEBA | \$825.00 | \$855.50 | \$670.00 | \$155.00 | \$185.50 | \$130.00 | \$800.00 |
| BCBS \$2500 Ded. Plan w/VEBA | \$760.00 | \$788.50 | \$670.00 | \$90.00 | \$118.50 | \$130.00 | \$800.00 |
| BCBS \$4000 Ded. Plan w/VEBA | \$670.00 | \$695.00 | \$670.00 | 0 | \$25.00 | \$130.00 | \$800.00 |
| Employee + Spouse Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,041.50 | \$2,118.50 | \$831.56 | \$1,209.94 | \$1,286.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,733.00 | \$1,797.50 | \$932.00 | \$801.00 | \$865.50 | \$160.00 | \$1,092.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,596.50 | \$1,656.50 | \$932.00 | \$664.50 | \$724.50 | \$160.00 | \$1,092.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,408.00 | \$1,460.50 | \$932.00 | \$476.00 | \$528.50 | \$160.00 | \$1,092.00 |
| Employee + Children Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$1,945.00 | \$2,018.00 | \$831.56 | \$1,113.44 | \$1,186.44 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,649.50 | \$1,712.00 | \$1,016.00 | \$633.50 | \$696.00 | \$160.00 | \$1,176.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,520.00 | \$1,577.00 | \$1,016.00 | \$504.00 | \$561.00 | \$160.00 | \$1,176.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,340.50 | \$1,391.00 | \$1,016.00 | \$324.50 | \$375.00 | \$160.00 | \$1,176.00 |
| Family Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,529.00 | \$2,623.50 | \$831.56 | \$1,697.44 | \$1,791.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$2,145.50 | \$2,225.00 | \$1,166.00 | \$979.50 | \$1,059.00 | \$192.00 | \$1,358.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,976.50 | \$2,051.50 | \$1,166.00 | \$810.50 | \$885.50 | \$192.00 | \$1,358.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,743.00 | \$1,808.50 | \$1,166.00 | \$577.00 | \$642.50 | \$192.00 | \$1,358.00 |
| Waivers | | | | | | | |
| | | | | | | (Waivers) | \$295.00 |

| Health Plan Type/Tier (Per Month) | <u>ACCORD</u> Premium | <u>AWARE</u> Premium | City Contribution to Premium | Employee Cost for <u>Accord</u> Network | Employee Cost for <u>Aware</u> Network | City Contribution to VEBA | Total City Contribution Option D |
|-------------------------------------|--------------------------|-------------------------|------------------------------------|--|---|---------------------------------|--|
| Single Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$972.00 | \$1,008.50 | \$517.14 | \$454.86 | \$491.36 | NA | \$517.14 |
| BCBS \$1500 Ded. Plan w/VEBA | \$825.00 | \$855.50 | \$695.00 | \$130.00 | \$160.50 | \$130.00 | \$825.00 |
| BCBS \$2500 Ded. Plan w/VEBA | \$760.00 | \$788.50 | \$695.00 | \$65.00 | \$93.50 | \$130.00 | \$825.00 |
| BCBS \$4000 Ded. Plan w/VEBA | \$670.00 | \$695.00 | \$670.00 | 0 | \$25.00 | \$155.00 | \$825.00 |
| Employee + Spouse Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,041.50 | \$2,118.50 | \$831.56 | \$1,209.94 | \$1,286.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,733.00 | \$1,797.50 | \$932.00 | \$801.00 | \$865.50 | \$160.00 | \$1,092.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,596.50 | \$1,656.50 | \$932.00 | \$664.50 | \$724.50 | \$160.00 | \$1,092.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,408.00 | \$1,460.50 | \$932.00 | \$476.00 | \$528.50 | \$160.00 | \$1,092.00 |
| Employee + Children Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$1,945.00 | \$2,018.00 | \$831.56 | \$1,113.44 | \$1,186.44 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$1,649.50 | \$1,712.00 | \$1,016.00 | \$633.50 | \$696.00 | \$160.00 | \$1,176.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,520.00 | \$1,577.00 | \$1,016.00 | \$504.00 | \$561.00 | \$160.00 | \$1,176.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,340.50 | \$1,391.00 | \$1,016.00 | \$324.50 | \$375.00 | \$160.00 | \$1,176.00 |
| Family Plans | | | | | | | |
| BCBS 100% \$30.00 co-pay | \$2,529.00 | \$2,623.50 | \$831.56 | \$1,697.44 | \$1,791.94 | NA | \$831.56 |
| BCBS \$1500/\$3000 Ded. Plan w/VEBA | \$2,145.50 | \$2,225.00 | \$1,166.00 | \$979.50 | \$1,059.00 | \$192.00 | \$1,358.00 |
| BCBS \$2500/\$5000 Ded. Plan w/VEBA | \$1,976.50 | \$2,051.50 | \$1,166.00 | \$810.50 | \$885.50 | \$192.00 | \$1,358.00 |
| BCBS \$4000/8000 Ded. Plan w/VEBA | \$1,743.00 | \$1,808.50 | \$1,166.00 | \$577.00 | \$642.50 | \$192.00 | \$1,358.00 |
| Waivers | | | | | | | |
| | | | | | | (Waivers) | \$295.00 |