

| 2019 RATES for HEALTH, LIFE, VISION and DENTAL INSURANCE         |       |                     |            |            |            |            |            |             |             |            |
|--|-------|---------------------|------------|------------|------------|------------|------------|-------------|-------------|------------|
|  |       |                     |            |            |            |            |            |             |             |            |
|  |       |                     |            | UNIONS     |            |            |            |             |             |            |
|  |       |                     |            |            |            |            |            |             |             |            |
|  |       |                     |            |            |            |            |            |             |             |            |
|  |       |                     | CSEA       | SWD        | MGMT /     | Deputies   | Sheriff's  | Corrections | Corrections | Indigent   |
|  |       |                     | (1000)     | (8427)     | N-Union    | (1529)     | Supervisor | (2390)      | Supervisor  | Defenders  |
| HEALTH INSURANCE   |       |                     |            |            |            |            |            |             |             |            |
| Active (payroll deduction)                                       |       |                     |            |            |            |            |            |             |             |            |
| ACTV   | S -SN | Active Single       | \$39.50    | \$39.50    | \$39.50    | \$66.41    | \$66.41    | \$40.62     | \$53.35     | \$37.62    |
|  | D -WD | Active w/dep        | \$98.05    | \$98.05    | \$98.05    | \$129.45   | \$129.45   | \$96.38     | \$121.87    | \$96.38    |
|  | F -FM | Active Family       | \$183.30   | \$183.30   | \$183.30   | \$202.96   | \$202.96   | \$177.57    | \$203.81    | \$177.57   |
|  | -WV   | No health insurance | 0.00       | 0.00       | 0.00       | 0.00       | 0.00       | 0.00        | 0.00        | 0.00       |
| Billed, Workers' Comp, and Family Medical Leave (billed monthly) |       |                     |            |            |            |            |            |             |             |            |
| BILL   | SN    | Single Coverage     | \$85.58    | \$85.58    | \$85.58    | \$143.88   | \$143.88   | \$88.00     | \$144.48    | \$81.50    |
| COMP   | WD    | w/Dep Coverage      | \$212.44   | \$212.44   | \$212.44   | \$280.47   | \$280.47   | \$208.83    | \$281.65    | \$208.83   |
| FMLA   | FM    | Family Coverage     | \$397.15   | \$397.15   | \$397.15   | \$439.74   | \$439.74   | \$384.75    | \$441.60    | \$384.75   |
| Retiree (billed monthly)   |       |                     |            |            |            |            |            |             |             |            |
| RET  | SN    | Retired Single      | \$ 85.58   | \$ 85.58   | \$85.58    | \$143.88   | \$143.88   | \$88.00     | \$144.48    | \$81.50    |
|  | WD    | Retired w/Dep       | \$ 212.44  | \$ 212.44  | \$212.44   | \$280.47   | \$280.47   | \$208.83    | \$281.65    | \$208.83   |
|  | FM    | Retired Family      | \$ 397.16  | \$ 397.16  | \$397.16   | \$439.74   | \$439.74   | \$384.75    | \$441.60    | \$384.75   |
|  | MS    | Ret. Single w/Med   | \$ 65.32   | \$ 65.32   | \$65.32    | \$108.11   | \$108.11   | \$67.74     | \$108.57    | \$61.24    |
|  | M1    | Ret. Family 1 w/Med | \$ 271.57  | \$ 271.57  | \$271.57   | \$314.35   | \$314.35   | \$267.95    | \$315.68    | \$267.95   |
|  | M2    | Ret. Family 2 w/Med | \$ 202.22  | \$ 202.22  | \$202.22   | \$230.38   | \$230.38   | \$189.81    | \$231.35    | \$189.81   |
|  | M3    |                     |            |            |            |            |            |             |             |            |
| Retired Surviving Spouse (billed monthly)                        |       |                     |            |            |            |            |            |             |             |            |
| RSPS   | FM    | Spouse and Family   | \$1,279.75 | \$1,279.75 | \$1,279.75 | \$1,483.33 | \$1,483.33 | \$1,267.33  | \$1,490.08  | \$1,267.33 |
|  | M1    | Spouse w/Medicare   | \$881.62   | \$881.62   | \$881.62   | \$1,025.66 | \$1,025.66 | \$878.00    | \$1,029.98  | \$878.00   |
| Leave of Absence (billed monthly)                                |       |                     |            |            |            |            |            |             |             |            |
| LOA  | SN    | LOA Single          | \$819.08   | \$819.08   | \$819.08   | \$959.19   | \$959.19   | \$821.50    | \$963.23    | \$815.00   |
|  | WD    | LOA Single w/Dep    | \$1,499.53 | \$1,499.53 | \$1,499.53 | \$1,752.92 | \$1,752.92 | \$1,495.92  | \$1,760.30  | \$1,495.92 |
|  | FM    | LOA Family          | \$2,094.75 | \$2,094.75 | \$2,094.75 | \$2,443.02 | \$2,443.02 | \$2,082.33  | \$2,453.31  | \$2,082.33 |
| COBRA (billed monthly)   |       |                     |            |            |            |            |            |             |             |            |
| CBRA   | SN    | Cobra Single        | \$835.38   | \$835.38   | \$835.38   | \$978.37   | \$978.37   | \$837.80    | \$982.49    | \$831.30   |
|  | WD    | Cobra Single w/Dep  | \$1,529.32 | \$1,529.32 | \$1,529.32 | \$1,787.98 | \$1,787.98 | \$1,525.71  | \$1,795.51  | \$1,525.71 |
|  | FM    | Cobra Family        | \$2,136.26 | \$2,136.26 | \$2,136.26 | \$2,491.88 | \$2,491.88 | \$2,123.85  | \$2,502.38  | \$2,123.85 |

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|--|---|--------------------------------|---------|--------------|--|----------|------------|-------------|-------------|-----------|
| LIFE INSURANCE   |   |                                | CSEA    | SW           | MANG /   | Deputies | Sheriff's  | Corrections | Corrections | Indigent  |
|  |   |                                | (1000)  | (8427)       | N-UNION  | (1529)   | Supervisor | (2390)      | Supervisor  | Defenders |
| Active   | (payroll deduction)   |                                |         |              |  |          |            |             |             |           |
|  | S   | Single                         | 0.00    | 0.00         | 0.00   | 0.00     | 0.00       | 0.00        | 0.00        | 0.00      |
|  | F   | Dependent                      | 1.15    | 1.15         | 1.15   | 1.15     | 1.15       | 1.15        | 1.15        | 1.15      |
|  |   |                                |         |              |  |          |            |             |             |           |
| Retired  | (billed monthly - all units)                                  |                                |         |              |  |          |            |             |             |           |
|  | SN  | Single/hired before 06/01/1980 | 0.00    | Emp. # 1-259 |  |          |            |             |             |           |
|  | DP  | Family/hired before 06/01/1980 | 2.50    | Emp. # 1-259 |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
|  | SA  | Single/hired after 06/01/1980  | 3.25    | Emp. # 260+  |  |          |            |             |             |           |
|  | FA  | Family/hired after 06/01/1980  | 5.75    | Emp. # 260+  |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
| DENTAL INSURANCE   |   |                                | CSEA    | SW           | MANG /   | Deputies | Sheriff's  | Corrections | Corrections | Indigent  |
|  |   |                                | (1000)  | (8427)       | N-UNION  | (1529)   | Supervisor | (2390)      | Supervisor  | Defenders |
|  |   |                                |         |              |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
| Active   |   | Single                         | \$0.00  | \$0.00       | \$0.00   | \$0.00   | \$0.00     | \$21.20     | \$0.00      | \$0.00    |
| (payroll deduction)  |   | Single w/children              | N/A     | N/A          | N/A  | \$13.75  | \$13.75    | \$34.96     | N/A         | N/A       |
|  |   | 2 person-no children           | N/A     | N/A          | N/A  | \$13.75  | \$13.75    | \$34.96     | N/A         | N/A       |
|  |   | Family                         | \$38.50 | \$38.50      | \$38.50  | \$30.23  | \$30.23    | \$51.43     | \$38.50     | \$38.50   |
|  |   |                                |         |              |  |          |            |             |             |           |
| Retired  |   | Single                         | N/A     | N/A          | N/A  | 52.70    | 52.70      | 52.70       | N/A         | N/A       |
| (billed monthly)   |   | Single w/children              | N/A     | N/A          | N/A  | 82.50    | 82.50      | 82.50       | N/A         | N/A       |
|  |   | 2 person-no children           | N/A     | N/A          | N/A  | 82.50    | 82.50      | 82.50       | N/A         | N/A       |
|  |   | Family                         | N/A     | N/A          | N/A  | 118.20   | 118.20     | 118.20      | N/A         | N/A       |
|  |   |                                |         |              |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
| CSEA Dental rates change July 1st                              |   |                                |         |              |  |          |            |             |             |           |
| Council 82 Dental rates change May 1st (April open-enrollment) |   |                                |         |              |  |          |            |             |             |           |
|  | Corrections Supervisors changed to CSEA Dental/Vison 05/01/18 |                                |         |              |  |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
| VISION INSURANCE   |   |                                |         |              | CSEA DENTAL/VISION COBRA COVERAGE                                    |          |            |             |             |           |
|  |   |                                |         |              | Payroll will notify CSEA EBF you are no longer receiving a paycheck. |          |            |             |             |           |
| Active   | CSEA, Management & Corrections Supervisors Composite Rate:    |                                |         |              | CSEA EBF should contact you to begin COBRA coverage.                 |          |            |             |             |           |
|  | no charge to employees and enrolled dependents                |                                |         |              | Contact CSEA EBF at 1-800-323-2732 for more information.             |          |            |             |             |           |
|  |   |                                |         |              |  |          |            |             |             |           |
| Updated: 03/01/2019  |   |                                |         |              |  |          |            |             |             |           |