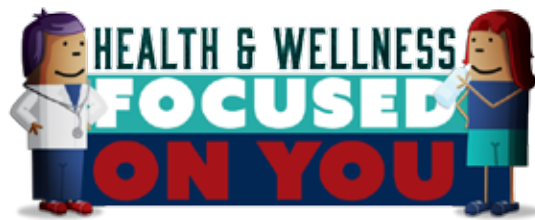


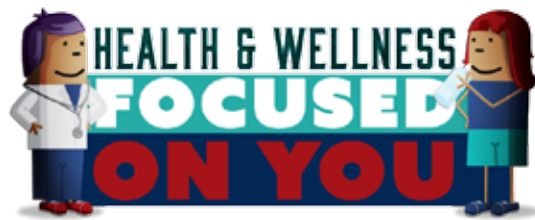
**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

BENEFIT	COVERAGE LEVEL	EMPLOYEE ONLY	EMPLOYEE & FAMILY
Delta Dental	DeltaCare USA Plan DHMO Standard	\$7.91	\$20.14
	DeltaCare USA Plan DHMO High	\$13.31	\$33.98
	Delta Dental PPO Standard	\$17.24	\$52.90
	Delta Dental PPO High	\$40.63	\$121.48
UnitedHealthcare Dental	UHC Solstice Access+ Standard DHMO	\$8.33	\$21.20
	UHC Solstice Access+ High DHMO	\$10.86	\$27.70
	UHC PPO Standard	\$18.51	\$55.68
	UHC PPO High	\$37.92	\$113.36
Davis Vision	—	\$5.06	\$12.21
UHC Vision	—	\$5.30	\$13.26
Hospital Indemnity Coverage	\$50 Per Day	\$2.48	\$6.20
	\$100 Per Day	\$4.96	\$12.40
	\$150 Per Day	\$7.44	\$18.60
ID Watchdog Identity Theft Protection	—	\$7.95	\$13.95
Short-Term Disability	Standard	\$9.84	N/A
	Standard Upgrade	\$15.83	N/A
Long-Term Disability	Level 1	\$15.92	N/A
ARAG <sup>®</sup> Legal	—	N/A	\$14.76
ARAG <sup>®</sup> Senior Advocate™	—	N/A	\$7.76
MetLaw Hyatt Legal Plan	—	N/A	\$15.95
MetLaw Senior Plan	—	N/A	\$6.35



**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

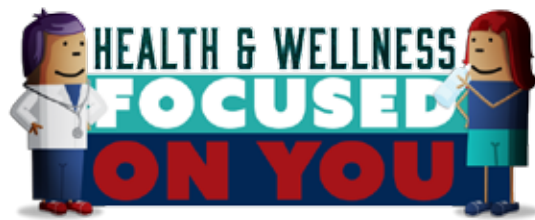
Provider	Benefit	Tier	Age	Reduction	Amount	Monthly
MetLife	Life	Retiree Only	Under 65	100% of original policy	\$ 10,000	\$ 3.00
					\$ 20,000	\$ 6.00
					\$ 30,000	\$ 9.00
					\$ 40,000	\$ 12.00
					\$ 50,000	\$ 15.00
					\$ 60,000	\$ 18.00
					\$ 70,000	\$ 21.00
					\$ 80,000	\$ 24.00
					\$ 90,000	\$ 27.00
					\$ 100,000	\$ 30.00
MetLife	Life	Retiree Only	65-69	65% of original policy	\$ 6,500	\$ 1.95
					\$ 13,000	\$ 3.90
					\$ 19,500	\$ 5.85
					\$ 26,000	\$ 7.80
					\$ 32,500	\$ 9.75
					\$ 39,000	\$ 11.70
					\$ 45,500	\$ 13.65
					\$ 52,000	\$ 15.60
					\$ 58,500	\$ 17.55
					\$ 65,000	\$ 19.50
MetLife	Life	Retiree Only	70-74	45% of original policy	\$ 4,500	\$ 1.35
					\$ 9,000	\$ 2.70
					\$ 13,500	\$ 4.05
					\$ 18,000	\$ 5.40
					\$ 22,500	\$ 6.75
					\$ 27,000	\$ 8.10
					\$ 31,500	\$ 9.45
					\$ 36,000	\$ 10.80
					\$ 40,500	\$ 12.15
					\$ 45,000	\$ 13.50
MetLife	Life	Retiree Only	75-80	30% of original policy	\$ 3,000	\$ 0.90
					\$ 6,000	\$ 1.80
					\$ 9,000	\$ 2.70
					\$ 12,000	\$ 3.60
					\$ 15,000	\$ 4.50
					\$ 18,000	\$ 5.40
					\$ 21,000	\$ 6.30
					\$ 24,000	\$ 7.20
					\$ 27,000	\$ 8.10
\$ 30,000	\$ 9.00					



**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

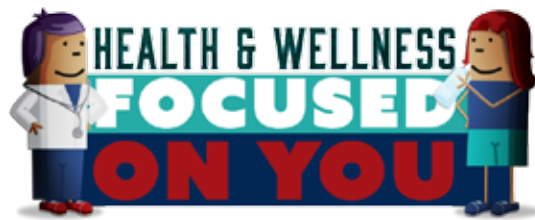
Provider	Benefit	Tier	Age	Reduction	Amount	Monthly
MetLife	Life	Retiree Only	80+	20% of original policy	\$ 2,000	\$ 0.60
					\$ 4,000	\$ 1.20
					\$ 6,000	\$ 1.80
					\$ 8,000	\$ 2.40
					\$ 10,000	\$ 3.00
					\$ 12,000	\$ 3.60
					\$ 14,000	\$ 4.20
					\$ 16,000	\$ 4.80
					\$ 18,000	\$ 5.40
					\$ 20,000	\$ 6.00

BENEFIT	AGE	REDUCTION	COVERAGE LEVEL	EMPLOYEE ONLY	EMPLOYEE & FAMILY
MetLife Accidental Death and Dismemberment (AD&D)  This benefit is not available to Bargaining Unit 4 (AFSCME) employees.	Under 70	100% of original policy	\$ 25,000	\$ 0.33	\$ 0.65
			\$ 50,000	\$ 0.65	\$ 1.30
			\$ 75,000	\$ 0.98	\$ 1.95
			\$ 100,000	\$ 1.30	\$ 2.60
			\$ 125,000	\$ 1.63	\$ 3.25
			\$ 150,000	\$ 1.95	\$ 3.90
			\$ 175,000	\$ 2.28	\$ 4.55
			\$ 200,000	\$ 2.60	\$ 5.20
			\$ 225,000	\$ 2.93	\$ 5.85
			\$ 250,000	\$ 3.25	\$ 6.50
			\$ 275,000	\$ 3.58	\$ 7.15
			\$ 300,000	\$ 3.90	\$ 7.80
			\$ 325,000	\$ 4.23	\$ 8.45
			\$ 350,000	\$ 4.55	\$ 9.10
			\$ 375,000	\$ 4.88	\$ 9.75
			\$ 400,000	\$ 5.20	\$ 10.40
			\$ 425,000	\$ 5.53	\$ 11.05
			\$ 450,000	\$ 5.85	\$ 11.70
\$ 475,000	\$ 6.18	\$ 12.35			
\$ 500,000	\$ 6.50	\$ 13.00			



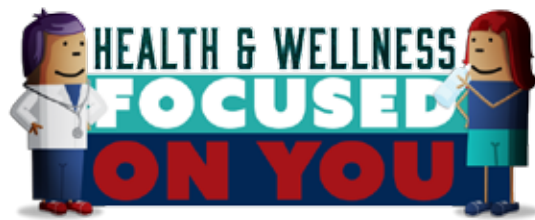
**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

BENEFIT	AGE	REDUCTION	COVERAGE LEVEL	EMPLOYEE ONLY	EMPLOYEE & FAMILY
MetLife Accidental Death and Dismemberment (AD&D)  This benefit is not available to Bargaining Unit 4 (AFSCME) employees.	70-74	70% of original policy	\$ 17,500	\$ 0.23	\$ 0.46
			\$ 35,000	\$ 0.46	\$ 0.91
			\$ 52,500	\$ 0.68	\$ 1.37
			\$ 70,000	\$ 0.91	\$ 1.82
			\$ 87,500	\$ 1.14	\$ 2.28
			\$ 105,000	\$ 1.37	\$ 2.73
			\$ 122,500	\$ 1.59	\$ 3.19
			\$ 140,000	\$ 1.82	\$ 3.64
			\$ 157,500	\$ 2.05	\$ 4.10
			\$ 175,000	\$ 2.28	\$ 4.55
			\$ 192,500	\$ 2.50	\$ 5.01
			\$ 210,000	\$ 2.73	\$ 5.46
			\$ 227,500	\$ 2.96	\$ 5.92
			\$ 245,000	\$ 3.19	\$ 6.37
			\$ 262,500	\$ 3.41	\$ 6.83
			\$ 280,000	\$ 3.64	\$ 7.28
			\$ 297,500	\$ 3.87	\$ 7.74
\$ 315,000	\$ 4.10	\$ 8.19			
\$ 332,500	\$ 4.32	\$ 8.65			
\$ 350,000	\$ 4.55	\$ 9.10			



**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

BENEFIT	AGE	REDUCTION	COVERAGE LEVEL	EMPLOYEE ONLY	EMPLOYEE & FAMILY
MetLife Accidental Death and Dismemberment (AD&D)  This benefit is not available to Bargaining Unit 4 (AFSCME) employees.	75-79	45% of original policy	\$ 11,250	\$ 0.15	\$ 0.29
			\$ 22,500	\$ 0.29	\$ 0.59
			\$ 33,750	\$ 0.44	\$ 0.88
			\$ 45,000	\$ 0.59	\$ 1.17
			\$ 56,250	\$ 0.73	\$ 1.46
			\$ 67,500	\$ 0.88	\$ 1.76
			\$ 78,750	\$ 1.02	\$ 2.05
			\$ 90,000	\$ 1.17	\$ 2.34
			\$ 101,250	\$ 1.32	\$ 2.63
			\$ 112,500	\$ 1.46	\$ 2.93
			\$ 123,750	\$ 1.61	\$ 3.22
			\$ 135,000	\$ 1.76	\$ 3.51
			\$ 146,250	\$ 1.90	\$ 3.80
			\$ 157,500	\$ 2.05	\$ 4.10
			\$ 168,750	\$ 2.19	\$ 4.39
			\$ 180,000	\$ 2.34	\$ 4.68
			\$ 191,250	\$ 2.49	\$ 4.97
\$ 202,500	\$ 2.63	\$ 5.27			
\$ 213,750	\$ 2.78	\$ 5.56			
\$ 225,000	\$ 2.93	\$ 5.85			



**2017 Part-Time (B,E,F,L) FlexPlan Rates**  
 January 1, 2017 - December 31, 2017

BENEFIT	AGE	REDUCTION	COVERAGE LEVEL	EMPLOYEE ONLY	EMPLOYEE & FAMILY
MetLife Accidental Death and Dismemberment (AD&D)  This benefit is not available to Bargaining Unit 4 (AFSCME) employees.	80-84	30% of original policy	\$ 7,500	\$ 0.10	\$ 0.20
			\$ 15,000	\$ 0.20	\$ 0.39
			\$ 22,500	\$ 0.29	\$ 0.59
			\$ 30,000	\$ 0.39	\$ 0.78
			\$ 37,500	\$ 0.49	\$ 0.98
			\$ 45,000	\$ 0.59	\$ 1.17
			\$ 52,500	\$ 0.68	\$ 1.37
			\$ 60,000	\$ 0.78	\$ 1.56
			\$ 67,500	\$ 0.88	\$ 1.76
			\$ 75,000	\$ 0.98	\$ 1.95
			\$ 82,500	\$ 1.07	\$ 2.15
			\$ 90,000	\$ 1.17	\$ 2.34
			\$ 97,500	\$ 1.27	\$ 2.54
			\$ 105,000	\$ 1.37	\$ 2.73
			\$ 112,500	\$ 1.46	\$ 2.93
			\$ 120,000	\$ 1.56	\$ 3.12
			\$ 127,500	\$ 1.66	\$ 3.32
\$ 135,000	\$ 1.76	\$ 3.51			
\$ 142,500	\$ 1.85	\$ 3.71			
\$ 150,000	\$ 1.95	\$ 3.90			