El Dorado Co Product	ounty - 2020 Contributions	PPO		
Name of Plan	CSAC Blue Shield PPO \$200 (Actives & Early Retirees)			
Number of Subscribers Group Number	437 W0052143 PPOX0001			
Tier	UW Base Rate	WT Fee	Total	
Single Two Party	\$1,221.89 \$2,201.26	\$0.50 \$0.50	\$1,222.39 \$2,201.76	
Family	\$3,059.88	\$0.50	\$3,060.38	
Product Name of Plan	CSAC Blue Shield ABHP	PPO	tiroos\	
Number of Subscribers		100	urees)	
Group Number Tier	UW Base Rate	PPOX0002,X0007 WT Fee	Total	
Single	\$937.06	\$0.50	\$937.56	
Two Party Family	\$1,689.38 \$2,347.80	\$0.50 \$0.50	\$1,689.88 \$2,348.30	
Product		PPO		
Name of Plan	CSAC Blue Shield Bronze Plan	ABHP \$2000 (Actives & Ea	arly Retirees)	
Number of Subscribers Group Number	W0052143 PF	24 POX0006, PPOX0008		
Tier	UW Base Rate	WT Fee	Total	
Single Two Party	\$843.14 \$1,522.20	\$0.50 \$0.50	\$843.64 \$1,522.70	
Family	\$2,114.57	\$0.50	\$2,115.07	
Product Name of Plan	0040 K-law III40	HMO		
Number of Subscribers	CSAC Kaiser HMO (Actives & Early Retirees) 873			
Group Number		936-0000		
Tier Single	Kaiser Base Rate \$755.00	WT Fee \$0.50	Total \$755.50	
Two Party Family	\$1,494.00 \$2,105.00	\$0.50 \$0.50	\$1,494.50 \$2,105.50	
Product	V=1:22:22	нмо	,.00.00	
Name of Plan	HMO Kaiser HMO \$1400 ABHP (Actives & Early Retirees)			
Number of Subscribers Group Number	39 34936-2, 34936-3			
Tier	Kaiser Base Rate	WT Fee	Total	
Single Two Party	\$622.00 \$1,224.00	\$0.50 \$0.50	\$622.50 \$1,224.50	
Family	\$1,723.00	\$0.50	\$1,723.50	
Product		IO - KPSA		
Name of Plan Number of Subscribers	CSAC Kaiser HI	MO (Medicare Retirees) 137		
Group Number	roup Contributions	936-0001		
Tier	Kaiser Base Rate	WT Fee	Total	
Single 2 Party (Both Medicare)	\$449.00 \$881.00	\$0.50 \$0.50	\$449.50 \$881.50	
2 Party (1 Medicare + 1 Without) Family (1 Medicare + 2 Without)	\$1,204.00 \$1,799.00	\$0.50 \$0.50	\$1,204.50 \$1,799.50	
Family (2 Medicare + 1 Without)	\$1,492.00	\$0.50	\$1,492.50	
Combo Rates Sub (M)	\$449.00	\$0.50	\$449.50	
Sub (M)+Spouse (Non-M) Sub (Non-M)+Spouse (M)	\$1,204.00 \$1,204.00	\$0.50 \$0.50	\$1,204.50 \$1,204.50	
Sub (M)+Spouse (M) Sub (M)+Child (Non-M)	\$881.00 \$1,204.00	\$0.50 \$0.50	\$881.50 \$1,204.50	
Sub (M)+Children (Non-M)	\$1,799.00	\$0.50	\$1,799.50	
Sub (M)+Spouse (M)+Child (Non-M) Sub (M)+Spouse (Non-M)+Child (Non-M)	\$1,492.00 \$1,799.00	\$0.50 \$0.50	\$1,492.50 \$1,799.50	
Sub (Non-M)+Spouse (M)+Child (Non-M) Sub (M)+Spouse (M)+Children (Non-M)	\$1,799.00 \$1,492.00	\$0.50 \$0.50	\$1,799.50 \$1,492.50	
Sub (M)+Spouse (Non-M)+Children (Non-M) Sub (Non-M)+Spouse (M)+Child (Non-M)	\$1,799.00 \$1,799.00	\$0.50 \$0.50	\$1,799.50 \$1,799.50	
	\$1,799.00		\$1,799.50	
Product Name of Plan	PPO UHC Group Retiree			
Number of Subscribers Group Number	174 H2001			
Tier	UHC Base Rate	WT Fee	Total	
PMPM	\$473.52	\$7.25	\$480.77	
Product		Dental		
Name of Plan Number of Subscribers	Delta Dental PPO 1693			
Group Number	353			
Tier Single	Delta Base Rate (ASO) \$51.79		Total \$51.79	
Two Party Family	\$93.22 \$129.47		\$93.22 \$129.47	
ADMÍN COST				
PBIA Program Management Fee	\$0.35 \$1.00		PEPM PEPM	
Dental	7.20%		of claims	
Product Name of Plan	CSAC FIA	Vision		
Name of Plan Number of Subscribers	CSAC EIA VSP (All Others) 1509			
Group Number	00112374-0001			
Tier Single	VSP Base Rate (ASO) \$4.49		<b>Total</b> \$4.49	
Two Party Family	\$8.97 \$14.44		\$8.97 \$14.44	
ADMIN COST			PEPM	
PBIA Program Management Fee	\$0.35 \$0.00		PEPM PEPM of claims	
Dental	9.00%			
Product Name of Plan	CSACE	Vision		
Number of Subscribers	CSAC EIA VSP (Sheriffs) 148			
Group Number	00112374-0003		<b>*</b>	
Tier Single	VSP Base Rate (ASO) \$3.80		Total \$3.80	
Two Party Family	\$7.59 \$12.23		\$7.59 \$12.23	
ADMIN COST PBIA				
I DIA	\$0.35		PEPM	

Product   Name of Pian   MHN EAP	Program Management Fee	\$0.00		PEPM		
Name of Plan   Number of Subscribers   1729   172	Dental				of claims	
Name of Plan   Number of Subscribers   1729   172	Deceluet					
Number of Subscribers   1729   6178						
Composite Rate						
Product						
Product   Life & Disability   Name of Plan   Basic Life and AD&D	· ·			10	·	
Product   Life & Disability   Name of Plan   Basic Life and AD&D	Tier		MHN Base Rate		Total	
Number of Subscribers   1549   10182351   10182352   10182351   10182352   10182351   10182352	Composite Rate	\$5.17 \$5.17			\$5.17	
Number of Subscribers   1549	Product		Life & D	isability		
Composite   Comp	Name of Plan	Basic Life and AD&D				
	Number of Subscribers	1549				
Product Name of Plan   Sult	Group Number	10182351				
Product Name of Plan   Voluntary Life	Tier	Lincoln Life Rate	te Lincoln AD&D Rate Total		Total	
Name of Plan   Voluntary Life   783 - Employees   178 - Employe	Composite (per \$1000 of benefit)	\$0.11			\$0.13	
Name of Plan   Voluntary Life   783 - Employees   178 - Employe						
Number of Subscribers						
Number of Subscribers   251 - Children	Name of Plan					
Age Banded Rates   Lincoln Unismoker Rates						
Age Banded Rates   Lincoln Unismoker Rates   Lincoln Unismoker Rates   Lincoln Unismoker Rates   Lincoln Unismoker Rates   Lincoln Spouse Rates   Juder Age 25   S0.040   S	Number of Subscribers					
Age Banded Rates         Lincoln Employee Rates         Lincoln Spouse Rates           Lales per \$1,000         Lincoln Employee Rates         Lincoln Spouse Rates           Lincoln Spouse Rates         \$0,040         \$0,040           \text{\text{\$\text{\$0.040}\$}}         \$0,040         \$0,040           \text{\text{\$\text{\$\text{\$0.060}\$}}}         \$0,060         \$0,060           \text{\text{\$\text{\$\text{\$0.390}\$}}}         \$0,080         \$0,080           \text{\text{\$\text{\$\text{\$0.210}\$}}}         \$0,130         \$0,130           \text{\text{\$\text{\$0.544}\$}}         \$0,210         \$0,210           \text{\text{\$\text{\$\text{\$0.0600}\$}}}         \$0,080         \$0,080           \text{\text{\$\text{\$\text{\$\text{\$0.0600}\$}}}         \$0,080         \$0,080           \text{\text{\$\text{\$\text{\$\text{\$\text{\$0.0600}\$}}}}         \$0,080         \$0,080           \text{\text{\$\text{\$\text{\$\text{\$\text{\$0.0600}\$}}}}         \$0,080         \$0,080           \text{\$\	Group Number					
Calca per \$1.000						
Index   Age 25   \$0.040   \$0.040   \$0.040     Age 25-29   \$0.040   \$0.040     Age 30-34   \$0.060   \$0.060     Age 30-34   \$0.060   \$0.060     Age 30-39   \$0.080   \$0.080     Age 40-44   \$0.130   \$0.130     Age 45-49   \$0.210   \$0.210     Age 50-54   \$0.330   \$0.380     Age 55-59   \$0.800   \$0.600     Age 55-59   \$0.600   \$0.600     Age 65-69   \$0.630   \$0.630     Age 65-69   \$1.170   \$1.170     Age 75 and Over   \$2.500   \$2.500     Age 75 and Over   \$2.500   \$2.500     Age 75 and Over   \$2.500   \$0.000     Age 75 and Over   \$2.000   \$0.000     Age 75 and Over   \$0.000     Age 75 and Over   \$0.000     Age 75 and Over   \$0.000     A					Datas	
\$49.25-29						
\$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
\$9.080   \$0.080   \$						
\$\\ \text{Age 40-44} \\ \text{\$ \text{ \$0,130} \\ \text{ \$0,130} \\ \text{ \$0,130} \\ \text{ \$0,210} \\ \text{ \$0,380} \\ \text{ \$0,380} \\ \text{ \$0,680} \\ \text{ \$0,630} \\ \text{ \$0,690} \\ \text{ \$0,2500} \\						
\$0.210						
Age 50-54   \$0.380   \$0.380   \$0.380     Age 55-59   \$0.600   \$0.600     Age 60-64   \$0.630   \$0.630     Age 65-69   \$1.170   \$1.170     Age 77-74   \$2.500   \$2.500     Age 75 and Over   \$2.500   N/A     Age 76-74   \$2.500   \$2.500     Age 75 and Over   \$2.500   \$2.500     Age 76 and Over   \$2.500   \$2.500     Age 76 and Over   \$2.500   N/A     Age 76 and Over   \$2.500   \$2.500     Age 76 and Over   \$2.500   N/A     Age 77 and Over   \$2.500   \$2.500     Age 76 and Over   \$2.500   \$2.500     Age 77 and Over   \$2.500     Age 78 and Over						
\$\ \text{Age 55-59} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Age 60-84   \$0.630   \$0.630     Age 65-69   \$1.170   \$1.170     Age 70-74   \$2.500   \$2.500     Age 75 and Over   \$2.500   N/A     Dependent Child(ren) Rate     Monthly Premium (per \$10,000)   \$2.000     Product   Life & Disability     Name of Plan   Long Term Disability     Number of Subscribers   1515     Group Number   10182352     Tier   Lincoln LTD Rate   Total     Total   Total     Construction   Total     Con	Age 50-04					
Section   Sect						
\$2,500   \$						
Name of Plan   Number of Subscribers   Scoop Number   Subscribers   Su						
Dependent Child(ren) Rate						
Product   Life & Disability		Ψ2.3		IN/F		
Name of Plan   Long Term Disability	Monthly Premium (per \$10,000)	\$2.000		\$2.000		
Name of Plan   Long Term Disability	Product	Life & Disability				
Number of Subscribers         1515           Group Number         10182352           Tier         Lincoln LTD Rate         Total						
Group Number         10182352           Tier         Lincoln LTD Rate         Total	Number of Subscribers					
Tier Lincoln LTD Rate Total						
		Lincoln LTD Pate Total				
	Composite (per \$100 of salary)	\$0.225		\$0.225		