CalPERS Medical, Principal Dental, Superior Vision and Cigna Life Insurance rates Effective July 1, 2022 (\$1,594.00 Monthly Allowance w/Cap) Mayor and City Council

Medical Plans-Los Angeles, F	Riverside and S	an Bernadino	Counties	Medical Plans-Othe	er Southern Cal	ifornia Counties	3
ANTHEM SELECT - HMO	Emp Only	Emp + 1	Emp + 2	ANTHEM SELECT - HMO	Emp Only	Emp + 1	Emp + 2
BASE 413	\$676.48	\$1,352.96	\$1,758.85	BASE 478	\$712.43	\$1,424.86	\$1,852.32
ADMIN FEE (.0033)	\$2.23	\$4.46	\$5.80	ADMIN FEE (.0033)	\$2.35	\$4.70	\$6.11
ANTHEM SELECT - HMO	\$678.71	\$1,357.42	\$1,764.65	ANTHEM SELECT - HMO	\$714.78	\$1,429.56	\$1,858.43
2021	\$640.70	\$1,281.40	\$1,665.81	2021	\$676.38	\$1,352.75	\$1,758.58
% INCREASE OVER 2021	5.93%	5.93%	5.93%	% INCREASE OVER 2021	5.68%	5.68%	5.68%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	\$144.00	(\$170.65)	LEFTOVER/OOP	\$155.00	\$144.00	(\$264.43)
COBRA	\$690.01	\$1,380.02	\$1,794.03	COBRA	\$726.68	\$1,453.36	\$1,889.37
ANTHEM TRADITIONAL - HMO	Emp Only	Emp + 1	Emp + 2	ANTHEM TRADITIONAL - HMO	Emp Only	Emp + 1	Emp + 2
BASE 402	\$935.57	\$1,871.14	\$2,432.48	BASE 407	\$1,007.13	\$2,014.26	\$2,618.54
ADMIN FEE (.0033)	\$3.09	\$6.17	\$8.03	ADMIN FEE (.0033)	\$3.32	\$6.65	\$8.64
ANTHEM TRADITIONAL - HMO	\$938.66	\$1,877.31	\$2,440.51	ANTHEM TRADITIONAL - HMO	\$1,010.45	\$2,020.91	\$2,627.18
2021	\$986.67	\$1,973.34	\$2,565.35	2021	\$1,048.66	\$2,097.31	\$2,726.50
% INCREASE OVER 2021	-4.87%	-4.87%	-4.87%	% INCREASE OVER 2021	-3.64%	-3.64%	-3.64%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	(\$283.31)	(\$846.51)	LEFTOVER/OOP	\$155.00	(\$426.91)	(\$1,033.18)
COBRA	\$954.28	\$1,908.56	\$2,481.13	COBRA	\$1,027.27	\$2,054.55	\$2,670.91
BS-ACCESS	Emp Only	Emp + 1	Emp + 2	BS-ACCESS	Emp Only	Emp + 1	Emp + 2
BASE 144	\$779.87 \$2.57	\$1,559.74 \$5.15	\$2,027.66 \$6.60	BASE 142	\$900.22	\$1,800.44 \$5.04	\$2,340.57 \$7,72
ADMIN FEE (.0033) BS-ACCESS	\$2.57 \$782.44	\$5.15 \$1,564.89	\$6.69 \$2,034.35	ADMIN FEE (.0033) BS-ACCESS	\$2.97 \$903.19	\$5.94 \$1,806.38	\$7.72 \$2,348.29
						\$1,806.38	\$2, 348.29 \$2,447.40
2021 % INCREASE OVER 2021	\$836.97 - <mark>6.51%</mark>	\$1,673.93 -6.51%	\$2,176.12 - <mark>6.51%</mark>	2021 % INCREASE OVER 2021	\$941.31 -4.05%	\$1,882.61 -4.05%	\$2,447.40 -4.05%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$1,594.00 \$155.00	\$1,394.00 \$29.11	(\$440.35)	LEFTOVER/OOP	\$155.00	(\$212.38)	(\$754.29)
COBRA	\$795.47	\$1,590.93	\$2,068.21	COBRA	\$918.22	\$1,836.45	\$2,387.38
BS-TRIO	Emp Only	Emp + 1	Emp + 2	BS-TRIO	Emp Only	Emp + 1	Emp + 2
BASE 144	\$668.13	\$1,336.26	\$1,737.14	BASE 142	\$742.70	\$1,485.40	\$1,931.02
ADMIN FEE (.0033)	\$2.20	\$4.41	\$5.73	ADMIN FEE (.0033)	\$2.45	\$4.90	\$6.37
BS-TRIO	\$670.33	\$1,340.67	\$1,742.87	BS-TRIO	\$745.15	\$1,490.30	\$1,937.39
2021	\$662.14	\$1,324.28	\$1,721.56	2021	\$724.37	\$1,448.73	\$1,883.36
% INCREASE OVER 2021	1.24%	1.24%	1.24%	% INCREASE OVER 2021	2.87%	2.87%	2.87%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	\$144.00	(\$148.87)	LEFTOVER/OOP	\$155.00	\$103.70	(\$343.39)
COBRA	\$681.49	\$1,362.99	\$1,771.88	COBRA	\$757.55	\$1,515.11	\$1,969.64
HEALTH NET SALUD Y MAS	Emp Only	Emp + 1	Emp + 2	HEALTH NET SALUD Y MAS	Emp Only	Emp + 1	Emp + 2
BASE 443	\$463.87	\$927.74	\$1,206.06	BASE 412	\$548.26	\$1,096.52	\$1,425.48
ADMIN FEE (.0033)	\$1.53	\$3.06	\$3.98	ADMIN FEE (.0033)	\$1.81	\$3.62	\$4.70
HEALTH NET SALUD Y MAS	\$465.40	\$930.80	\$1,210.04	HEALTH NET SALUD Y MAS	\$550.07	\$1,100.14	\$1,430.18
2021	\$413.91	\$827.82	\$1,076.17	2021	\$459.81	\$919.61	\$1,195.50
% INCREASE OVER 2021	12.44%	12.44%	12.44%	% INCREASE OVER 2021	19.63%	19.63%	19.63%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	\$144.00	\$144.00	LEFTOVER/OOP	\$155.00	\$144.00	\$144.00
COBRA	\$473.15	\$946.29	\$1,230.18	COBRA	\$559.23	\$1,118.45	\$1,453.99
HEALTH NET SMARTCARE	Emp Only	Emp + 1	Emp + 2	HEALTH NET SMARTCARE	Emp Only	Emp + 1	Emp + 2
BASE 408	\$764.96	\$1,529.92	\$1,988.90	BASE 414	\$845.69	\$1,691.38	\$2,198.79
ADMIN FEE (.0033)	\$2.52	\$5.05	\$6.56	ADMIN FEE (.0033)	\$2.79	\$5.58	\$7.26
HEALTH NET SMARTCARE	\$767.48	\$1,534.97 \$1,290,42	\$1,995.46	HEALTH NET SMARTCARE	\$848.48	\$1,696.96	\$2,206.05 \$2,004.60
2021	\$693.21	\$1,386.42	\$1,802.34	2021	\$771.03	\$1,542.07 10.04%	\$2,004.69
% INCREASE OVER 2021 ALLOWANCE	10.71% \$1 594 00	10.71% \$1,594.00	10.72% \$1 594 00	% INCREASE OVER 2021	10.05% \$1,594.00		10.04% \$1.594.00
LEFTOVER/OOP	\$1,594.00 \$155.00	\$1,594.00 \$60.26	\$1,594.00 (\$401.46)	ALLOWANCE LEFTOVER/OOP	\$1,594.00 \$155.00	\$1,594.00 (\$102.96)	\$1,594.00 (\$612.05)
COBRA	\$780.26	\$ 1 ,560.52	\$2,028.68	COBRA	\$862.60	\$1,725.21	\$2,242.77
KAISER	Emp Only	\$1,560.52 Emp + 1	\$2,020.00 Emp + 2	KAISER	Emp Only	Emp + 1	\$2,242.77 Emp + 2
BASE 306	\$719.78	\$1,439.56	\$1,871.43	BASE 308	\$706.02	\$1,412.04	\$1,835.65
ADMIN FEE (.0033)	\$2.38	\$4.75	\$6.18	ADMIN FEE (.0033)	\$2.33	\$4.66	\$6.06
KAISER	\$722.16	\$1,444.31	\$1,877.61	KAISER	\$708.35	\$1,416.70	\$1,841.71
2021	\$671.51	\$1,343.03	\$1,745.93	2021	\$671.44	\$1,342.89	\$1,745.75
% INCREASE OVER 2021	7.54%	7.54%	7.54%	% INCREASE OVER 2021	5.50%	5.50%	5.50%
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	\$144.00	(\$283.61)	LEFTOVER/OOP	\$155.00	\$144.00	(\$247.71)
COBRA	\$734.18	\$1,468.35	\$1,908.86	COBRA	\$720.14	\$1,440.28	\$1,872.36
PERS PLATINUM	Emp Only	Emp + 1	Emp + 2	PERS PLATINUM	Emp Only	Emp + 1	Emp + 2

CalPERS Medical, Principal Dental, Superior Vision and Cigna Life Insurance rates Effective July 1, 2022 (\$1,594.00 Monthly Allowance w/Cap) Mayor and City Council

BASE 321	\$863.37	\$1,726.74	\$2,244.76	BASE 323	\$882.18	\$1,764.36	\$2,293.67
ADMIN FEE (.0033)	\$2.85	\$5.70	\$7.41	ADMIN FEE (.0033)	\$2.91	\$5.82	\$2,293.07
PERS PLATINUM	\$866.22	\$1,732.44	\$2,252.17	PERS PLATINUM	\$885.09	\$1,770.18	\$2,301.24
2021	4000.22	ψ1,752.44	ψΖ,ΖΟΖ.ΤΤ	2021	4000.00	ψ1,770.10	ψ2,301.24
% INCREASE OVER 2021				% INCREASE OVER 2021			
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	(\$138.44)	(\$658.17)	LEFTOVER/OOP	\$155.00	(\$176.18)	(\$707.24)
COBRA	\$880.64	\$1,761.27	\$2,289.66	COBRA	\$899.82	\$1,799.65	\$2,339.54
PERS GOLD	Emp Only	Emp + 1	Emp + 2	PERS GOLD	Emp Only	Emp + 1	Emp + 2
BASE 080	\$575.56	\$1,151.12	\$1,496.46	BASE 082	\$587.78	\$1,175.56	\$1,528.23
ADMIN FEE (.0033)	0.0033	0.0033	0.0033	ADMIN FEE (.0033)	0.0033	0.0033	0.0033
PERS GOLD	\$577.46	\$1,154.92	\$1,501.40	PERS GOLD	\$589.72	\$1,179.44	\$1,533.27
2021	<i>Q</i> OTTIO	<i>Q</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i><i><i></i></i></i>	2021	<i><i><i>q</i>000112</i></i>	<i>Q</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$1,000121
% INCREASE OVER 2021				% INCREASE OVER 2021			
ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00	ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP	\$155.00	\$144.00	\$92.60	LEFTOVER/OOP	\$155.00	\$144.00	\$60.73
COBRA	\$587.07	\$1,174.14	\$1,526.39	COBRA	\$599.54	\$1,199.07	\$1,558.79
SHARP	Emp Only	Emp + 1	Emp + 2	SHARP	Emp Only	Emp + 1	Emp + 2
BASE 420	Not Offered	Not Offered	Not Offered	BASE 420	\$699.21	\$1,398.42	\$1,817.95
ADMIN FEE (.0033)			1101 0110104	ADMIN FEE (.0033)	\$2.31	\$4.61	\$6.00
SHARP	Not Offered	Not Offered	Not Offered	SHARP	\$701.52	\$1,403.03	\$1,823.95
2021				2021	\$633.85	\$1,267.70	\$1,648.01
% INCREASE OVER 2021				% INCREASE OVER 2021	10.68%	10.68%	10.68%
ALLOWANCE				ALLOWANCE	\$1,594.00	\$1,594.00	\$1,594.00
LEFTOVER/OOP				LEFTOVER/OOP	\$155.00	\$144.00	(\$229.95)
COBRA				COBRA	\$713.19	\$1,426.39	\$1,854.31
UNITEDHEALTHCARE ALLIANCE	Emp Only	Emp + 1	Emp + 2	UNITEDHEALTHCARE ALLIANCE	Emp Only	Emp + 1	Emp + 2
BASE 428	\$771.85	\$1,543.70	\$2,006.81	BASE 432	\$775.09	\$1,550.18	\$2,015.23
ADMIN FEE (.0033)	\$2.55	\$5.09	\$6.62	ADMIN FEE (.0033)	\$2.56	\$5.12	\$6.65
		\$ 5.09	φ0.0Z				ψ0.00
UNITEDHEALTHCARE ALLIANCE	\$774.40	\$3.09 \$1,548.79				\$1,555.30	\$2,021.88
UNITEDHEALTHCARE ALLIANCE 2021							
	\$774.40	\$1,548.79	\$2,013.43	UNITEDHEALTHCARE ALLIANCE	\$777.65	\$1,555.30	\$2,021.88
2021	\$774.40 \$722.69	\$1,548.79 \$1,445.38	\$2,013.43 \$1,879.00	UNITEDHEALTHCARE ALLIANCE 2021	\$777.65 \$725.65	\$1,555.30 \$1,451.30	\$2,021.88 \$1,886.68
2021 % INCREASE OVER 2021	\$774.40 \$722.69 7.15%	\$1,548.79 \$1,445.38 7.15%	\$2,013.43 \$1,879.00 7.15%	UNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021	\$777.65 \$725.65 7.17%	\$1,555.30 \$1,451.30 7.17%	\$2,021.88 \$1,886.68 7.17%
2021 % INCREASE OVER 2021 ALLOWANCE	\$774.40 \$722.69 7.15% \$1,594.00	\$1,548.79 \$1,445.38 7.15% \$1,594.00	\$2,013.43 \$1,879.00 7.15% \$1,594.00	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE	\$777.65 \$725.65 7.17% \$1,594.00	\$1,555.30 \$1,451.30 7.17% \$1,594.00	\$2,021.88 \$1,886.68 7.17% \$1,594.00
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88)
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033)	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18 Emp + 1	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18 Emp + 1 \$1,565.48	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,433.27 \$1,594.00 \$144.00	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26)	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84)
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,433.27 \$1,594.00	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE LEFTOVER/OOP COBRA	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$6.72 \$2,041.84 \$1,594.00
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of our	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 it-of-pocket exp	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,433.27 \$1,594.00 \$144.00 \$1,457.13 pense.	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 ee 7/1/22	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84)
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of our	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 it-of-pocket exp NRATES (OPTI	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL)	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Ferminia Statements of the second statement o	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 \$2 7/1/22 SURANCE	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISIOF	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp RATES (OPTI Emp Only	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fermion LIFE INS \$0.49	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 ee 7/1/22 SURANCE COST PER \$10	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISION	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp RATES (OPTI Emp Only \$6.04	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$144.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2 \$15.72	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMON BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMON ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Ferminia Statements of the second statement o	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 \$2 7/1/22 SURANCE	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISION SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp RATES (OPTI Emp Only \$6.04 \$6.16	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 ee 7/1/22 SURANCE COST PER \$10 \$122.50	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISION SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp RATES (OPTI Emp Only \$6.04 \$6.16 DENTAL RATES	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2 \$15.72 \$16.03	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000 ALLY TERM LIFE	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 ee 7/1/22 SURANCE COST PER \$10 \$122.50 EINSURANCE	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISIOF SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 it-of-pocket ext RATES (OPTI Emp Only \$6.04 \$6.16 DENTAL RATES Emp Only	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10 S Emp + 1	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 \$18.94.27 Emp + 2 \$15.72 \$16.03 Emp + 2	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL OPTIONAL FAM DEPN Spouse/Child	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000 ALLY TERM LIFI Flat Rate	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 \$2 7/1/22 SURANCE COST PER \$10 \$122.50 EINSURANCE \$122.50	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISION SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp RATES (OPTI Emp Only \$6.04 \$6.16 DENTAL RATES	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2 \$15.72 \$16.03	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL OPTIONAL FAM DEPN Spouse/Child	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000 ALLY TERM LIFE	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 ee 7/1/22 SURANCE COST PER \$10 \$122.50 EINSURANCE	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISIOF SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 it-of-pocket ext RATES (OPTI Emp Only \$6.04 \$6.16 DENTAL RATES Emp Only	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10 S Emp + 1	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 \$18.94.27 Emp + 2 \$15.72 \$16.03 Emp + 2	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL OPTIONAL FAM DEPN Spouse/Child	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000 ALLY TERM LIFI Flat Rate	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 \$2 7/1/22 SURANCE COST PER \$10 \$122.50 EINSURANCE \$122.50	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82
2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA UNITEDHEALTHCARE HARMONY BASE 428 ADMIN FEE (.0033) UNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Red indicates dollar amount of ou VISIOF SUPERIOR VISION SUPERIOR COBRA	\$774.40 \$722.69 7.15% \$1,594.00 \$155.00 \$787.29 Emp Only \$714.28 \$2.36 \$716.64 \$1,594.00 \$155.00 \$728.57 It-of-pocket exp NRATES (OPTI Emp Only \$6.04 \$6.16 DENTAL RATES Emp Only \$87.00	\$1,548.79 \$1,445.38 7.15% \$1,594.00 \$45.21 \$1,574.57 Emp + 1 \$1,428.56 \$4.71 \$1,428.56 \$4.71 \$1,594.00 \$1,457.13 pense. ONAL) Emp + 1 \$10.88 \$11.10 S Emp + 1 \$87.00	\$2,013.43 \$1,879.00 7.15% \$1,594.00 (\$419.43) \$2,046.95 Emp + 2 \$1,857.13 \$6.13 \$1,863.26 \$1,594.00 (\$269.26) \$1,894.27 Emp + 2 \$15.72 \$16.03 Emp + 2 \$87.00	JNITEDHEALTHCARE ALLIANCE 2021 % INCREASE OVER 2021 ALLOWANCE LEFTOVER/OOP COBRA JNITEDHEALTHCARE HARMONY BASE 432 ADMIN FEE (.0033) JNITEDHEALTHCARE HARMONY ALLOWANCE LEFTOVER/OOP COBRA Final cost of Medical includes .0 OPTIONAL CIGNA MAYOR/CITY COUNCIL OPTIONAL FAM DEPN Spouse/Child	\$777.65 \$725.65 7.17% \$1,594.00 \$155.00 \$790.59 Emp Only \$782.74 \$2.58 \$785.32 \$1,594.00 \$155.00 \$798.39 033% Admin Fe TERM LIFE INS \$0.49 \$250,000 ALLY TERM LIFI Flat Rate	\$1,555.30 \$1,451.30 7.17% \$1,594.00 \$38.70 \$1,581.18 Emp + 1 \$1,565.48 \$5.17 \$1,570.65 \$1,594.00 \$23.35 \$1,596.79 \$2 7/1/22 SURANCE COST PER \$10 \$122.50 EINSURANCE \$122.50	\$2,021.88 \$1,886.68 7.17% \$1,594.00 (\$427.88) \$2,055.53 Emp + 2 \$2,035.12 \$6.72 \$2,041.84 \$1,594.00 (\$447.84) \$2,075.82 000