

Medical Comparison		Chatfield Management Company												
Carrier	Office Visit Copay	Urgent Care Copay	E.R. Copay	Annual Deductible		Co-Insurance	Co-Insurance Maximum		True Out of Pocket Max		Prescription Copay	Monthly Premium	Annual Premium	Increase/ (Decrease)
				Single	Family		Single	Family	Single	Family				
Current Rates														
Blue Care Network HMO Platinum \$250	\$20	\$35	\$150	\$0	\$0	10%	\$1,000	\$2,000	\$5,000	\$10,000	\$4/\$15/\$40/\$80/ 20%/20%	\$34,092.40	\$409,108.80	N/A
Renewal Rates														
Blue Care Network HMO Platinum \$250	\$20	\$35	\$15	\$0	\$0	10%	\$1,000	\$2,000	\$5,000	\$10,000	\$4/\$15/\$40/\$80/ 20%/20%	\$35,130.73	\$421,568.76	3%
Alternate Options														
BCN HSA HMO Gold \$1,350	ded applies	ded applies	ded applies	\$1,350	\$2,600	0%	\$2,350	\$4,700	\$2,350	\$4,700	\$10/\$30/\$60/\$80/ /20%/20%	\$30,121.21	\$361,454.52	-12%
BCN HMO Classic 20%	\$25	\$35	\$150	\$0	\$0	20%	\$1,000	\$2,000	\$6,600	\$13,200	\$4/\$15/\$40/\$80/ 20%/20%	\$34,107.44	\$409,289.28	0%
BCN Classic HMO Gold \$500	\$20	\$50	\$150	\$500	\$1,000	10%	\$2,500	\$5,000	\$6,600	\$13,200	\$10/\$30/\$60/\$80/ /20%/20%	\$31,875.27	\$382,503.24	-7%

Above mentioned rates assume September 1, 2016 enrollments. Actual rates determined by final enrollment and may vary from proposed rates.

Above benefits are for illustrative purposes only. Please refer to insurance certificate for detailed benefit descriptions.

Dental Comparison		Chatfield Management Company												
Carrier	Annual Benefit Maximum	Annual Deductible	Class 1 Services Premium		Class 2 Services Basic		Class 3 Services Major		Class 4 Services Orthodontic		Premium			Monthly Premium
			Benefit Percentage		Benefit Percentage		Benefit Percentage		Benefit Percentage	Lifetime Maximum	Single	Two Person	Family	
<i>Current Census</i>											5	4	31	
Delta Dental MC 100	\$1,000	\$50	100%	90%	60%	50%	\$1,000	\$38.39	\$73.77	\$142.88	\$4,916.31			
Delta Dental MC 100	\$1,000	\$50	100%	90%	60%	\$1,000	\$13.38	\$72.81	\$141.04	\$4,730.38				

Above mentioned rates assume September 1, 2016 enrollments. Actual rates determined by final enrollment and may vary from proposed rates.

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Annual Premium	Annual Savings		
\$58,995.72		NA	
\$56,764.56		1%	
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