Plan Type Plan Code	Tiered Rates	Total Monthly Health Cost	Deductible Individual Family (In/ (In/Out) Out)	Coinsurance Individual (In/ Out) %	Out of Pocket Individual Family (In/ (In/Out) Out)	Copay PCP/ Spec	PCP Required	Prescription Drugs Ded T1/T2/ T3/T4\$
CnHEVV6000ES21B	EE: \$450.82 SP: \$891.72 CH: \$811.56 FAM: \$1,252.47	\$4,768.95	\$6,000.00/ \$12,000.00/ N/A N/A	100%/N/A	\$6,000.00/ \$12,000.00/ N/A N/A	Ded +Coins/ Ded +Coins	No	N/A \$Ded +Coins /\$Ded +Coins /\$Ded +Coins /\$Ded +Coins
CnHE40002575i80ES24B	EE: \$477.65 SP: \$948.06 CH: \$862.53 FAM: \$1,332.95	\$5,061.38	\$4,000.00/ \$8,000.00/ N/A N/A	80%/N/A	\$7,000.00/ \$14,000.00/ N/A N/A	\$25/\$75	No	N/A \$10.00 /\$35.00 /\$70.00 /\$150.00
CnHEVV2000ES22B	EE: \$599.15 SP: \$1,203.21 CH: \$1,093.39 FAM: \$1,697.45	\$6,385.74	\$2,000.00/ \$4,000.00/ N/A N/A	80%/N/A	\$6,550.00/ \$8,000.00/ N/A N/A	Ded +Coins/ Ded +Coins	No	N/A \$Ded +Coins /\$Ded +Coins /\$Ded +Coins /\$Ded +Coins
CnHE50002575i80ES24B	EE: \$450.66 SP: \$891.39 CH: \$811.25 FAM: \$1,251.99	\$4,767.20	\$5,000.00/ \$10,000.00/ N/A N/A	80%/N/A	\$7,000.00/ \$14,000.00/ N/A N/A	\$25/\$75	No	N/A \$10.00 /\$35.00 /\$70.00 /\$150.00
CnHEVV5000ES21B	EE: \$509.69 SP: \$1,015.36 CH: \$923.41 FAM: \$1,429.08	\$5,410.63	\$5,000.00/ \$10,000.00/ N/A N/A	100%/N/A	\$5,000.00/ \$10,000.00/ N/A N/A	Ded +Coins/ Ded +Coins	No	N/A \$Ded +Coins /\$Ded +Coins /\$Ded +Coins /\$Ded +Coins
CnHEVV4000ES21B	EE: \$580.04 SP: \$1,163.09 CH: \$1,057.08 FAM: \$1,640.14	\$6,177.46	\$4,000.00/ \$8,000.00/ N/A N/A	100%/N/A	\$4,000.00/ \$8,000.00/ N/A N/A	Ded +Coins/ Ded +Coins	No	N/A \$Ded +Coins /\$Ded +Coins /\$Ded +Coins /\$Ded +Coins

Rates and fees are subject to final underwriting terms and conditions. Do not cancel any existing health or stop loss coverage until you receive written confirmation from UnitedHealthCare Services, Inc. that your new coverage is in effect. This quote does not include state or federal surcharges, assessments or similar taxes required by law. The Patient Protection and Affordable Care Act imposes certain fees and taxes on plan sponsors. We are not responsible for those fees and taxes and have not included them in the rates and fees quoted. Please refer to the footnotes and predications sections of this proposal for additional product disclaimers to all other pages.

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