## DELTA DENTAL OF COLORADO Rates Sheets & Health Plan Description Forms Denver City Clerk's Filing No. 11-740 Filed 09.08.2011

### the Denver Fonce Kettree Dental Plan Effective 1/1/2011



Type I Preventive Services DO NOT GO TOWADD BY AN AN AND THE SERVICES	COVERED SERVICES	COVEDED CENTURES	Deductible (contract year); combined in and out-of-network (plan includes Prevention First)	Annual Maximum (contract year): combined in and out of personal (1)	Group Numbers:
		\$100	\$1,000	#7952	Low Option
		875	\$1,000	#7953	Medium Option
	3/3	C-7 C	(85.5	#7954	High Option

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á	Type I Preventive Services DO NOT GO TOWARD PLAN MAXIMUM
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Exams oral (limited to 1 in a 12-month period)

Cleanings (limited to 1 in a 6-month period)

Flouride Treatments (limited to 1 in a 12-month period, under age 16)

70%

 $80\,\%$ 

100%

Space Maintainers (under age 14)

Bitewing X-rays (limited to 1 in a 12-month period)

Sealants (under age 15)

50%	Type 3A Major Services: 12-month waiting period*	X-rays (full-mouth/panoramic - Limited to 1 in 60 months) Simple Extractions Fillings	Type 2 Basic Services
		50%	

80%

Gum Disease Treatment	Type 3A Major Services: 12-month waiting period*

Root Canals

General anesthesia Surgical Extractions

30%

40%

50%

Denture relines and rebases, adjustments

Repairs to crowns, dentures and bridges

Fixed Bridgework

Complete and partial dentures	Crowns	Special Restorative	Type 3B Major Services: 24-month waiting period*
30%			
40%			
50 %			Можения положения в серествення в пределения в положения в пределения положения в предоставления положения в по

Rates			medical designation of the control o
Employee Only			
Employee and 1 Dependent	\$18.22	\$25.02	3290
Employee and 2 or More Dependents	\$34.61	\$47.53	\$62.51
× 11.	\$50.78	\$68.62	\$92.40
* Waiting periods are waived for retirees that enroll within 60 days of retirement			The state of the s

Plan Design\*\*: Delta Dental PPO- Voluntary MAC (Maximum Allowable Charge) INCLUDES PREVENTION FIRST RIDER \*\* Reimbursement is paid at the Delta Dental PPO Allowance. If you see a Delta Dental Premier® or non-participating dentist, you may incur additional out-of-pocket expenses.

Ongoing Retiree Program: Group's Benefit Administrator will offer Delta Dental to all retirees during their exit interview. When does coverage expire: Coverage will only be terminated at the request of the member or upon non-payment of premium. If the retiree dies, the spouse can continue coverage as long as the spouse was covered in the

Who can be covered: Retiree as defined by the employer, spouse and dependent children to age 25.

#### 2011-2012 CSA Monthly Medical Premium Compare

•				
	2011	Contrib	utions an	d Rates
			City	Employee
	To City	,		Monthly
	Cont	Total	Cost	Cost
Consta	-	United He	atthcare HI	MO
Employed		\$659.54		\$98.93
e + spouse			\$1,122.67	\$325.94
Ee + child		\$1.317.12	\$1,053 70	\$263.42
Farmly	75%	\$2 106 50	\$1,579.88	\$526.63
		United Hea	althcare HD	HP
Employee				
6 + spouse	77.5%	Re	moved in 20	112
Ee + chiiq	80°.			) · · ·
Famuy	75			j
		KA	NSER	
Employeu	85%	\$435.73	\$370.37	\$65.36
d + spouse	77 500	\$956.20		\$215.15
Ee + child	80%	\$869 45	\$695.56	\$173.89
Family	75%	\$1 389 93		- 1
1			UCTIBLE I	\$347.48
Employed			OUTIBLE	IMU
# + spouse		Notation	red in 2011	l l
Ee + child		1401 01161	160 111 2011	Į.
Family				1
,		DENVE	RHEALTH	
Employee	85%	\$479.01	\$407.16	674.05
+ spouse		\$992.42		\$71.85
Ee + chiid	80%	\$770.84	\$769.13	\$223.29
Family			\$616.67	\$154.17
· · · · · · · · · · · · · · · · ·		¥1 3/3.90	\$1,030.47	\$343.49

2012 Contributions and Rates    City				
City Cont         Monthly Total         City Cost Cost Nonthly Cost Monthly Cost           B5% S717.70         \$610.05         \$107.66           85%         \$717.70         \$610.05         \$355.27           80%         \$1,435.44         \$1,148.35         \$287.09           75%         \$2,297.03         \$1,722.77         \$574.26           United Healthcare Navigate           95%         \$576.59         \$547.76         \$28.83           87.5%         \$1,268.51         \$1,109.95         \$158.56           90%         \$1,153.21         \$1,037.89         \$115.32           85%         \$1,845.40         \$1,568.59         \$276.81           KAISER           85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1,452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO         95%         \$347.24         \$329.88         \$17.36           95%         \$347.24         \$329.88         \$17.36           87.5%         \$1,111.16         \$944.49         \$166.67				
City         City         Employee           Cont         Monthly         Cost         Monthly Cost           United Healthcare HMO           85%         \$717.70         \$610.05         \$107.66           87%         \$1,578.96         \$1,223.69         \$355.27           80%         \$1,435.44         \$1,148.35         \$287.09           75%         \$2,297.03         \$1,722.77         \$574.26           United Healthcare Navigate           95%         \$576.59         \$547.76         \$28.83           87.5%         \$1,268.51         \$1,109.95         \$158.56           90%         \$1,153.21         \$1,037.89         \$115.32           85%         \$1,845.40         \$1,568.59         \$276.81           KAISER           85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1,452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO           95%         \$347.24         \$329.88         \$17.36           875.39         <	20	12 Contril	butions a	nd Rates
% City Cont         Monthly Total         Monthly Cost Monthly Cost Monthly Cost           United Healthcare HMO           85%         \$717.70         \$610.05         \$107.66           87%         \$1,578.96         \$1,223.69         \$355.27           80%         \$1,435.44         \$1,148.35         \$287.09           75%         \$2,297.03         \$1,722.77         \$574.26           United Healthcare Navigate           95%         \$576.59         \$547.76         \$28.83           87.5%         \$1,268.51         \$1,109.95         \$158.56           90%         \$1,153.21         \$1,037.89         \$115.32           85%         \$1,845.40         \$1,568.59         \$276.81           KAISER           85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1,452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO           95%         \$347.24         \$329.88         \$17.36           87.5%         \$763.92         \$668.43         \$99.49		- 4		
Cont         Total         Cost         Monthly Cost           United Healthcare HMO           85%         \$717.70         \$610.05         \$107.66           77.5%         \$1,578.96         \$1,223.69         \$355.27           80%         \$1,435.44         \$1,148.35         \$287.09           75%         \$2,297.03         \$1,722.77         \$574.26           United Healthcare Navigate           95%         \$576.59         \$547.76         \$28.83           87.5%         \$1,268.51         \$1,109.95         \$158.56           90%         \$1,153.21         \$1,037.89         \$115.32           85%         \$1,845.40         \$1,568.59         \$276.81           KAISER           85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1,452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO           95%         \$347.24         \$329.88         \$17.36           87.5%         \$763.92         \$668.43         \$95.49	% Cin	Monthly		C1-
United Healthcare HMO		,	,	
85%   \$717.70   \$610.05   \$107.66     77.5%   \$1,578.96   \$1,223.69   \$355.27     80%   \$1,435.44   \$1,148.35   \$287.09     75%   \$2,297.03   \$1,722.77   \$574.26     United Healthcare Navigate     95%   \$576.59   \$547.76   \$28.83     87.5%   \$1,268.51   \$1,109.95   \$158.56     90%   \$1,153.21   \$1,037.89   \$115.32     85%   \$4,540   \$1,568.59   \$276.81     KAISER     85%   \$454.04   \$385.93   \$68.11     77.5%   \$998.88   \$774.13   \$224.75     80%   \$998.08   \$726.46   \$181.62     75%   \$1,452.92   \$1,089.69   \$363.23     KAISER DEDUCTIBLE HMO     95%   \$347.24   \$329.88   \$17.36     87.5%   \$763.92   \$668.43   \$95.49     90%   \$694.48   \$625.03   \$69.45     85%   \$1,111.16   \$944.49   \$166.67     DENVER HEALTH     85%   \$513.27   \$436.28   \$76.99     77.5%   \$1,065.68   \$825.90   \$239.78     80%   \$827.27   \$661.82   \$165.45	1 3.11			Monthly Cost
77.5% \$1,578.96 \$1,223.69 \$355.27 80% \$1,435.44 \$1,148.35 \$287.09 75% \$2,297.03 \$1,722.77 \$574.26  United Healthcare Navigate  95% \$576.59 \$547.76 \$28.83 87.5% \$1,268.51 \$1,109.95 \$158.56 90% \$1,153.21 \$1,09.95 \$158.56  85% \$454.04 \$385.93 \$115.32 85% \$454.04 \$385.93 \$68.11 77.5% \$998.88 \$774.13 \$224.75 80% \$998.08 \$726.46 \$181.62 77.5% \$1,452.92 \$1,089.69 \$363.23  KAISER DEDUCTIBLE HMO  95% \$347.24 \$329.88 \$17.36 87.5% \$763.92 \$668.43 \$95.49 90% \$694.48 \$625.03 \$69.45 87.5% \$1,111.16 \$944.49 \$166.67  DENVER HEALTH  85% \$513.27 \$436.28 \$76.99 87.5% \$1,065.68 \$825.90 \$239.78 80% \$827.27 \$661.82 \$165.45	85%	\$717.70	\$610.05	6107.00
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United Healthcare Navigate	75%	\$2 297 03	\$1,140.33	\$287.09
95%   \$576.59   \$547.76   \$28.83     87.5%   \$1,268.51   \$1,109.95   \$158.56     90%   \$1,153.21   \$1,037.89   \$115.32     85%   \$1,845.40   \$1,568.59   \$276.81     KAISER     85%   \$454.04   \$385.93   \$68.11     77.5%   \$998.88   \$774.13   \$224.75     80%   \$998.08   \$726.46   \$181.62     75%   \$1,452.92   \$1,089.69   \$363.23     KAISER DEDUCTIBLE HMO     95%   \$347.24   \$329.88   \$17.36     87.5%   \$763.92   \$668.43   \$95.49     90%   \$694.48   \$625.03   \$69.45     85%   \$1,111.16   \$944.49   \$166.67     DENVER HEALTH     85%   \$513.27   \$436.28   \$76.99     77.5%   \$1,065.68   \$825.90   \$239.78     80%   \$827.27   \$661.82   \$165.45		United He	Ithores No.	\$574.26
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KAISER           KAISER           85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1.452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO           95%         \$347.24         \$329.88         \$17.36           87.5%         \$763.92         \$668.43         \$95.49           90%         \$694.48         \$625.03         \$69.45           85%         \$1,111.16         \$944.49         \$166.67           DENVER HEALTH           85%         \$513.27         \$436.28         \$76.99           77.5%         \$1,065.68         \$825.90         \$239.78           80%         \$827.27         \$661.82         \$165.45		\$1.845.40	\$1,037.89	
85%         \$454.04         \$385.93         \$68.11           77.5%         \$998.88         \$774.13         \$224.75           80%         \$998.08         \$726.46         \$181.62           75%         \$1,452.92         \$1,089.69         \$363.23           KAISER DEDUCTIBLE HMO           95%         \$347.24         \$329.88         \$17.36           87.5%         \$763.92         \$668.43         \$95.49           90%         \$694.48         \$625.03         \$69.45           85%         \$1,111.16         \$944.49         \$166.67           DENVER HEALTH           85%         \$513.27         \$436.28         \$76.99           77.5%         \$1,065.68         \$825.90         \$239.78           80%         \$827.27         \$661.82         \$165.45	33.73	<del>+11010.10</del>		\$276.81
77.5% \$998.88 \$774.13 \$224.75 80% \$908.08 \$726.46 \$181.62 75% \$1.452.92 \$1,089.69 \$363.23 **KAISER DEDUCTIBLE HMO**  95% \$347.24 \$329.88 \$17.36 87.5% \$763.92 \$668.43 \$95.49 90% \$694.48 \$625.03 \$69.45 85% \$1,111.16 \$944.49 \$166.67 **DENVER HEALTH**  85% \$513.27 \$436.28 \$76.99 77.5% \$1,065.68 \$825.90 \$239.78 80% \$827.27 \$661.82 \$165.45	85%			000.44
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***S43.23**  ***S47.24**  ***S47.24**  ***S47.24**  ***S47.24**  ***S43.29.88**  ***S763.92**  ***S668.43**  ***S69.45**  ***S694.48**  ***S625.03**  ***S69.45**  ***S694.49**  ***S613.27**  ***S628**  ***T6.99**  ***T6.99				
95%         \$347.24         \$329.88         \$17.36           87.5%         \$763.92         \$668.43         \$95.49           90%         \$694.48         \$625.03         \$69.45           85%         \$1,111.16         \$944.49         \$166.67           DENVER HEALTH           85%         \$513.27         \$436.28         \$76.99           77.5%         \$1,065.68         \$825.90         \$239.78           80%         \$827.27         \$661.82         \$165.45		KAISER DE	DUCTIBLE	\$363.23
87.5%     \$763.92     \$668.43     \$95.49       90%     \$694.48     \$625.03     \$69.45       85%     \$1,111.16     \$944.49     \$166.67       DENVER HEALTH       85%     \$513.27     \$436.28     \$76.99       77.5%     \$1,065.68     \$825.90     \$239.78       80%     \$827.27     \$661.82     \$165.45	95%	\$347.24		
90%     \$694.48     \$625.03     \$69.45       85%     \$1.111.16     \$944.49     \$166.67       DENVER HEALTH       85%     \$513.27     \$436.28     \$76.99       77.5%     \$1,065.68     \$825.90     \$239.78       80%     \$827.27     \$661.82     \$165.45				
85%         \$1,111.16         \$944.49         \$166.67           DENVER HEALTH           85%         \$513.27         \$436.28         \$76.99           77.5%         \$1,065.68         \$825.90         \$239.78           80%         \$827.27         \$661.82         \$165.45	90%			
DENVER HEALTH   85%   \$513.27   \$436.28   \$76.99     77.5%   \$1,065.68   \$825.90   \$239.78     80%   \$827.27   \$661.82   \$165.45	85%			- 0
85% \$513.27 \$436.28 \$76.99 77.5% \$1,065.68 \$825.90 \$239.78 80% \$827.27 \$661.82 \$165.45				\$100.07
77.5% \$1,065.68 \$825.90 \$239.78 80% \$827.27 \$661.82 \$165.45	85%			
80% \$827.27 \$661.82 \$165.45	77.5%			
	80%		4420.00	
	75%			\$369.05

Change 2011 to 2012						
Total % Monthly \$ Monthly \$ Change Change Change United Healthcare HMO  8.8% \$49.44 \$8.72  9.0% \$101.02 \$29.33  9.0% \$94.66 \$23.66  9.0% \$142.90 \$47.63  United Healthcare Navigate  Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75  4.5% \$33.08 \$9.60  4.4% \$30.90 \$7.73  4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14  7.4% \$56.78 \$16.48	Change 2011 to 2012					
Change         Change         Change           United         Healthcare         HMO           8.8%         \$49.44         \$8.72           9.0%         \$101.02         \$29.33           9.0%         \$94.66         \$23.66           9.0%         \$142.90         \$47.63           United Healthcare Navigate           Replaced HDHP, members will not be defaulted in           KAISER           4.2%         \$15.56         \$2.75           4.5%         \$33.08         \$9.60           4.4%         \$30.90         \$7.73           4.5%         \$47.24         \$15.75           KAISER DEDUCTIBLE HMO           Not offered in 2011           DENVER HEALTH           7.2%         \$29.12         \$5.14           7.4%         \$56.78         \$16.48		City	Employed			
## Not offered in 2011    DENVER HEALTH   T.2%   \$29.12   \$5.14   7.4%   \$5.68   \$7.2   \$5.14   7.4%   \$5.678   \$16.48   \$7.2   \$5.14   7.4%   \$5.678   \$1.00   \$1.00   \$1.00   \$1.00   \$29.33   \$9.00   \$47.63   \$1.00   \$47.63   \$1.00   \$47.63   \$1.00   \$1	Total %	Monthly \$	Monthly \$			
## Not offered in 2011    DENVER HEALTH   T.2%   \$29.12   \$5.14   7.4%   \$5.68   \$7.2   \$5.14   7.4%   \$5.678   \$16.48   \$7.2   \$5.14   7.4%   \$5.678   \$1.00   \$1.00   \$1.00   \$1.00   \$29.33   \$9.00   \$47.63   \$1.00   \$47.63   \$1.00   \$47.63   \$1.00   \$1	Change	Change	Change			
9.0% \$101.02 \$29.33 9.0% \$94.66 \$23.66 9.0% \$142.90 \$47.63  United Healthcare Navigate  Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75 4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	Unite	d Healthcai	re HMO			
9.0% \$94.66 \$23.66 9.0% \$142.90 \$47.63  United Healthcare Navigate  Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75 4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	8.8%	\$49.44	\$8.72			
9.0% \$94.66 \$23.66 9.0% \$142.90 \$47.63  United Healthcare Navigate  Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75 4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	9.0%	\$101.02	\$29.33			
## Comparison of	9.0%	\$94.66	\$23.66			
Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75  4.5% \$33.08 \$9.60  4.4% \$30.90 \$7.73  4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14  7.4% \$56.78 \$16.48	9.0%	\$142.90	\$47.63			
Replaced HDHP, members will not be defaulted in  KAISER  4.2% \$15.56 \$2.75  4.5% \$33.08 \$9.60  4.4% \$30.90 \$7.73  4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14  7.4% \$56.78 \$16.48	United I	dealthcare	Navigate			
Not be defaulted in    KAISER						
KAISER  4.2% \$15.56 \$2.75  4.5% \$33.08 \$9.60  4.4% \$30.90 \$7.73  4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14  7.4% \$56.78 \$16.48						
4.2% \$15.56 \$2.75 4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75 KAISER DEDUCTIBLE HMO Not offered in 2011 DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48						
4.2% \$15.56 \$2.75 4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75 KAISER DEDUCTIBLE HMO Not offered in 2011 DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48						
4.5% \$33.08 \$9.60 4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75 KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48						
4.4% \$30.90 \$7.73 4.5% \$47.24 \$15.75 KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH  7.2% \$29.12 \$5.14  7.4% \$56.78 \$16.48		\$15.56	\$2.75			
4.5% \$47.24 \$15.75  KAISER DEDUCTIBLE HMO  Not offered in 2011  DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48						
Not offered in 2011  DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	4.4%	\$30.90	\$7.73			
DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48		\$47.24	\$15.75			
DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	KAISER	DEDUCTIE	LE HMO			
DENVER HEALTH 7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48						
7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	INOI	offered in 2	ווטי			
7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48			į			
7.2% \$29.12 \$5.14 7.4% \$56.78 \$16.48	DENVER HEALTH					
7.4% \$56.78 \$16.48						
	7.3%					
7.4% \$76.68 \$25.56			- 8			

#### 2011-2012 CSA Monthly Dental Premium Compare

		201	1 Rates	
			City	Employee
	% City	Monthly	Monthly	Monthly
	Cant	Total	Cost	Cost
			EPO	
Employee		\$21.39	\$20.32	\$1.07
+ spouse		\$47.06	\$42.35	\$4.71
Ee + chila		\$42.83	\$38.55	\$4.28
Family	క్రా	\$68 43	\$58.16	\$10.26
_		PP	O Low	
mployee		\$28.84	\$20.32	\$8.52
+ spouse		\$63.62	\$42.35	\$21.26
ie + child		\$57.25	\$38.55	\$18.70
Family	57.2%	\$101.72	\$58 16	\$43.56
		PPC	High	
mployee		\$37.11	\$20.32	\$16.79
+ spouse		\$82.40	\$42.35	\$40.05
ie + child		\$74.88	\$38.55	\$36.33
Family	44 1%	\$132.03	\$58.16	\$73.86

2012 Rates					
		City			
% City	Monthly	Monthly	Employee		
Cont	Total	Cost	Monthly Cost		
		EPO			
80.7%	\$27.92	\$22.53	\$5.39		
73.6%	<b>\$</b> 61.98	\$45.60	\$16.38		
75.9%	\$55.84	\$42.41	\$13.43		
71.2%	\$99.40	\$70.77	\$28.63		
		O Low			
85%	\$26.51	\$22.53	\$3.98		
77.5%	\$58.84	\$45.60	\$13.24		
80%	\$53.01	\$42.41	\$10.60		
75%	\$94.36	\$70.77	\$23.59		
		O High			
63.8%	\$35.34	\$22.53	\$12.81		
58.1%	\$78.46	\$45.60	\$32.86		
60.0%	\$70.68	\$42.41	\$28.27		
56.2%	\$125.82	\$70.77	\$55.05		

2011-2012					
City %	City	Employee			
Cont	Monthly \$	Monthly \$			
Change	Change	Change			
	EPO				
-14.3%	\$2.21	\$4.32			
-16.4%	<b>\$3</b> .25	\$11.67			
-14.1%	\$3.86	\$9.15			
-13.8%	\$12.61	\$18.37			
	PPO Low				
14.6%	\$2.21	-\$4.55			
10.9%	\$3.25	-\$8.03			
12.7%	\$3.86	-\$8.10			
17.8%	\$12.61	-\$19.97			
PPO High					
9.0%	\$2.21	-\$3.98			
6.7%	\$3.25	-\$7.19			
8.5%	\$3.86	-\$8.06			
12.2%	\$12.61	-\$18.81			

#### 2011-2012 CSA Monthly Vision Premium Compare

	2011 Superior Vision	2012 Anthem Rates
	Employee Monthly Cost	Employee Monthly Cost
nployee spouse + child	4.505	\$5.78 \$12.39
Family		\$9.33 \$17.02

201	1-2012
	Monthly
% Diff	Decrease
-9.4%	-\$0.60
-9.4%	-\$1.29
-9.4%	-\$0.97
-9.4%	-\$1.76



# City and County of Denver Actuarial Renewal with Composite Fillings on All Plans with Current Contributions

	THE PROPERTY OF THE PARTY OF TH	H	S		March March Color		
	Total Premiums	ns Contributions	Contributions	Subscribers		EE Percentage	ER Percentage
Employee Only	\$35.34	\$14.14	\$21.21	1,632		40.0°°	60.0%
Employee + Spouse	\$78.46	\$32.85	\$45.60	942	2.22	41.9%	58.1%
Employee + Child(ren)	\$70.68	\$28.27	\$42.41	772		40.0%	60.0%
Employee + Family	\$125.82	\$55.04	\$70.77	1,476		43.8%	56.3%
Total Monthly	\$371,860	\$157,094	\$214,766	4,822			
Total Annual	\$4,462,318	\$1,885,124	\$2,577,194				
Total PEPM	\$77.12	\$33	\$45				
Percentage Contributed		42%	58%				

**Low PPO Relativity Factor** 

0.7500

		Æ	ER				
	Total Premiums	Contributions	Contributions	Subscribers		EE Percentage	ER Percentage
Employee Only	\$26.51	\$5.30	\$21.21	664		20.0%	%0.08
Employee + Spouse	\$58.84	\$13.24	\$45.60	386		22.5%	77.5%
Employee + Child(ren)	\$53.01	\$10.60	\$42.41	295	2.00	20.0%	80.0%
Employee + Family	\$94.36	\$23.59	\$70.77	770	1	25.0%	75.0%
Total Monthly	\$128,612	\$29,923	\$98,689	2,115			
Total Annual	\$1,543,346	\$359,079	\$1,184,267		,		
Total PEPM	\$60.81	\$14	\$47				
Percentage Contributed		23%	77%				

**EPO Relativity Factor** 

0.7900

		2012 R	enewal Rates EP	O Option		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Total Premiums	င္ပ	Contributions	Subscribers	Tier Structure	EE Percentage	ER Percentage
Employee Only	\$27.92	- [	\$21.21	841	1.00	24.1%	75.9°°
Employee + Spouse	\$61.98		\$45.60	423	2.22	26.4%	73.6%
Employee + Child(ren)	\$55.84		\$42.41	401	2.00	24.1%	75.9%
Employee + Family	\$99.40	\$28.62	\$70.77	836	3.56	28.8%	71.2%
Total Monthly	\$155,186		\$113,296	2,501			
Total Annual	\$1,862,230	\$502,678	\$1,359,552				
Total PEPM	\$62.05	\$17	\$45				
Percentage Contributed		27%	73%				

Renewal

Total Monthly	\$655,658	\$228,907	\$426,751	9,438
Total Annual	\$7,867,894	\$2,746,881	\$5,121,013	
Total PEPM	\$69.47	\$24.25	\$45.22	

Current

				THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO I
Total Monthly	\$642,066	\$268,324	\$373,742	9,438
Total Annual	\$7,704,790	\$3,219,886	\$4,484,904	
Total PEPM	\$68.03	\$28.43	\$39.60	

These rates are not final. Page 2