

OHOH		CUPERTINO ELECTI	RIC, INC.
Base Plan Facility Monthly Benefit Facility Benefit Duration Lifetime Maximum Elimination Period	\$1,000 3 Years \$36,000 90 Days	Options Home Monthly Benefit Home Benefit Inflation Protection Home Care Level	\$500 50% Simple Uncapped Home, Community-Based & Immediate Family
		ws the cost per \$1,000 of cove	erage
Rate for Plan Chosen For Employees Only:	X	y Benefit Amount ÷ \$1,000	Your Premium (A)
Rate for Plan 1 (3 Year Duration)	X 1 (Based on Fu	anded Amount) A MINUS B	= (B) Employer Paid Amount = EMPLOYEE'S COST
		Monthly Rates	220122 8 6081
Insurance Age Base	an 1 Plan 2 Base Plan V Simple Infla Plan Optio	Base Plan With Home, Comm-Based With & Immediate Family ation Member Care on Option	& Immediate Family Member Care Option
31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 57 58	1.50 3 1.50 4 1.60 4 1.80 4 1.80 4 1.90 5 2.10 5 2.20 5 2.30 6 2.40 6 2.70 6 2.90 7 3.20 8 3.50 8 3.50 8 3.50 8 4.30 9 4.60 10 5.40 11 5.40 13 6.80 13 7.60 15 8.40 16 9.20 17	.50 4.50 .90 4.80 .10 5.00 .30 5.10 .70 5.40 .80 5.50 .10 5.80 .50 6.10 .70 6.40 .00 6.80 .40 7.00 .90 7.80 .20 8.20 .70 8.70 .00 9.10 .40 9.70 .80 10.30 .40 10.90 .70 11.50 .20 12.20 .90 13.00 .50 13.90 .50 13.90 .10 15.70 .80 16.70 .10 18.00 .50 19.50 .80 21.00 .80 21.00 .80 21.00 .60 22.80	9.80 10.40 10.90 11.30 11.90 12.20 12.90 13.40 13.90 14.60 15.30 15.90 16.60 17.20 18.80 19.50 20.40 21.40 22.20 23.10 24.60 26.00 27.10 28.80 30.10 32.30 34.50 36.80 39.50



Base Plan			<u>Options</u>	
Facility Monthly Benefit			Home Monthly	\$500
Facility Benefit Duratio			Benefit	
Lifetime Maximum	\$36,000		Home Benefit	50%
Elimination Period	90 Day	S	Inflation Protection	Simple Capped
			Home Care Level	Home, Community-Based
				& Immediate Family
	This	24.2 al. 2.24 al. 2.22 4l. 2.2	ast may \$1,000 of source	
Calculate your Premius		ile sneel snows the co	ost per \$1,000 of cover	age
Caicaiaie your Fremiai			. 01.000	(4)
<u> </u>	X	'11' N. 41 D. C	÷ \$1,000	=(A)
Rate for Plan Chosen	Fa	cility Monthly Benef	it Amount	Your Premium
For Employees Only:				
	X	1		=(B)
Rate for Plan 1		(Based on Funded Ar	nount)	Employer Paid Amount
(3 Year Duration)			•	
			A MINUS B	=
				EMPLOYEE'S COST
	~ .	Monthly		77
J	Plan 1	Plan 2	Plan 3	Plan 4
			D DI 33/241.	Base Plan With
			Base Plan With	Simple Inflation
			Hama Camm Bagad	Home Comm Deced
		Rose Dlan With	Home, Comm-Based	Home, Comm-Based
Incurança		Base Plan With	& Immediate Family	& Immediate Family
Insurance Age Ba	se Plan	Simple Inflation	& Immediate Family Member Care	& Immediate Family Member Care
Age Ba	se Plan 11 . 30	Simple Inflation Option	& Immediate Family Member Care Option	& Immediate Family Member Care Option
Age Ba 60 61	11.30 12.70	Simple Inflation Option 21.20 23.40	& Immediate Family Member Care Option 24.50 26.60	& Immediate Family Member Care Option 42.00 44.80
Age Ba 60 61 62	11.30 12.70 14.20	Simple Inflation Option 21.20 23.40 25.80	& Immediate Family Member Care Option 24.50 26.60 28.80	& Immediate Family Member Care Option 42.00 44.80 48.10
Age Ba 60 61 62 63	11.30 12.70 14.20 15.80	Simple Inflation Option 21.20 23.40 25.80 28.50	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70
Age Ba 60 61 62 63 64 65	11.30 12.70 14.20 15.80 17.70 20.70	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30
Age Ba 60 61 62 63 64 65 66	11.30 12.70 14.20 15.80 17.70 20.70 23.10	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50
Age Ba 60 61 62 63 64 65 66	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90
Age Ba 60 61 62 63 64 65 66 67 68 69	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70
Age Ba 60 61 62 63 64 65 66 67 68 69	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80 70.10 77.40	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50 60.70	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60 95.20	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80 70.10 77.40 84.80	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00 125.60
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50 66.90	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60 95.20 103.00	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80 70.10 77.40 84.80 92.20	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00 125.60 134.30
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50 60.70 66.90 74.00 82.10	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60 95.20 103.00 112.50 122.30	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80 70.10 77.40 84.80 92.20 100.10 109.00	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00 125.60 134.30 144.40 154.70
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50 66.90 74.00 82.10 91.20	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60 95.20 103.00 112.50 122.30 134.00	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 551.30 555.50 62.80 70.10 77.40 84.80 92.20 100.10 109.00 119.10	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00 125.60 134.30 144.40 154.70 167.00
Age Ba 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79	11.30 12.70 14.20 15.80 17.70 20.70 23.10 25.80 28.90 32.30 35.90 42.10 48.20 54.50 60.70 66.90 74.00 82.10	Simple Inflation Option 21.20 23.40 25.80 28.50 31.70 36.80 40.70 44.60 49.40 54.60 59.70 69.10 78.10 86.60 95.20 103.00 112.50 122.30	& Immediate Family Member Care Option 24.50 26.60 28.80 31.10 33.50 37.40 40.40 43.60 47.30 51.30 55.50 62.80 70.10 77.40 84.80 92.20 100.10 109.00	& Immediate Family Member Care Option 42.00 44.80 48.10 51.70 55.30 61.30 65.50 69.90 74.90 80.70 86.10 96.70 106.80 116.00 125.60 134.30 144.40 154.70



Unum	CUPERTINO ELECTRIC, INC.				
Base Plan Facility Monthly Benefit Facility Benefit Duration Lifetime Maximum Elimination Period	\$1,000 5 Years \$60,000 90 Days		Options Home Monthly Benefit Home Benefit Inflation Protection Home Care Level	\$500 50% Simple Capped Home, Community-Based & Immediate Family	
	This ra	te sheet shows the c	ost per \$1,000 of coverd	age	
Calculate your Premium	: X		÷ \$1,000	= (A)	
Rate for Plan Chosen	Fac	cility Monthly Benefi		Your Premium	
For Employees Only:					
	X	1	:	=(B)	
Rate for Plan 1 (3 Year Duration)	(Based on Funded Ar	nount)	Employer Paid Amount	
,			A MINUS B	= EMPLOYEE'S COST	
		Monthly	y Rates		
PI	an 1	Plan 2	Plan 3	Plan 4	
				Base Plan With	

		Month	ty Kutes	
	Plan 1	Plan 2	Plan 3	Plan 4
				Base Plan With
			Base Plan With	Simple Inflation
			Home, Comm-Based	Home, Comm-Based
		Base Plan With	& Immediate Family	& Immediate Family
Inguina			Member Care	Member Care
Insurance	D DI	Simple Inflation		
Age	Base Plan	Option	Option	Option
18-30	1.80	4.70	5.40	11.80
31 32 33	1.80	4.80	5.40	12.00
32	1.90	5.10	5.60 5.90	12.70
33	2.10	5.50	5.90	13.20
34	2.20	5.10 5.50 5.90 5.90	6.20 6.30	13.90
35	2.20	5.90	6.30	14.30
36	2.30	6.40	6.70	15.00
37	2.40	6.70	6.90	15.70
38	2.60	7.10	7.40	16.40
39	2.70	7.30	7.70	16.90
40	3.00	7.80	8.10	17.90
41	3.20	8.20	8.60 9.20	18.60
42 43	3.40	8.60 8.90	9.20	19.50
43	3.50 3.80	9.40	9.50 10.10	20.10 21.00
45	4.10	9.40	10.10	22.00
46	4.30	10.30	11.20	22.80
47	4.60	10.80	11.20	23.90
48	4.90	11.30	12.60	24.90
49	5.30	12.00	13.50	26.10
50	5.70	12.00 12.40	14.30	27.20
51	6.10	13.10	15.20	28.70
52	6.70	14.10	16.20	30.40
53	7.20	15.00	17.30	32.00
54	7.70	16.00	18.50	33.90
55	8.40	17.00	19.50	35.40
56	9.20	18.40	21.20	38.10
57	10.20	20.10	21.20 22.90	40.70
58	11.30	20.10 21.80	24.80	43.40
59	12.40	23.80	26.80	46.60



Base Plan			Options	
Facility Monthly Benef	fit \$1,000		Home Monthly	\$500
			Benefit	\$300
Facility Benefit Duration				500/
Lifetime Maximum	\$60,00		Home Benefit	50%
Elimination Period	90 Day	'S	Inflation Protection	Simple Capped
			Home Care Level	Home, Community-Based
				& Immediate Family
	This	ato al oot al oua the	2004 may \$1,000 of a great	
Calculate your Premiu		ate sneet snows the c	ost per \$1,000 of cover	age
			. 61.000	(4)
D + C D1 C1	X	'1', M 41 D 6	÷ \$1,000	=(A)
Rate for Plan Chosen	Fa	cility Monthly Benef	it Amount	Your Premium
For Employees Only:				
	X	1		= (B)
Rate for Plan 1		(Based on Funded Ar	mount)	Employer Paid Amount
(3 Year Duration)			, a danta d	
			A MINUS B	=
				EMPLOYEE'S COST
		Monthl		77
	Plan 1	Plan 2	Plan 3	Plan 4
				Base Plan With
			D DI 117941	C' I T CI 1º
			Base Plan With	Simple Inflation
		Daga Dlan Wi4h	Home, Comm-Based	Home, Comm-Based
Inguyongo		Base Plan With	Home, Comm-Based & Immediate Family	Home, Comm-Based & Immediate Family
Insurance	aca Dlan	Simple Inflation	Home, Comm-Based & Immediate Family Member Care	Home, Comm-Based & Immediate Family Member Care
Age B	ase Plan	Simple Inflation Option	Home, Comm-Based & Immediate Family Member Care Option	Home, Comm-Based & Immediate Family Member Care Option
Age B	14.00	Simple Inflation Option 26.10	Home, Comm-Based & Immediate Family Member Care Option 29.30	Home, Comm-Based & Immediate Family Member Care Option 50.10
Age B 60 61 62	14.00 15.40 17.20	Simple Inflation Option 26.10 28.40 31.20	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20
Age B 60 61 62 63	14.00 15.40 17.20 19.20	Simple Inflation Option 26.10 28.40 31.20 34.60	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60
Age B 60 61 62 63 64	14.00 15.40 17.20 19.20 21.50	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50
Age B 60 61 62 63 64 65	14.00 15.40 17.20 19.20 21.50 25.00	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70
Age B 60 61 62 63 64 65 66	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90
Age B 60 61 62 63 64 65 66	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00
Age B 60 61 62 63 64 65 66 67 68 69	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90
Age B 60 61 62 63 64 65 66 67 68 69 70	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10 72.50	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40 113.90	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70 105.10	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60 154.80
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10 72.50 79.80	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40 113.90 122.90	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70 105.10 114.30	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60 154.80 165.60
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10 72.50 79.80 88.30	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40 113.90 122.90 134.20	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70 105.10 114.30 124.70	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60 154.80 165.60 178.60
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10 72.50 79.80 88.30 97.70	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40 113.90 122.90 134.20 145.70 159.40	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70 105.10 114.30 124.70 136.20 149.20	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60 154.80 165.60 178.60 191.90 207.50
Age B 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77	14.00 15.40 17.20 19.20 21.50 25.00 28.00 31.20 34.80 38.80 43.20 50.50 57.80 65.10 72.50 79.80 88.30 97.70	Simple Inflation Option 26.10 28.40 31.20 34.60 38.50 44.50 49.20 54.10 59.60 65.50 71.70 82.80 93.60 103.40 113.90 122.90 134.20 145.70	Home, Comm-Based & Immediate Family Member Care Option 29.30 31.50 34.20 36.90 40.20 44.90 48.70 52.90 57.40 62.40 67.90 77.20 86.40 95.70 105.10 114.30 124.70 136.20	Home, Comm-Based & Immediate Family Member Care Option 50.10 53.30 57.20 61.60 66.50 73.70 79.10 84.90 91.00 97.90 105.20 118.20 131.00 142.60 154.80 165.60 178.60 191.90

บกํบํ๓๊	CUP	RATE SHEET PERTINO ELECTRI	C, INC.
Base Plan Facility Monthly Benefit Facility Benefit Duration Lifetime Maximum Elimination Period	\$1,000 Unlimited Unlimited 90 Days	Options Home Monthly Benefit Home Benefit Inflation Protection Home Care Level	\$500 50% Simple Capped Home, Community-Based & Immediate Family
	This rate sheet shows the	cost per \$1,000 of cover	age
Calculate your Premium:			
Rate for Plan Chosen For Employees Only: Rate for Plan 1	X Facility Monthly Bene X 1 (Based on Funded A		=(A) Your Premium =(B) Employer Paid Amount
(3 Year Duration)	(Dasea on Fanaca Fr	,	Employer Fala / Imeant
		TI WIII (CS B	= EMPLOYEE'S COST
DI.	Month n 1 Plan 2	<i>ly Rates</i> Plan 3	Plan 4
	Base Plan With	Base Plan With Home, Comm-Based & Immediate Family	Base Plan With Simple Inflation Home, Comm-Based & Immediate Family
Insurance	Simple Inflation	Member Care	Member Care
0	Plan Option 2.60 6.70	Option 8.50	Option
31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 10	2.80 7.20 2.90 7.60 3.10 8.10 3.20 8.50 3.40 8.90 3.60 9.50 3.70 9.80 3.90 10.40 4.20 11.10 4.40 11.50 4.70 12.00 5.30 13.20 5.70 14.00 5.50 15.40 5.50 15.40 6.80 15.90 7.50 16.80 7.90 17.60 8.50 18.50 9.10 19.60 9.90 21.10 0.70 22.50 2.30 25.10	8.90 9.10 9.50 10.00 10.40 10.90 11.30 11.90 12.60 13.10 13.80 14.70 15.40 16.20 17.20 18.30 19.30 20.70 21.90 23.30 24.80 26.50 28.30 30.20 32.00	19.80 20.70 21.60 22.50 23.50 24.60 25.50 26.70 28.00 29.20 30.20 31.60 33.00 34.40 35.80 37.60 39.00 40.90 42.70 44.70 44.70 47.20 49.90 52.90 55.70 58.50



Base Plan	04.000	<u>Options</u>	0.500
Facility Monthly Benefit	\$1,000	Home Monthly	\$500
Facility Benefit Duration	Unlimited	Benefit	7001
Lifetime Maximum	Unlimited	Home Benefit	50%
Elimination Period	90 Days	Inflation Protection	Simple Capped
		Home Care Level	Home, Community-Based
			& Immediate Family
	This rate sheet shows	the cost per \$1,000 of coverd	age
Calculate your Premium:			
	Χ	÷ \$1,000	=(A)
Rate for Plan Chosen	Facility Monthly E	Benefit Amount	Your Premium
For Employees Only:			
	X 1		= (B)
Rate for Plan 1	(Based on Funde	ed Amount)	Employer Paid Amount
(3 Year Duration)		A MINUS B	=
			EMPLOYEE'S COST
		onthly Rates	
Pla	n 1 Plan 2	Plan 3	Plan 4
		Base Plan With	Base Plan With
		Dase Flan Willi	
			Simple Inflation
	Rase Plan Wit	Home, Comm-Based	Home, Comm-Based
Insurance	Base Plan Wit	Home, Comm-Based h & Immediate Family	Home, Comm-Based & Immediate Family
Insurance Age Base	Simple Inflatio	Home, Comm-Based th & Immediate Family on Member Care	Home, Comm-Based & Immediate Family Member Care
Age Base	Simple Inflatio Plan Option	Home, Comm-Based th & Immediate Family on Member Care Option	Home, Comm-Based & Immediate Family
Age Base 60 20 61 22	Simple Inflation Plan Option .30 37.9 .50 41.5	Home, Comm-Based & Immediate Family on Member Care Option 48.20 52.30	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00
Age Base 60 20 61 22 62 25	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7	Home, Comm-Based & Immediate Family on Member Care Option 48.20 52.30 56.90	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00
Age Base 60 20 61 22 62 25 63 27	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2	Home, Comm-Based & Immediate Family Member Care Option 48.20 52.30 56.90 61.90	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70
Age Base 60 20 61 22 62 25 63 27 64 31 65 36	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3	Home, Comm-Based & Immediate Family Member Care Option 48.20 52.30 56.90 61.90 67.30 75.40	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9	Home, Comm-Based & Immediate Family Member Care Option	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9	Home, Comm-Based & Immediate Family Member Care Option	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9 .20 85.9 .90 94.4	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9 .20 85.9 .90 94.4 .00 103.0	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9 .20 85.9 .90 94.4 .00 103.0 .50 118.8	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72 72 82 73 93	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9 .20 85.9 .90 94.4 .00 103.0 .50 118.8 .80 134.2	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10 0 146.60 0 162.00	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00 226.80 246.60
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72 72 82 73 93 74 103	Simple Inflation Plan Option .30 37.9 .50 41.5 .10 45.7 .90 50.2 .10 55.8 .10 64.3 .30 70.9 .00 77.9 .20 85.9 .90 94.4 .00 103.0 .50 118.8 .80 134.2 .00 147.9 .30 162.3	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10 0 146.60 0 162.00 0 177.60	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00 226.80 246.60 267.80
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72 72 82 73 93 74 103 75 113	Simple Inflation Plan Option .30	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10 0 146.60 0 162.00 0 177.60	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00 226.80 246.60 267.80 286.00
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72 72 82 73 93 74 103 75 113 76 125 77 139	Simple Inflation Plan Option .30	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10 0 146.60 0 162.00 0 177.60 0 193.30 0 210.80 0 230.30	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00 226.80 246.60 267.80 286.00 307.70 330.30
Age Base 60 20 61 22 62 25 63 27 64 31 65 36 66 40 67 45 68 50 69 55 70 62 71 72 72 82 73 93 74 103 75 113 76 125 77 139 78 154	Simple Inflation Plan Option .30	Home, Comm-Based & Immediate Family Member Care Option 0 48.20 0 52.30 0 56.90 0 61.90 0 67.30 0 75.40 0 82.10 0 89.50 0 97.50 0 106.20 0 115.40 0 131.10 0 146.60 0 162.00 0 177.60 0 193.30 0 210.80 0 230.30 0 251.90	Home, Comm-Based & Immediate Family Member Care Option 83.70 90.00 97.00 104.70 113.00 126.00 136.10 146.30 157.80 170.30 182.50 205.00 226.80 246.60 267.80 286.00 307.70