### STATE HEALTH BENEFIT PLAN

ACTIVE EMPLOYEE, SUBSIDIZED EXTENDED COVERAGE, and
APPROVED LEAVE without PAY (Military, FMLA and Disability) RATES

JANUARY 1 - DECEMBER 31, 2015

<table>
<thead>
<tr>
<th>Plan</th>
<th>YOU</th>
<th>YOU + CHILD(REN)</th>
<th>YOU + SPOUSE</th>
<th>YOU + FAMILY</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCBS Gold</td>
<td>$166.08</td>
<td>$300.38</td>
<td>$405.52</td>
<td>$539.84</td>
</tr>
<tr>
<td>BCBS Silver</td>
<td>$108.64</td>
<td>$202.74</td>
<td>$284.90</td>
<td>$379.00</td>
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<tr>
<td>BCBS Bronze</td>
<td>$66.28</td>
<td>$130.74</td>
<td>$195.96</td>
<td>$260.40</td>
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<tr>
<td>BCBS HMO</td>
<td>$130.74</td>
<td>$240.88</td>
<td>$333.06</td>
<td>$443.18</td>
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<tr>
<td>UHC HMO</td>
<td>$181.32</td>
<td>$326.86</td>
<td>$439.26</td>
<td>$584.80</td>
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<tr>
<td>UHC HDHP</td>
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<td>$108.74</td>
<td>$169.84</td>
<td>$225.56</td>
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<tr>
<td>Kaiser HMO</td>
<td>$145.78</td>
<td>$266.44</td>
<td>$364.64</td>
<td>$485.30</td>
</tr>
</tbody>
</table>
## Exhibit 3

**STATE HEALTH BENEFIT PLAN**
**TRICARE SUPPLEMENT RATES**
**JANUARY 1 - DECEMBER 31, 2015**

<table>
<thead>
<tr>
<th></th>
<th>YOU</th>
<th>YOU + CHILD(REN)</th>
<th>YOU + SPOUSE</th>
<th>YOU + FAMILY</th>
</tr>
</thead>
<tbody>
<tr>
<td>You</td>
<td>$60.50</td>
<td>$119.50</td>
<td>$119.50</td>
<td>$160.50</td>
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</tbody>
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