

2020-21 RATE SCHEDULE (12 MONTH RATES)

3			
		12 MONTH	EMPLOYEE
COMPANY	COVERAGE TYPE	DEDUCTION	PORTION
Florida Combined Life	Single	\$15.13	\$15.13
Standard	2 person	\$29.70	\$29.70
	family	\$58.73	\$58.73
Florida Combined Life	Single	\$27.44	\$27.44
High	2 person	\$54.36	\$54.36
	family	\$106.34	\$106.34
Florida Combined	Single	\$37.24	\$37.24
Plus	2 person	\$73.15	\$73.15
	family	\$140.73	\$140.73
Avesis Vision	Single	\$6.53	\$6.53
	Employee +1	\$12.70	\$12.70
	Employee + Family	\$18.65	\$18.65
LifeLock (ID Theft)	Employee	\$7.98	\$7.98
Benefit Elite	Employee + Family	\$15.98	\$15.98
Ultimate Plus	Employee	\$13.99	\$13.99
	Employee + Family	\$27.98	\$27.98
Standard Accident	Single	\$12.25	\$12.25
Enhanced	Employee/Spouse	\$19.37	\$19.37
	Employee/Children	\$23.22	\$23.22
	Family	\$36.33	\$36.33
Premier	Single	\$18.74	\$18.74
	Employee/Spouse	\$29.27	\$29.27
	Employee/Children	\$35.53	\$35.53
	Family	\$55.48	\$55.48
Hospital Indemnity	Employee	\$11.40	\$11.40



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		12 MONTH	EMPLOYEE
COMPANY	COVERAGE TYPE	DEDUCTION	PORTION
Low	Employee/Spouse	\$24.00	\$24.00
	Employee/Children	\$21.93	\$21.93
	Family	\$36.75	\$36.75
High	Employee	\$19.40	\$19.40
	Employee/Spouse	\$41.05	\$41.05
	Employee/Children	\$37.60	\$37.60
	Family	\$63.25	\$63.25
Nationwide Pet	Canine	\$43.93	\$43.93
	with Wellness	\$70.33	\$70.33
	Feline	\$26.35	\$26.35
	with Wellness	\$42.19	\$42.19