

2020-21 RATE SCHEDULE (10 MONTH RATES)

COMPANY	COVERAGE TYPE	10 MONTH DEDUCTION	EMPLOYEE PORTION	BOARD PORTION
FB 03559	Single	\$1,175.08	\$235.02	\$940.06
	2 person	\$2,796.72	\$1,118.69	\$1,678.03
	family	\$3,666.24	\$1,466.50	\$2,199.74
	family /2 employees	\$3,666.24	\$470.04	\$3,196.20
FB 5173	Single	\$710.54	\$30.00	\$680.54
	2 person	\$1,691.12	\$676.45	\$1,014.67
	family	\$2,216.92	\$886.77	\$1,330.15
	family/2 employees	\$2,216.92	\$60.00	\$2,156.92