



**2020-21 RATE SCHEDULE (12 MONTH RATES)**

COMPANY	COVERAGE TYPE	12 MONTH DEDUCTION	EMPLOYEE PORTION	BOARD PORTION
<b>FB 03559</b>	Single	\$979.23	\$195.85	\$783.38
	2 person	\$2,330.60	\$932.24	\$1,398.36
	family	\$3,055.20	\$1,222.08	\$1,833.12
	family /2 employees	\$3,055.20	\$391.70	\$2,663.50
<b>FB 5173</b>	Single	\$592.12	\$25.00	\$567.12
	2 person	\$1,409.27	\$563.71	\$845.56
	family	\$1,847.43	\$738.97	\$1,108.46
	family/2 employees	\$1,847.43	\$50.00	\$1,797.43