

Insurance Costs for Medical Coverage

Employee Cost

OPTION 1: Blue Cross Blue Shield (Florida Blue) Health Benefit Plan Blue Option 05360

Single Coverage: \$173.40 (\$86.70 per check)

Family Coverage: \$173.40 + \$835.18 = \$1,008.58 (\$504.29 per check)*

*The total dollar amount for family coverage is the single coverage rate (\$173.40) + family deduction rate (\$835.18) = \$1,008.58 (\$504.29 per check)

2 Employee Family Coverage: Both employees must carry single coverage with one carrying family.

For Example:

Husband Employee # 1

\$173.40 (\$86.70 per check)

Wife Employee # 2

\$173.40 + \$172.02 = \$345.42 (\$172.71 per check)

OPTION 2: Blue Cross Blue Shield (Florida Blue) Catastrophic Plan 05901

Single Coverage: \$96.20 (\$48.10 per check)

Family Coverage: \$96.20 + \$728.66 = \$824.86 (\$412.43 per check)*

*The total dollar amount for family coverage is the single coverage rate (\$96.20) + family deduction rate (\$728.66) = \$824.86 (\$412.43 per check)

Full Pay: Retirees, Leave of Absence, COBRA

Single Coverage: \$693.58

Family Coverage: \$693.58 + \$835.18 = \$1,528.76