



VOLUSIA COUNTY SCHOOL DISTRICT RETIREE INSURANCE RATES

October 1, 2018 - September 30, 2019

Florida Blue PPO	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	NOT OFFERED
EMPLOYEE + CHILD(REN)	NOT OFFERED
EMPLOYEE + SPOUSE	NOT OFFERED
FAMILY	NOT OFFERED

Florida Blue HRA	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$1,100.00
EMPLOYEE + CHILD(REN)	\$1,835.03
EMPLOYEE + SPOUSE	\$2,045.44
FAMILY	\$2,675.04

Florida Health Care Triple Option	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$627.56
EMPLOYEE + CHILD(REN)	\$1,066.85
EMPLOYEE + SPOUSE	\$1,192.36
FAMILY	\$1,568.90

Florida Health Care HMO	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$569.79
EMPLOYEE + CHILD(REN)	\$968.64
EMPLOYEE + SPOUSE	\$1,082.60
FAMILY	\$1,424.48

Florida Health Care POS*	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$521.38
EMPLOYEE + CHILD(REN)	\$886.32
EMPLOYEE + SPOUSE	\$990.61
FAMILY	\$1,303.44

Delta Dental (DPO)	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$29.96
EMPLOYEE + ONE	\$52.17
FAMILY	\$70.36

Delta Care (DMO)	
LEVEL OF COVERAGE	MONTHLY RATE
SINGLE	\$16.44
EMPLOYEE + ONE	\$27.10
FAMILY	\$40.07