



VOLUSIA COUNTY SCHOOL DISTRICT RETIREE INSURANCE RATES

October 1, 2017 - September 30, 2018

| Florida Blue HRA | |
|-----------------------|--------------|
| LEVEL OF COVERAGE | MONTHLY RATE |
| SINGLE | \$845.59 |
| EMPLOYEE + CHILD(REN) | \$1,402.52 |
| EMPLOYEE + SPOUSE | \$1,561.64 |
| FAMILY | \$2,038.99 |

| Florida Health Care Triple Option | |
|-----------------------------------|--------------|
| LEVEL OF COVERAGE | MONTHLY RATE |
| SINGLE | \$607.20 |
| EMPLOYEE + CHILD(REN) | \$1,032.24 |
| EMPLOYEE + SPOUSE | \$1,153.68 |
| FAMILY | \$1,517.99 |

| Florida Health Care HMO | |
|-------------------------|--------------|
| LEVEL OF COVERAGE | MONTHLY RATE |
| SINGLE | \$540.25 |
| EMPLOYEE + CHILD(REN) | \$918.42 |
| EMPLOYEE + SPOUSE | \$1,026.47 |
| FAMILY | \$1,350.62 |

| Florida Health Care POS* | |
|--------------------------|--------------|
| LEVEL OF COVERAGE | MONTHLY RATE |
| SINGLE | \$490.42 |
| EMPLOYEE + CHILD(REN) | \$833.70 |
| EMPLOYEE + SPOUSE | \$931.79 |
| FAMILY | \$1,226.04 |

| 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 |