



2021 MEDICAL PREMIUMS

For Plan Year Effective: January 1, 2021 through December 31, 2021

Deductions begin December 15, 2020

Florida Blue Plans (PPO)										
	Blue Options 03559					Blue Options 03769				
<u>24-Pay per Year</u>	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay
Employee	\$677.00	\$574.25	\$287.13	\$102.75	\$51.38	\$665.00	\$574.15	\$287.08	\$90.85	\$45.43
Employee & Spouse	\$1,313.00	\$880.40	\$440.20	\$432.60	\$216.30	\$1,285.00	\$879.43	\$439.72	\$405.57	\$202.79
Employee & Child(ren)	\$1,120.00	\$777.28	\$388.64	\$342.72	\$171.36	\$1,096.00	\$773.62	\$386.81	\$322.38	\$161.19
Employee & Family	\$1,657.00	\$1,019.74	\$509.87	\$637.26	\$318.63	\$1,622.00	\$1,013.67	\$506.84	\$608.33	\$304.17

High Deductible Florida Blue Options PPO with Health Savings Account (HD-HSA)					
<u>24-Pay per Year</u>	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay
Employee	\$417.00	\$375.80	\$187.90	\$41.20	\$20.60
Employee & Spouse	\$806.00	\$569.10	\$284.55	\$236.90	\$118.45
Employee & Child(ren)	\$687.00	\$503.40	\$251.70	\$183.60	\$91.80
Employee & Family	\$1,016.00	\$608.00	\$304.00	\$408.00	\$204.00

Florida Blue Plans (PPO)										
	Blue Options 03559					Blue Options 03769				
<u>18-Pay per Year</u>	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay
Employee	\$902.67	\$765.67	\$382.83	\$137.00	\$68.50	\$886.67	\$765.53	\$382.77	\$121.13	\$60.57
Employee & Spouse	\$1,750.67	\$1,173.87	\$586.93	\$576.80	\$288.40	\$1,713.33	\$1,172.57	\$586.29	\$540.76	\$270.38
Employee & Child(ren)	\$1,493.33	\$1,036.37	\$518.19	\$456.96	\$228.48	\$1,461.33	\$1,031.49	\$515.75	\$429.84	\$214.92
Employee & Family	\$2,209.33	\$1,359.65	\$679.83	\$849.68	\$424.84	\$2,162.67	\$1,351.56	\$675.78	\$811.11	\$405.56

High Deductible Florida Blue Options PPO with Health Savings Account (HD-HSA)					
<u>18-Pay per Year</u>	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay
Employee	\$556.00	\$501.07	\$250.53	\$54.93	\$27.47
Employee & Spouse	\$1,074.67	\$758.80	\$379.40	\$315.87	\$157.94
Employee & Child(ren)	\$916.00	\$671.20	\$335.60	\$244.80	\$122.40
Employee & Family	\$1,354.67	\$810.67	\$405.33	\$544.00	\$272.00

Florida Blue Plans (PPO)										
	Blue Options 03559					Blue Options 03769				
<u>Part-time 30 hours</u>	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay	Full Premium	DSC Pays	DSC Per Pay	Emp. Per Mo.	Emp. Per Pay
Employee	\$677.00	\$430.69	\$215.34	\$246.31	\$123.16	\$665.00	\$430.61	\$215.31	\$234.39	\$117.19
Employee & Spouse	\$1,313.00	\$660.30	\$330.15	\$652.70	\$326.35	\$1,285.00	\$659.57	\$329.79	\$625.43	\$312.71
Employee & Child(ren)	\$1,120.00	\$582.96	\$291.48	\$537.04	\$268.52	\$1,096.00	\$580.22	\$290.11	\$515.79	\$257.89
Employee & Family	\$1,657.00	\$764.81	\$382.40	\$892.20	\$446.10	\$1,622.00	\$760.25	\$380.13	\$861.75	\$430.87