



# 2022 MEDICAL PREMIUMS

For Plan Year Effective:  
 January 1, 2022 through December 31, 2022  
 Deductions begin December 15, 2021

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	\$707.00	\$604.24	\$302.12	\$102.76	\$51.38	\$695.00	\$604.14	\$302.07	\$90.86	\$45.43
Employee & Spouse	\$1,371.00	\$938.40	\$469.20	\$432.60	\$216.30	\$1,343.00	\$937.42	\$468.71	\$405.58	\$202.79
Employee & Child(ren)	\$1,170.00	\$827.28	\$413.64	\$342.72	\$171.36	\$1,145.00	\$822.62	\$411.31	\$322.38	\$161.19
Employee & Family	\$1,731.00	\$1,093.74	\$546.87	\$637.26	\$318.63	\$1,695.00	\$1,086.66	\$543.33	\$608.34	\$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	\$436.00	\$394.80	\$197.40	\$41.20	\$20.60
Employee & Spouse	\$843.00	\$606.10	\$303.05	\$236.90	\$118.45
Employee & Child(ren)	\$718.00	\$534.40	\$267.20	\$183.60	\$91.80
Employee & Family	\$1,062.00	\$654.00	\$327.00	\$408.00	\$204.00

Florida Health Care Plans (HMO)										
	FHCP - TS1					FHCP - TS2				
<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	\$664.73	\$605.31	\$302.66	\$59.42	\$29.71	\$624.85	\$597.79	\$298.90	\$27.06	\$13.53
Employee & Spouse	\$1,289.13	\$946.45	\$473.23	\$342.68	\$171.34	\$1,210.84	\$934.98	\$467.49	\$275.86	\$137.93
Employee & Child(ren)	\$1,099.04	\$831.12	\$415.56	\$267.92	\$133.96	\$1,032.31	\$821.13	\$410.57	\$211.18	\$105.59
Employee & Family	\$1,627.86	\$1,107.80	\$553.90	\$520.06	\$260.03	\$1,529.02	\$1,087.74	\$543.87	\$441.28	\$220.64

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Florida Blue Plans (PPO)										
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<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	\$942.67	\$805.67	\$402.84	\$137.00	\$68.50	\$926.67	\$805.53	\$402.77	\$121.14	\$60.57
Employee & Spouse	\$1,828.00	\$1,251.20	\$625.60	\$576.80	\$288.40	\$1,790.67	\$1,249.91	\$624.96	\$540.76	\$270.38
Employee & Child(ren)	\$1,560.00	\$1,103.04	\$551.52	\$456.96	\$228.48	\$1,526.67	\$1,096.83	\$548.42	\$429.84	\$214.92
Employee & Family	\$2,308.00	\$1,458.32	\$729.16	\$849.68	\$424.84	\$2,260.00	\$1,448.88	\$724.44	\$811.12	\$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	\$581.33	\$526.39	\$263.20	\$54.94	\$27.47
Employee & Spouse	\$1,124.00	\$808.12	\$404.06	\$315.88	\$157.94
Employee & Child(ren)	\$957.33	\$712.53	\$356.27	\$244.80	\$122.40
Employee & Family	\$1,416.00	\$872.00	\$436.00	\$544.00	\$272.00

Florida Health Care Plans (HMO)										
	FHCP - TS1					FHCP - TS2 (formerly T51)				
<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	\$886.31	\$807.09	\$403.55	\$79.22	\$39.61	\$833.13	\$797.05	\$398.53	\$36.08	\$18.04
Employee & Spouse	\$1,718.84	\$1,261.94	\$630.97	\$456.90	\$228.45	\$1,614.45	\$1,246.65	\$623.33	\$367.80	\$183.90
Employee & Child(ren)	\$1,465.39	\$1,108.17	\$554.09	\$357.22	\$178.61	\$1,376.41	\$1,094.83	\$547.42	\$281.58	\$140.79
Employee & Family	\$2,170.48	\$1,477.06	\$738.53	\$693.42	\$346.71	\$2,038.69	\$1,450.33	\$725.17	\$588.36	\$294.18

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Florida Blue Plans (PPO)										
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<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	\$707.00	\$453.18	\$226.59	\$253.82	\$126.91	\$695.00	\$453.11	\$226.56	\$241.90	\$120.95
Employee & Spouse	\$1,371.00	\$703.80	\$351.90	\$667.20	\$333.60	\$1,343.00	\$703.07	\$351.54	\$639.94	\$319.97
Employee & Child(ren)	\$1,170.00	\$620.46	\$310.23	\$549.54	\$274.77	\$1,145.00	\$616.97	\$308.49	\$528.04	\$264.02
Employee & Family	\$1,731.00	\$820.31	\$410.16	\$910.70	\$455.35	\$1,695.00	\$815.00	\$407.50	\$880.00	\$440.00

Florida Health Care Plans (HMO)										
	FHCP - TS1					FHCP - TS2				
<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	\$664.73	\$453.98	\$226.99	\$210.75	\$105.38	\$624.85	\$448.34	\$224.17	\$176.51	\$88.26
Employee & Spouse	\$1,289.13	\$709.84	\$354.92	\$579.29	\$289.65	\$1,210.84	\$701.24	\$350.62	\$509.61	\$254.81
Employee & Child(ren)	\$1,099.04	\$623.34	\$311.67	\$475.70	\$237.85	\$1,032.31	\$615.85	\$307.93	\$416.46	\$208.23
Employee & Family	\$1,627.86	\$830.85	\$415.43	\$797.01	\$398.52	\$1,529.02	\$815.81	\$407.91	\$713.22	\$356.61

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