

**CHARLOTTE COUNTY PUBLIC SCHOOLS**  
**INSURANCE RATES 2019 - 2020**

<b>OPTIMA Vantage \$500 DED, 20/20%, 10/30/50/20% Rx; OOP \$5000;</b>	<b>2019-2020 Monthly Premium</b>	<b>2019 -2020 Monthly Employee Cost</b>	<b>2019-2020 Monthly Employee Cost With Vision</b>	<b>EYE MED Vision</b>	<b>DELTA DENTAL Employee Dental Plan</b>
Employee Only	\$728	<b>\$318.00</b>	\$325.00	\$7.00	\$38.84
Employee + Child	\$1,032	<b>\$482.00</b>	\$497.00	\$15.00	\$62.58
Employee + Children	\$1,520	<b>\$920.00</b>	\$935.00	\$15.00	\$98.20
Employee + Spouse	\$1,614	<b>\$1,014.00</b>	\$1,028.00	\$14.00	\$62.58
Family	\$2,188	<b>\$1,588.00</b>	\$1,613.00	\$25.00	\$98.20
Family 2 Employee	\$2,188	<b>\$988.00</b>	\$1,013.00	\$25.00	\$98.20

<b>OPTIMA Vantage 6500 HMO HSA, \$6500 OOP, 10/30/50/20% Rx + Prev.</b>	<b>2019-2020 Monthly Premium</b>	<b>2019 -2020 Monthly Employee Cost</b>	<b>2019-2020 Monthly Employee Cost With Vision</b>	<b>EYE MED Vision</b>	<b>DELTA DENTAL Employee Dental Plan</b>
Employee Only	\$459	<b>\$49.00</b>	\$56.00	\$7.00	\$38.84
Employee + Child	\$652	<b>\$102.00</b>	\$117.00	\$15.00	\$62.58
Employee + Children	\$959	<b>\$359.00</b>	\$374.00	\$15.00	\$98.20
Employee + Spouse	\$1,019	<b>\$419.00</b>	\$433.00	\$14.00	\$62.58
Family	\$1,381	<b>\$681.00</b>	\$806.00	\$25.00	\$98.20

<b>OPTIMA Equity + 3000 PPO HSA, 80/20 Co-ins., \$5000 OOP, 10/30/50/20% Rx + Prev.</b>	<b>2019-2020 Monthly Premium</b>	<b>2019 -2020 Monthly Employee Cost</b>	<b>2019-2020 Monthly Employee Cost With Vision</b>	<b>EYE MED Vision</b>	<b>DELTA DENTAL Employee Dental Plan</b>
Employee Only	\$665	<b>\$255.00</b>	\$262.00	\$7.00	\$38.84
Employee + Child	\$944	<b>\$394.00</b>	\$409.00	\$15.00	\$62.58
Employee + Children	\$1,389	<b>\$789.00</b>	\$804.00	\$15.00	\$98.20
Employee + Spouse	\$1,475	<b>\$875.00</b>	\$889.00	\$14.00	\$62.58
Family	\$1,999	<b>\$1,399.00</b>	\$1,424.00	\$25.00	\$98.20