

## **2020 JPOFFHIT Retiree Rate Worksheet**

You may use this worksheet to assist you with selecting your retiree benefits elections. Please call Christina Golden at (904) 417-6007 with any questions and to enroll in retiree benefits over-the-phone.

Legal Name:		Department (JSO, JFRD, Corrections):  Retirement Date:		
MEDICAL	UF Direct Health	Blue Care 65	Blue Care 48	BlueOptions 5782
	EPO	НМО	НМО	PPO
Per Pay Period Costs				
Employee Only	□ \$208.83	□ \$208.70	□ \$221.23	□ \$253.56
Employee + Spouse	□ \$432.43	□ \$429.29	□ \$455.34	□ \$521.45
Employee + Child(ren)	□ \$400.78	□ \$399.86	□ \$424.17	□ \$485.70
Employee + Family	□ \$640.85	□ \$638.61	□ \$676.99	□ \$775.29
DENTAL	Base	Silver	Gold	Platinum
	DHMO	DPPO	DPPO	DPPO
Per Pay Period Costs				
Employee Only	□ \$6.11	□ \$9.70	□ \$15.52	□ \$19.92
Employee + Spouse	□ \$10.69	□ \$19.41	□ \$31.05	□ \$39.85
Employee + Child(ren)	□ \$12.82	□ \$24.63	□ \$39.43	□ \$50.54
Employee + Family	□ \$18.92	□ \$33.15	□ \$53.02	□ \$68.03
VISION	Basic	Premier		
	Vision	Vision		
Per Pay Period Costs				
Employee Only	□ \$2.45	□ \$3.73		
Employee + Spouse	□ \$3.88	□ \$6.04		
Employee + Child(ren)	□ \$3.96	□ \$5.92		
Employee + Family	□ \$6.38	□ \$9.73		