## 2023 Plan Rates

RETIREES				
Medical				
Per Pay Period	<b>UF Health Direct Plan</b>	BlueCare HMO 65	Blue Care HMO 48	Blue Options PPO 5782
Employee Only	\$201.21	\$208.70	\$247.78	\$281.45
Employee + Spouse	\$412.35	\$429.29	\$509.98	\$578.81
Employee + Child	\$386.14	\$399.86	\$475.07	\$539.12
Family	\$598.73	\$638.61	\$758.23	\$860.57
Dental				
Per Pay Period	Base	Silver	Gold	Platinum
Employee Only	\$6.81	\$8.89	\$14.23	\$18.25
Employee + Spouse	\$11.92	\$17.78	\$28.45	\$36.51
Employee + Child(ren)	\$14.30	\$22.57	\$36.13	\$46.31
Employee + Family	\$21.10	\$30.38	\$48.58	\$62.34
Vison Rates				
Per Pay Period	Basic	Premier		
Employee Only	\$2.35	\$4.27	_	
Employee + Spouse	\$3.72	\$6.92		
Employee + Child	\$3.80	\$6.79		
Family	\$6.12	\$11.16		
<b>Supplemental Products</b>				
Per Pay Period	Accident	_		
Employee Only	\$5.23	-		
Employee + Spouse	\$8.92			
Employee + Child	\$10.47			
Family	\$14.16			