

**CITY OF TALLAHASSEE
BENEFIT RATES/PREMIUMS**

Other Benefits Plan Name	Retiree Only	Retiree + 1	Retiree + Family
Dental-CompBenefits			
SC250 (DHMO)	18.84	35.78	47.26
EP505 (DPPO)	24.92	48.54	88.40
EC405 (Indemnity)	31.80	62.00	112.90
Vision-CompBenefits			
Vision Plan	4.80	9.60	17.88
Legal-ARAG			
Legal	15.74	20.10	20.10
<p>Retiree Life (MetLife), Spouse Life (MetLife) and Long Term Care (CNA), are based upon age and coverage level selected. See individual plan rate charts for more information. (NOTE: ChildLife (MetLife) is \$.54 per month for all children on plan.)</p>			