

**RATES TABLE FOR: ITALY ISD -  
GP-28267 / GROUP HOSPITAL  
INDEMNITY - PLAN-177118**

**DEDUCTION FREQUENCY : Monthly  
(12pp / yr)**

Deduction Frequency

**Monthly (12pp / yr)**

Employee Periodic Cost

**\$18.54**

Employee And Spouse Periodic Cost

**\$37.36**

Employee And Child Periodic Cost

**\$29.80**

Family Periodic Cost

**\$48.62**