

**RATES TABLE FOR: LULING ISD - GP-10981 / GROUP HOSPITAL INDEMNITY - PLAN-77708**

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

Deduction Frequency

**Monthly (12pp / yr)**

Employee Periodic Cost

**\$31.58**

Employee And Spouse Periodic Cost

**\$64.00**

Employee And Child Periodic Cost

**\$48.88**

Family Periodic Cost

**\$81.30**