RATES TABLE FOR: VAN VLECK ISD - GP-11894 / GROUP HOSPITAL INDEMNITY - PLAN-84293

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