

RATES TABLE FOR: CLIFTON ISD - GP-5518 / GROUP HOSPITAL INDEMNITY - PLAN-25107

DEDUCTION FREQUENCY: Monthly (12pp / yr)

Deduction Frequency

Monthly (12pp / yr)

Employee Periodic Cost

\$28.67

Employee And Spouse Periodic Cost

\$55.54

Employee And Child Periodic Cost

\$44.24

Family Periodic Cost

\$71.11