

2025-26 FLORIDA BLUE RATE SCHEDULE (10 MONTH RATES)

COMPANY	COVERAGE TYPE	10 MONTH DEDUCTION	EMPLOYEE PORTION	BOARD PORTION
FB 03559	Single	\$1,407.89	\$281.58	\$1,126.31
	2 person	\$3,530.83	\$889.81	\$2,461.02
	family	\$4,392.62	\$1,306.52	\$3,086.10
	family /2 employees	\$4,392.62	\$563.16	\$3,829.46
FB 5172/5173	Single	\$851.32	\$170.26	\$681.06
	2 person	\$2,026.19	\$538.05	\$1,488.14
	family	\$2,656.14	\$790.03	\$1,866.11
	family/2 employees	\$2,656.14	\$340.52	\$2,315.62