



Town of Longboat Key

Rate sheet prepared by Web User on 7/29/2025 11:54:40 AM.
Florida Payroll Premium rates are Semi-Monthly for industry Class B.

The rates shown on this insert page are for illustration purposes only; they do not imply coverage.
For more information about policy/plan benefits and limitations, please refer to the accompanying
product brochure for each insurance policy/plan listed below.

CANCER PROTECTION ASSURANCE PLAN LEVEL 1 - Series B70100

		Premium	IDR* (5 units)	SDR*	Total
18-75	INDIVIDUAL	\$9.05	\$2.98	\$0.46	\$12.48
18-75	INSURED/SPOUSE	\$14.52	\$7.03	\$0.46	\$22.00
18-75	ONE-PARENT FAMILY	\$9.05	\$2.98	\$0.46	\$12.48
18-75	TWO-PARENT FAMILY	\$14.52	\$7.03	\$0.46	\$22.00

IDR* = Optional Initial Diagnosis Rider (Series B70050) premium 1-5 units

SDR* = Optional Specified Disease Rider (Series B70052) premium

CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200

		Premium	IDR* (5 units)	SDR*	Total
18-75	INDIVIDUAL	\$19.04	\$2.98	\$0.46	\$22.47
18-75	INSURED/SPOUSE	\$32.94	\$7.03	\$0.46	\$40.42
18-75	ONE-PARENT FAMILY	\$19.04	\$2.98	\$0.46	\$22.47
18-75	TWO-PARENT FAMILY	\$32.94	\$7.03	\$0.46	\$40.42

IDR* = Optional Initial Diagnosis Rider (Series B70050) premium 1-5 units

SDR* = Optional Specified Disease Rider (Series B70052) premium

CRITICAL CARE PROTECTION POLICY - Series A74300

Individual			One Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$8.45	\$8.45	18-35	\$14.37	\$14.37
36-45	\$11.96	\$11.96	36-45	\$16.97	\$16.97
46-55	\$17.68	\$17.68	46-55	\$21.84	\$21.84
56-70	\$24.44	\$24.44	56-70	\$30.81	\$30.81
Insured/Spouse			Two Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$16.25	\$16.25	18-35	\$18.40	\$18.40
36-45	\$21.52	\$21.52	36-45	\$23.40	\$23.40
46-55	\$33.09	\$33.09	46-55	\$35.10	\$35.10
56-70	\$47.19	\$47.19	56-70	\$50.51	\$50.51



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AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 1000 - Series B40100

	Premium	EBR	HSSCR	Total
18-49 INDIVIDUAL	\$13.52	\$5.85	\$9.23	\$28.60
50-59	\$13.78	\$6.63	\$11.83	\$32.24
60-75	\$14.17	\$6.70	\$15.41	\$36.28
18-49 INSURED/SPOUSE	\$19.18	\$12.29	\$16.90	\$48.37
50-59	\$20.28	\$13.78	\$23.47	\$57.53
60-75	\$21.71	\$13.91	\$29.38	\$65.00
18-49 ONE-PARENT FAMILY	\$17.16	\$11.64	\$12.74	\$41.54
50-59	\$17.42	\$11.90	\$14.50	\$43.82
60-75	\$17.75	\$12.16	\$19.05	\$48.96
18-49 TWO-PARENT FAMILY	\$20.35	\$14.89	\$17.16	\$52.40
50-59	\$20.54	\$15.15	\$24.25	\$59.94
60-75	\$21.97	\$15.80	\$31.40	\$69.17

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)

HSSCR*: Hospital Stay and Surgical Care Rider Premium (Available for ages 18-75)

*Note – The Extended Benefit Rider and Hospital Stay and Surgical Care Rider are not available with Option H.

DENTAL LEVEL 1 - Series A-82200R

	Premium	Total
18-70 INDIVIDUAL	\$15.15	\$15.15
18-70 ONE-PARENT FAMILY	\$29.06	\$29.06
18-70 INSURED/SPOUSE	\$29.45	\$29.45
18-70 TWO-PARENT FAMILY	\$43.94	\$43.94

VISION NOW - Series VSN100

Age	Individual	One Parent Family	Insured/Spouse	Two Parent Family
18-39	\$5.40	\$8.91	\$8.52	\$11.25
40-49	\$7.35	\$10.27	\$12.42	\$14.56
50-70	\$11.05	\$12.81	\$19.05	\$19.44

Aflac Accident Insurance | 24-Hour Accident-Only Insurance | Option 2

Semimonthly rates

Age Range	Individual	Named Insured / Spouse Only	One Parent Family	Two Parent Family
18 to 75	\$14.02	\$19.72	\$23.33	\$29.66