

BlueDental Choice Plan

Qualified Dental Plans for You & Your Family (Q & QF Plans)

Premiums are calculated on a per person basis

Age (yrs)	Monthly	Quarterly	Semi-Annually	Annually
Individual child ¹ : 0–18	\$36.04 ³	\$108.12	\$216.24	\$432.48
Individual adult ² : 19–63	\$34.47	\$103.41	\$206.82	\$413.64
Individual adult ² : 64 or older	\$52.77	\$158.31	\$316.62	\$633.24

- Rates effective 2020-2023
- Monthly premium, bank draft only (first and future premiums will be drafted)
- Quarterly, semi-annual & annual payments may be made by bank draft (first and future premiums will be drafted), check or money order

¹ Includes child(ren) of domestic partner (provided domestic partner is also covered)

² Includes Domestic Partner

³ Rate per child, to a maximum of three children

Dental plans are offered by Florida Combined Life Insurance Company, Inc. (FCL), an affiliate of Florida Blue and an Independent Licensee of the Blue Cross and Blue Shield Association.

We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex. For more information visit floridablue.com/ndnotice.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-352-2583 (TTY: 1-877-955-8773). FEP: Llame al 1-800-333-2227.

ATANSYON: Si w pale Kreyòl ayisyen, ou ka resewwa yon èd gratis nan lang pa w. Rele 1-800-352-2583 (pou moun ki pa tande byen: 1-800-955-8770). FEP: Rele 1-800-333-2227.

Florida Blue 
Your local Blue Cross Blue Shield

Monthly Calculation Example

Adult (41)	\$34.47
Adult (35)	\$34.47
+ Children (9,12)	\$72.08
Total Premium Rate	\$141.02