

# **Medical / Dental / Vision Rates**

# For associates who are paid bi-weekly Florida Restaurant Group

## **Bi-weekly MEDICAL Premium**

Plan and Coverage Tier	Rate	Wellness Rate Associate only	Wellness Rate Associate and Spouse	
Complete PPO				
Associate Only	\$114.55	\$91.48	\$91.48	
Associate + Spouse	\$670.91	\$647.83	\$636.29	
Associate + Child(ren)	\$351.14	\$328.06	\$328.06	
Family	\$975.09	\$952.01	\$940.47	
Balanced CDHP				
Associate Only	\$77.92	\$54.85	\$54.85	
Associate + Spouse	\$565.52	\$542.44	\$530.90	
Associate + Child(ren)	\$285.26	\$262.19	\$262.19	
Family	\$832.10	\$809.02	\$797.48	
Essentials PPO				
Associate Only	\$41.29	\$18.22	\$18.22	
Associate + Spouse	\$460.12	\$437.05	\$425.51	
Associate + Child(ren)	\$219.39	\$196.32	\$196.32	
Family	\$689.11	\$666.03	\$654.49	

#### More about Wellness Rates

You can reduce your per paycheck medical premiums by participating in our wellbeing program. Save \$50/month (\$600/year) for individual coverage or \$75/month (\$900/year) for Associate + Spouse or Family coverage.

#### Here's how it works:

Associates (and participating spouse) must complete 3 out of 7 items on the premium incentive checklist on Personify Health by November 30, 2025.

### To get started:

Go to Personify Health

First time users must enter the passphrase "luckier-passionfruit-65" during enrollment. If you're already registered, no passphrase is needed.

#### **Bi-weekly DENTAL Premium**

Plan and Coverage Tier	Rate
<b>Dental Enhanced</b>	
Associate Only	\$11.84
Associate + Spouse	\$35.72
Associate + Child(ren)	\$44.16
Family	\$68.29
<b>Dental Basic</b>	
Associate Only	\$3.15
Associate + Spouse	\$17.48
Associate + Child(ren)	\$22.57
Family	\$37.02

#### **Bi-weekly VISION Premium**

Plan and Coverage Tier	Rate		
Vision Enhanced			
Associate Only	\$1.54		
Associate + Spouse	\$6.13		
Associate + Child(ren)	\$4.14		
Family	\$8.79		
Vision Basic			
Associate Only	\$0.00		
Associate + Spouse	\$2.43		
Associate + Child(ren)	\$1.39		
Family	\$3.83		