

CITY OF JACKSONVILLE
 TRICARE HEALTH SUPPLEMENT INSURANCE
 EFFECTIVE JANUARY 1, 2020

TRICARE SUPPLEMENT

PLAN	COVERAGE	Monthly	Per Pay Period
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ACTIVE FULL-TIME			
	Employee Only	68.42	34.21
	Employee & Spouse	134.30	67.15
	Employee & Child(ren)	134.30	67.15
	Employee & Family	180.93	90.46
	Continuing Spouse	68.42	34.21
	Continuing Child	68.42	34.21
	Continuing Spouse & Child(ren)	134.30	67.15

ACTIVE PART-TIME			
	Employee Only	68.42	34.21
	Employee & Spouse	134.30	67.15
	Employee & Child(ren)	134.30	67.15
	Employee & Family	180.93	90.46

RETIREE			
	Retiree Only	68.42	34.21
	Retiree & Spouse	134.30	67.15
	Retiree & Child(ren)	134.30	67.15
	Retiree & Family	180.93	90.46