



PART-TIME FOOD SERVICE EMPLOYEES 2025 MEDICAL RATE SHEET

	10-MONTHS (20 Deductions)	12-MONTHS (26 Deductions)
OAP EXTENDED NETWORK		
Employee	\$ 25.20	\$ 19.38
Spouse/Domestic Partner	\$ 142.80	\$ 109.85
Children	\$ 102.60	\$ 78.92
Family	\$ 272.40	\$ 209.54
LOCALPLUS FOCUSED NETWORK		
Employee	\$ 8.40	\$ 6.46
Spouse/Domestic Partner	\$ 101.40	\$ 78.00
Children	\$ 72.00	\$ 55.38
Family	\$ 203.40	\$ 156.46
SUREFIT NETWORK*		
Employee	\$ 0.00	\$ 0.00
Spouse/Domestic Partner	\$ 95.40	\$ 73.38
Children	\$ 67.20	\$ 51.69
Family	\$ 190.80	\$ 146.77

*The SureFit Network requires the selection of a Primary Care Physician (PCP). If a PCP is not selected, Cigna will assign you a participating provider based on your ZIP code. You must live in the tri-county (Miami-Dade, Broward and Palm Beach) service area.

NOTE: Employee-Only Rate must be added to the dependent rate, i.e., spouse/domestic partner, child(ren), or family to get the total deduction per paycheck.