

**Edison State College  
2014 AFLAC Cancer Indemnity Plan Rates**

**ACTIVE EMPLOYEE**

Coverage Type	Monthly/Semi-Monthly
<b>Employee-New Rates</b>	<b>\$38.10/\$19.05 per pay</b>
<b>1 Parent Family - New Rates</b>	<b>\$38.10/\$19.05 per pay</b>
<b>2 Parent Family - New Rates</b>	<b>\$64.74/\$32.37 per pay</b>
<b>Employee + Spouse - New Rates</b>	<b>\$64.74/\$32.37 per pay</b>