

## DENTAL INSURANCE

### 24 PAY STANDARD PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 31.57	\$	15.79
EE + Spouse	\$ 64.93	\$	32.47
EE + Children	\$ 58.84	\$	29.42
Family	\$ 86.16	\$	43.08

### 20 PAY STANDARD PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 37.88	\$	18.94
EE + Spouse	\$ 77.92	\$	38.96
EE + Children	\$ 70.61	\$	35.30
Family	\$ 103.39	\$	51.70

### 19 PAY STANDARD PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 39.88	\$	19.94
EE + Spouse	\$ 82.02	\$	41.01
EE + Children	\$ 74.32	\$	37.16
Family	\$ 108.83	\$	54.42

### 24 PAY HIGH PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 36.28	\$	18.14
EE + Spouse	\$ 74.64	\$	37.32
EE + Children	\$ 67.66	\$	33.83
Family	\$ 99.04	\$	49.52

### 20 PAY HIGH PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 43.54	\$	21.77
EE + Spouse	\$ 89.57	\$	44.78
EE + Children	\$ 81.19	\$	40.60
Family	\$ 118.85	\$	59.42

### 19 PAY HIGH PLAN

	<u>EE Per Month</u>		<u>EE Per Pay</u>
Single	\$ 45.83	\$	22.91
EE + Spouse	\$ 94.28	\$	47.14
EE + Children	\$ 85.47	\$	42.73
Family	\$ 125.10	\$	62.55