

## Dental

### Delta Dental 2019

	Single	Two Party	Family
Premium Rate	\$62.44	\$113.74	\$171.89

Hour:	FTE	Employee Portion		
8.00	100.00%	\$3.12	\$11.37	\$25.78
7.00	87.50%	\$10.53	\$24.17	\$44.04
6.00	75.00%	\$17.95	\$36.96	\$62.31
5.00	62.50%	\$25.36	\$49.76	\$80.57
4.00	50.00%	\$32.78	\$62.55	\$98.83

### Delta Dental "Premium Plan" 2020

	Single	Two Party	Family
Premium Rate	\$64.72	\$129.43	\$218.81

Hour:	FTE	Employee Portion		
8.00	100.00%	\$3.24	\$12.94	\$32.82
7.00	87.50%	\$10.92	\$27.50	\$56.07
6.00	75.00%	\$18.61	\$42.06	\$79.32
5.00	62.50%	\$26.29	\$56.62	\$102.57
4.00	50.00%	\$33.98	\$71.18	\$125.81

### Delta Dental "High Plan" 2020

	Single	Two Party	Family
Premium Rate	\$58.49	\$116.96	\$197.76

Hour:	FTE	Employee Portion		
8.00	100.00%	\$2.92	\$11.70	\$29.66
7.00	87.50%	\$9.87	\$24.86	\$50.67
6.00	75.00%	\$16.81	\$38.01	\$71.68
5.00	62.50%	\$23.76	\$51.17	\$92.70
4.00	50.00%	\$30.70	\$64.33	\$113.71

### Delta Dental "Low Plan" 2020

	Single	Two Party	Family
Premium Rate	\$50.39	\$100.78	\$170.37

Hour:	FTE	Employee Portion		
8.00	100.00%	\$2.52	\$10.08	\$25.56
7.00	87.50%	\$8.50	\$21.42	\$43.66
6.00	75.00%	\$14.49	\$32.75	\$61.76
5.00	62.50%	\$20.47	\$44.09	\$79.86
4.00	50.00%	\$26.45	\$55.43	\$97.96