

**Dental Insurance Premiums
2021 Plan Year**

Dental Coverage Provided by Ameritas Dental

Employees Paid Monthly

Group Dental Plans	Low Option	High Option
Employee Only	\$0.00	\$12.60
Employee + Child(ren)	\$34.20	\$55.68
Employee + Spouse	\$34.20	\$55.72
Family	\$68.16	\$98.68

Employees Paid Biweekly-26

Payroll deductions are taken over 26 pay periods.

Group Dental Plans	Low Option	High Option
Employee Only	\$0.00	\$5.82
Employee + Child(ren)	\$15.78	\$25.70
Employee + Spouse	\$15.78	\$25.72
Family	\$31.46	\$45.54

Employees Paid Biweekly-20

Payroll deductions are taken over 20 pay periods.

Group Dental Plans	Low Option	High Option
Employee Only	\$0.00	\$7.56
Employee + Child(ren)	\$20.52	\$33.41
Employee + Spouse	\$20.52	\$33.43
Family	\$40.90	\$59.21