

# Dental Plan Renewal Rates

(+7.00% Increase for One Year)



Coverage	Current Rate/Fee	Renewal Rate/Fee	Change in Rate/Fee +/- %
Dental – Active, COBRA, and Retiree			
• Employee only	\$21.98/Ee	\$23.52/Ee	7%
• Employee + Spouse	\$43.92/Ee	\$46.99Ee	7%
• Employee + Child(ren)	\$48.10/Ee	\$51.47/Ee	7%
• Employee + Family	\$74.79/Ee	\$80.03/Ee	7%
Dental - Survivor			
• Spouse Only	\$21.98/Ee	\$23.52/Ee	7%
• Child(ren) Only	\$26.13/Ee	\$27.96/Ee	7%
• Spouse + Children	\$48.10/Ee	\$51.47/Ee	7%

The Patient Protection and Affordable Care Act ("PPACA") includes a health insurance industry fee imposed on all health insurers, including dental and vision insurers. As with the prior year, this fee is included in the dental and/or vision rates above.

Broker Commission: 0%