

DENTAL REIMBURSEMENT PLAN PREMIUM CHART
Rates effective 7-1-11

BIWEEKLY PAYROLL DEDUCTIONS (Full Time)

INDIVIDUAL 0.00
EMP + SP 18.00
EMP + CHD 20.31
FAMILY 38.31

BIWEEKLY PAYROLL DEDUCTIONS (Part Time 20-29 HRS/WK)

INDIVIDUAL 5.19
EMP + SP 23.19
EMP + CHD 25.50
FAMILY 43.50

BIWEEKLY PAYROLL DEDUCTIONS (Part Time 30-35 HRS/WK)

INDIVIDUAL 3.12
EMP + SP 21.12
EMP + CHD 23.43
FAMILY 41.43