

# 2022 DENTAL & VISION PLAN CONTRIBUTIONS

## DENTAL: DHMO PLAN

	FULL-TIME RATES		PART-TIME RATES	
	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY
EMPLOYEE ONLY	\$5.22	\$2.41	\$7.83	\$3.61
EMPLOYEE + CHILD	\$13.17	\$6.08	\$19.75	\$9.11
EMPLOYEE + CHILDREN	\$13.17	\$6.08	\$19.75	\$9.11
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$13.17	\$6.08	\$19.75	\$9.11
FAMILY	\$13.17	\$6.08	\$19.75	\$9.11

## DENTAL: CIGNA BASE PLAN

	FULL-TIME RATES		PART-TIME RATES	
	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY
EMPLOYEE ONLY	\$9.94	\$4.59	\$14.90	\$6.88
EMPLOYEE + CHILD	\$29.31	\$13.53	\$43.97	\$20.29
EMPLOYEE + CHILDREN	\$29.31	\$13.53	\$43.97	\$20.29
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$29.31	\$13.53	\$43.97	\$20.29
FAMILY	\$29.31	\$13.53	\$43.97	\$20.29

## DENTAL: CIGNA PREFERRED PLAN

	FULL-TIME RATES		PART-TIME RATES	
	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY
EMPLOYEE ONLY	\$15.19	\$7.01	\$22.79	\$10.52
EMPLOYEE + CHILD	\$49.66	\$22.92	\$74.48	\$34.38
EMPLOYEE + CHILDREN	\$49.66	\$22.92	\$74.48	\$34.38
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$49.66	\$22.92	\$74.48	\$34.38
FAMILY	\$49.66	\$22.92	\$74.48	\$34.38

## VISION: DAVIS VISION PLAN

	FULL-TIME RATES		PART-TIME RATES	
	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY
EMPLOYEE ONLY	\$2.17	\$1.00	\$3.25	\$1.50
EMPLOYEE + CHILD	\$4.99	\$2.30	\$7.49	\$3.46
EMPLOYEE + CHILDREN	\$4.99	\$2.30	\$7.49	\$3.46
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$4.99	\$2.30	\$7.49	\$3.46
FAMILY	\$4.99	\$2.30	\$7.49	\$3.46