

2023 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	\$10.18	\$4.70	\$15.26	\$7.04
EMPLOYEE + CHILD	\$30.02	\$13.86	\$45.04	\$20.79
EMPLOYEE + CHILDREN	\$30.02	\$13.86	\$45.04	\$20.79
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$30.02	\$13.86	\$45.04	\$20.79
FAMILY	\$30.02	\$13.86	\$45.04	\$20.79

DENTAL: CIGNA PREFERRED PLAN

	FULL-TIME RATES		PART-TIME RATES	
	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY
EMPLOYEE ONLY	\$15.56	\$7.18	\$23.34	\$10.77
EMPLOYEE + CHILD	\$50.87	\$23.48	\$76.29	\$35.21
EMPLOYEE + CHILDREN	\$50.87	\$23.48	\$76.29	\$35.21
EMPLOYEE + SPOUSE/DOMESTIC PARTNER	\$50.87	\$23.48	\$76.29	\$35.21
FAMILY	\$50.87	\$23.48	\$76.29	\$35.21

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