

Dental Insurance
January 1, 2024 - December 31, 2024



Delta Dental

Employee Premium Deduction

	26 Pay	20 Pay
Employee	\$ 3.41	\$ 4.43
Employee/Child(ren)	\$ 6.54	\$ 8.50
Employee/Spouse	\$ 6.57	\$ 8.54
Employee/Family	\$ 11.00	\$ 14.30

College Premium Contribution

	26 Pay	20 Pay
Employee	\$ 13.54	\$ 17.61
Employee/Child(ren)	\$ 26.15	\$ 34.00
Employee/Spouse	\$ 25.97	\$ 33.76
Employee/Family	\$ 43.76	\$ 56.89

**Your share of the benefit costs will be deducted from your pay in equal amounts in the applicable pay periods in a program year. The College does not prorate benefit deductions.*