

2016 Semi-Monthly Dental Rate

For active full time, part time employees and council aides

DPPO Plan

	DPPO High	DPPO Low
Employee Only	\$14.74	\$9.93
Employee + Spouse	\$30.21	\$18.86
Employee + Child(ren)	\$39.05	\$21.84
Employee + Family	\$49.36	\$30.78

DHMO Plan

	DHMO High	DHMO Low
Employee Only	\$6.77	\$4.57
Employee + Spouse	\$11.66	\$7.83
Employee + Child(ren)	\$13.55	\$8.15
Employee + Family	\$20.67	\$12.19

Delta Dental

DPPO

DHMO

www.deltadentalins.com

800-521-2651

800-422-4234

Domestic Partner (DP) Semi-Monthly Dental Rates

	DPPO High		
	Pre-Tax	Post-Tax	Total Per Paycheck
Employee + DP	\$14.74	\$15.47	\$30.21
Employee + DP + DP Child	\$14.74	\$34.62	\$49.36
Employee + Child + DP	\$39.05	\$10.31	\$49.36
Employee + DP + Child + DP Child	\$14.74	\$34.62	\$49.36

	DPPO Low		
	Pre-Tax	Post-Tax	Total Per Paycheck
Employee + DP	\$9.93	\$8.93	\$18.86
Employee + DP + DP Child	\$9.93	\$20.85	\$30.78
Employee + Child + DP	\$21.84	\$8.94	\$30.78
Employee + DP + Child + DP Child	\$9.93	\$20.85	\$30.78

	DHMO High		
	Pre-Tax	Post-Tax	Total Per Paycheck
Employee + DP	\$6.77	\$4.89	\$11.66
Employee + DP + DP Child	\$6.77	\$13.90	\$20.67
Employee + Child + DP	\$13.55	\$7.12	\$20.67
Employee + DP + Child + DP Child	\$6.77	\$13.90	\$20.67

	DHMO Low		
	Pre-Tax	Post-Tax	Total Per Paycheck
Employee + DP	\$4.57	\$3.26	\$7.83
Employee + DP + DP Child	\$4.57	\$7.62	\$12.19
Employee + Child + DP	\$8.15	\$4.04	\$12.19
Employee + DP + Child + DP Child	\$4.57	\$7.62	\$12.19