

2023 Monthly Dental Premiums

	CIGNA DHMO (PREPAID PROVIDER) PLAN	DELTA DENTAL DPPO PLAN
ACTIVE MEMBERS		
Employee Only	\$13.84	\$19.82
Employee + Child(ren)	\$28.75	\$52.70
Employee + Spouse	\$24.54	\$38.98
Employee + Spouse + Child(ren)	\$33.74	\$80.72
COBRA PARTICIPANTS		
Employee Only/Single	\$14.12	\$20.22
Employee + Child(ren)	\$29.33	\$53.75
Employee + Spouse	\$25.03	\$39.76
Employee + Spouse + Child(ren)	\$34.41	\$82.33
COBRA DISABILITY PARTICIPANTS		
Employee Only/Single	\$20.76	\$29.73
Employee + Child(ren)	\$43.13	\$79.05
Employee + Spouse	\$36.81	\$58.47
Employee + Spouse + Child(ren)	\$50.61	\$121.08
RETIREE PARTICIPANTS		
Retiree Only	\$15.23	\$26.60
Retiree + Child(ren)	\$31.63	\$60.09
Retiree + Spouse	\$27.01	\$52.44
Retiree + Spouse + Child(ren)	\$37.10	\$94.95