

Dental and Vision Premiums

Plan Rates Effective 10-1-11

Employee Cost

(Effective September paychecks)

Monthly Premiums (per payroll)

	<u>Aetna Dental</u>	<u>VSP Vision</u>
Employee Only	\$32.42	\$8.84
Employee + 1 (VSP Only)	-----	\$14.15
Employee & Spouse	\$68.18	-----
Employee & Children	\$75.47	\$14.44
Employee & Family	\$108.71	\$23.28

Bi-Monthly Premiums (per payroll)

	<u>Aetna Dental</u>	<u>VSP Vision</u>
Employee Only	\$16.21	\$4.42
Employee + 1 (VSP Only)	-----	\$7.08
Employee & Spouse	\$34.09	-----
Employee & Children	\$37.74	\$7.22
Employee & Family	\$54.36	\$11.64