

## 2014 Dental and Vision Premium Rates Active Employees

Plan	Single-Party	Two-Party	Family
Delta Dental PPO	\$55.31	\$110.65	\$138.96
SafeGuard Dental HMO	\$20.96	\$39.81	\$50.32
Vision Service Plan	\$11.01	\$15.96	\$18.66

## COBRA Participants

Plan	Single-Party	Two-Party	Family
Delta Dental PPO	\$56.41	\$112.86	\$141.74
SafeGuard Dental HMO	\$21.38	\$40.60	\$51.27
Vision Service Plan	\$11.23	\$16.28	\$19.03

## Retirees

Plan	Single-Party	Two-Party	Family
Delta Dental PPO	\$62.79	\$114.82	\$172.59
SafeGuard Dental HMO	\$38.22	\$38.22	\$38.22
Vision Service Plan	\$18.20	\$18.20	\$18.20