

## 2024 Active Plan Rates – Dental

Tables below shows bi-weekly\* dental and vision plan rates for enrolled Active employees.

	2024 Bi-Weekly* Dental Premium			
	Total Bi-Weekly* Cost	Cost Share County / Employee	County Cost	Employee Cost
<b>Aetna Dental HMO</b>				
Employee	\$8.83	75% / 25%	\$6.62	\$2.21
Employee + 1	\$17.22	75% / 25%	\$12.92	\$4.30
Family	\$28.25	75% / 25%	\$21.19	\$7.06
<b>Aetna Dental PPO</b>				
Employee	\$17.70	75% / 25%	\$13.28	\$4.42
Employee + 1	\$36.29	75% / 25%	\$27.22	\$9.07
Family	\$47.58	75% / 25%	\$35.69	\$11.89

## 2024 Under 65 Retiree Plan Rates – Dental

Tables below shows monthly dental and vision plan rates for all Under 65 Retirees.

	2024 Monthly Dental Premium			
	Total Monthly Cost	Cost Share County / Employee	County Cost	Retiree Cost
<b>Aetna Dental HMO</b>				
Retiree	\$17.65	0% / 100%	\$0.00	\$16.97
Retiree + 1	\$34.43	0% / 100%	\$0.00	\$33.11
Family	\$56.50	0% / 100%	\$0.00	\$54.33
<b>Aetna Dental PPO</b>				
Retiree	\$35.39	0% / 100%	\$0.00	\$32.83
Retiree + 1	\$72.57	0% / 100%	\$0.00	\$67.33
Family	\$95.17	0% / 100%	\$0.00	\$88.29

## 2024 Over 65 Retiree Plan Rates – Dental

Tables below shows monthly dental and vision plan rates for all Over 65 Retirees.

	2024 Monthly Dental Premium			
	Total Cost	Cost Share County / Employee	County Cost	Retiree Cost
<b>Aetna Dental HMO</b>				
Retiree	\$17.65	0% / 100%	\$0.00	\$16.97
Family	\$41.01	0% / 100%	\$0.00	\$39.43
<b>Aetna Dental PPO</b>				
Retiree	\$35.39	0% / 100%	\$0.00	\$32.83
Family	\$80.57	0% / 100%	\$0.00	\$74.75