

2026 Active Plan Rates – Dental

	2026 Bi-Weekly* Dental Premium			
	Total Bi-Weekly* Cost	Cost Share County / Employee	County Cost	Employee Cost
Aetna DHMO				
Employee	\$8.74	75% / 25%	\$6.56	\$2.18
Employee + 1	\$17.05	75% / 25%	\$12.79	\$4.26
Family	\$27.97	75% / 25%	\$20.98	\$6.99
Aetna DPPO				
Employee	\$19.53	75% / 25%	\$14.65	\$4.88
Employee + 1	\$40.04	75% / 25%	\$30.03	\$10.01
Family	\$52.51	75% / 25%	\$39.38	\$13.13

The table above shows bi-weekly* medical plan rates for enrolled Active employees.

*Benefit plan deductions are made on 24 of the County's 26 pay periods per year.