

Dental Rate Chart									
Schedule	Plan	Base				Base + Med Supp Discount			
		ABW <sup>1</sup>	Quarterly	Semi-Annual	Annual	ABW <sup>1</sup>	Quarterly	Semi-Annual	Annual
Schedule 1 Economy	Individual	\$30.50	\$91.50	\$183.00	\$366.00	\$28.97	\$86.91	\$173.82	\$347.64
	Ind/Spouse	\$59.50	\$178.50	\$357.00	\$714.00	\$56.52	\$169.56	\$339.12	\$678.24
	One-Parent	\$61.00	\$183.00	\$366.00	\$732.00	\$57.95	\$173.85	\$347.70	\$695.40
	All-Family	\$96.10	\$288.30	\$576.60	\$1,153.20	\$91.29	\$273.87	\$547.74	\$1,095.48
Schedule 2 Standard	Individual	\$38.75	\$116.25	\$232.50	\$465.00	\$36.81	\$110.43	\$220.86	\$441.72
	Ind/Spouse	\$75.55	\$226.65	\$453.30	\$906.60	\$71.77	\$215.31	\$430.62	\$861.24
	One-Parent	\$77.50	\$232.50	\$465.00	\$930.00	\$73.62	\$220.86	\$441.72	\$883.44
	All-Family	\$122.05	\$366.15	\$732.30	\$1,464.60	\$115.95	\$347.85	\$695.70	\$1,391.40
Schedule 3 Preferred	Individual	\$46.95	\$140.85	\$281.70	\$563.40	\$44.60	\$133.80	\$267.60	\$535.20
	Ind/Spouse	\$91.55	\$274.65	\$549.30	\$1,098.60	\$86.97	\$260.91	\$521.82	\$1,043.64
	One-Parent	\$93.90	\$281.70	\$563.40	\$1,126.80	\$89.20	\$267.60	\$535.20	\$1,070.40
	All-Family	\$147.90	\$443.70	\$887.40	\$1,774.80	\$140.50	\$421.50	\$843.00	\$1,686.00
Schedule 4 Premier	Individual	\$56.50	\$169.50	\$339.00	\$678.00	\$53.67	\$161.01	\$322.02	\$644.04
	Ind/Spouse	\$110.20	\$330.60	\$661.20	\$1,322.40	\$104.69	\$314.07	\$628.14	\$1,256.28
	One-Parent	\$113.00	\$339.00	\$678.00	\$1,356.00	\$107.35	\$322.05	\$644.10	\$1,288.20
	All-Family	\$177.95	\$533.85	\$1,067.70	\$2,135.40	\$169.05	\$507.15	\$1,014.30	\$2,028.60

<sup>1</sup>To calculate non-ABW monthly premiums add \$3.00 to the ABW monthly premium.

Schedule	Plan	Base + Vision & Hearing Rider				Base + Vision & Hearing Rider + Med Supp Discount			
		ABW <sup>1</sup>	Quarterly	Semi-Annual	Annual	ABW <sup>1</sup>	Quarterly	Semi-Annual	Annual
Schedule 1 Economy	Individual	\$39.45	\$118.35	\$236.70	\$473.40	\$37.47	\$112.41	\$224.82	\$449.64
	Ind/Spouse	\$76.95	\$230.85	\$461.70	\$923.40	\$73.10	\$219.30	\$438.60	\$877.20
	One-Parent	\$78.90	\$236.70	\$473.40	\$946.80	\$74.95	\$224.85	\$449.70	\$899.40
	All-Family	\$124.30	\$372.90	\$745.80	\$1,491.60	\$118.08	\$354.24	\$708.48	\$1,416.96
Schedule 2 Standard	Individual	\$47.70	\$143.10	\$286.20	\$572.40	\$45.31	\$135.93	\$271.86	\$543.72
	Ind/Spouse	\$93.00	\$279.00	\$558.00	\$1,116.00	\$88.35	\$265.05	\$530.10	\$1,060.20
	One-Parent	\$95.40	\$286.20	\$572.40	\$1,144.80	\$90.62	\$271.86	\$543.72	\$1,087.44
	All-Family	\$150.25	\$450.75	\$901.50	\$1,803.00	\$142.74	\$428.22	\$856.44	\$1,712.88
Schedule 3 Preferred	Individual	\$55.90	\$167.70	\$335.40	\$670.80	\$53.10	\$159.30	\$318.60	\$637.20
	Ind/Spouse	\$109.00	\$327.00	\$654.00	\$1,308.00	\$103.55	\$310.65	\$621.30	\$1,242.60
	One-Parent	\$111.80	\$335.40	\$670.80	\$1,341.60	\$106.20	\$318.60	\$637.20	\$1,274.40
	All-Family	\$176.10	\$528.30	\$1,056.60	\$2,113.20	\$167.29	\$501.87	\$1,003.74	\$2,007.48
Schedule 4 Premier	Individual	\$65.45	\$196.35	\$392.70	\$785.40	\$62.17	\$186.51	\$373.02	\$746.04
	Ind/Spouse	\$127.65	\$382.95	\$765.90	\$1,531.80	\$121.27	\$363.81	\$727.62	\$1,455.24
	One-Parent	\$130.90	\$392.70	\$785.40	\$1,570.80	\$124.35	\$373.05	\$746.10	\$1,492.20
	All-Family	\$206.15	\$618.45	\$1,236.90	\$2,473.80	\$195.84	\$587.52	\$1,175.04	\$2,350.08

<sup>1</sup>To calculate non-ABW monthly premiums add \$3.00 to the ABW monthly premium