

DENTAL PLAN RATES: 2021

KCTCS Pre-Tax Dental Premiums

| Plan | Coverage Level | 2021 Rates (Active) |
|---|---------------------|---------------------|
| Delta Dental-Premier | Employee | \$24.30 |
| <i>No change</i> | Employee & One | \$46.64 |
| | Family | \$77.08 |
| | | |
| Delta Dental Preferred (PPO) | Employee | \$21.28 |
| <i>No change</i> | Employee & One | \$40.84 |
| | Family | \$70.18 |
| | | |
| Humana Dental C250Z | Employee | \$19.00 |
| <i>DHMO</i> | Employee & One | \$36.62 |
| <i>Increase</i> | Family | \$49.28 |
| | | |
| Humana Dental Advantage Plus 3S | Employee | \$24.58 |
| <i>DEPO</i> | Employee & One | \$47.14 |
| <i>Increase</i> | Family | \$63.94 |
| | | |
| Paramount Dental (Insuring Smiles) | Employee | \$22.50 |
| <i>No change</i> | Employee & Spouse | \$59.30 |
| | Employee & Children | \$65.20 |
| | Family | \$97.50 |

KEHP Pre-Tax Dental Premiums

| Plan | Coverage Level | 2021 Rates (Active) |
|------------------------|---------------------|---------------------|
| Anthem - Bronze | Employee | \$13.28 |
| <i>Increase</i> | Employee & Spouse | \$24.22 |
| | Employee & Children | \$31.50 |
| | Family | \$46.48 |
| | | |
| Anthem - Silver | Employee | \$20.18 |
| <i>Increase</i> | Employee & Spouse | \$38.32 |
| | Employee & Children | \$43.32 |
| | Family | \$64.40 |
| | | |
| Anthem - Gold | Employee | \$26.78 |
| <i>Increase</i> | Employee & Spouse | \$51.78 |
| | Employee & Children | \$66.04 |
| | Family | \$96.32 |