

Dental Insurance
January 1, 2026 - December 31, 2026



Delta Dental

Employee Premium Deduction

	26 Pay	20 Pay
Employee	\$ 4.90	\$ 6.37
Employee/Child(ren)	\$ 8.89	\$ 11.55
Employee/Spouse	\$ 10.98	\$ 14.27
Employee/Family	\$ 15.25	\$ 19.83

College Premium Contribution

	26 Pay	20 Pay
Employee	\$ 14.16	\$ 18.40
Employee/Child(ren)	\$ 27.32	\$ 35.52
Employee/Spouse	\$ 27.13	\$ 35.27
Employee/Family	\$ 45.73	\$ 59.45

**Your share of the benefit costs will be deducted from your pay in equal amounts in the applicable pay periods in a program year. The College does not prorate benefit deductions.*

75 Plan Participants
January 1, 2026 - December 31, 2026



CDHP 1 - Consumer Driven Health Plan (CDHP)

	Monthly Premium
Retiree	\$ 103.65
Retiree/Child(ren)	\$ 186.58
Retiree/Spouse	\$ 228.04
Retiree/Family	\$ 331.69

CDHP 2 - Consumer Driven Health Plan (CDHP)

	Monthly Premium
Retiree	\$ 128.50
Retiree/Child(ren)	\$ 231.29
Retiree/Spouse	\$ 282.69
Retiree/Family	\$ 411.19

PPO - Health Plan

	Monthly Premium
Retiree	\$ 281.69
Retiree/Child(ren)	\$ 507.04
Retiree/Spouse	\$ 619.72
Retiree/Family	\$ 901.41

Delta Dental

	Monthly Premium
Retiree	\$ 10.62
Retiree/Child(ren)	\$ 19.25
Retiree/Spouse	\$ 23.79
Retiree/Family	\$ 33.05

Regular Retirees, Surviving Spouses, and LTD Participants:
January 1, 2026 - December 31, 2026



Monthly Premium

CDHP 1 - Consumer Driven Health Plan (CDHP)

Retiree	\$ 971.23
Retiree/Child(ren)	\$ 1,748.24
Retiree/Spouse	\$ 2,136.74
Retiree/Family	\$ 3,107.97

CDHP 2 - Consumer Driven Health Plan (CDHP)

Retiree	\$ 1,004.84
Retiree/Child(ren)	\$ 1,808.71
Retiree/Spouse	\$ 2,210.64
Retiree/Family	\$ 3,215.49

PPO - Heath Plan

Retiree	\$ 1,027.30
Retiree/Child(ren)	\$ 1,849.14
Retiree/Spouse	\$ 2,260.07
Retiree/Family	\$ 3,287.37

Delta Dental

Retiree	\$ 41.29
Retiree/Child(ren)	\$ 78.45
Retiree/Spouse	\$ 82.58
Retiree/Family	\$ 132.13

COBRA
January 1, 2026 - December 31, 2026



Monthly Premiums below includes 2% Administrative Fee

CDHP 1 - Consumer Driven Health Plan (CDHP)

Employee or Participant	\$ 990.65
Employee/Child(ren)	\$ 1,783.20
Employee/Spouse	\$ 2,179.47
Employee/Family	\$ 3,170.13

CDHP 2 - Consumer Driven Health Plan (CDHP)

Employee or Participant	\$ 1,024.94
Employee/Child(ren)	\$ 1,844.88
Employee/Spouse	\$ 2,254.85
Employee/Family	\$ 3,279.80

PPO - Health Plan

Employee or Participant	\$ 1,047.85
Employee/Child(ren)	\$ 1,886.12
Employee/Spouse	\$ 2,305.27
Employee/Family	\$ 3,353.12

Delta Dental

Employee or Participant	\$ 42.12
Employee/Child(ren)	\$ 80.02
Employee/Spouse	\$ 84.23
Employee/Family	\$ 134.77

VSP - Vision

Employee or Participant	\$ 6.40
Employee/Child(ren)	\$ 13.66
Employee/Spouse	\$ 12.75
Employee/Family	\$ 21.80