

ESC-20 Benefits Cooperative Dental Plan Rates

Discount Plan - Silver Network

Employee Only	\$0.00
Employee + Spouse	\$5.00
Employee + Child(ren)	\$5.00
Employee + Spouse + Child(ren)	\$8.00

Copay Plan - Platinum Network

Employee Only	\$11.12
Employee + Spouse	\$21.01
Employee + Child(ren)	\$23.63
Employee + Spouse + Child(ren)	\$36.69

Indemnity Plan - Platinum Network

Employee Only	\$21.84
Employee + Spouse	\$54.75
Employee + Child(ren)	\$60.06
Employee + Spouse + Child(ren)	\$83.75

* Discount vision plan added to each dental plan at no cost



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