

Dental Plan

January 1, 2022 – December 31, 2022

Per Paycheck Rates

Coverage Level	Employee			Employee + 1			Family		
Plan	Employee Contribution	Pace Contribution	Pace Subsidy	Employee Contribution	Employer Contribution	Pace Subsidy	Employee Contribution	Employer Contribution	Pace Subsidy
DMO	\$2.76	\$2.76	50%	\$7.08	\$2.76	28%	\$14.21	\$2.76	16%
PPO	\$11.30	\$11.30	50%	\$37.51	\$11.30	23%	\$60.91	\$11.30	16%