



### Medical Plan Rates

Active Employees

(10-01-20 through 09-30-2021)

<b>Plan</b>	<b>100 D</b>
Composite Rate	\$1,613 \$115 (EE buy-up portion)
<b>Plan</b>	<b>90 G</b>
Composite Rate	\$1,498
<b>Plan</b>	<b>Anchor</b>
Single	\$665
Single + Child(ren)	\$998

### Dental Plan Rates

Active Employees

(10-01-2020 through 09-30-2021)

<b>Network</b>	<b>Delta Dental PPO &amp; Premier</b>
Annual Limit	Unlimited
Composite Rate	\$149.40

### Vision Plan Rates

Active Employees

(10-01-20 through 09-30-2021)

<b>Network</b>	<b>VSP</b>
Annual Coverage	2 pairs of glasses \$50 deductible for contacts
Composite Rate	\$32.62