



Dental DHMO Insurance 2009-2010

Aetna's Customer Service Center: 1-877-AETNA-00
1-877-238-6200

Coverage Categories	<i>Per Paycheck 24 Pay Periods</i>	<i>Monthly Rate</i>	<i>Per Paycheck 18 Pay Periods</i>	<i>Monthly Rate</i>
Emp Only	6.78	13.56	8.29	16.58
Emp + Spouse	13.44	26.88	16.43	32.86
Emp + Child(ren)	12.97	25.94	15.85	31.70
Emp + Family	19.17	38.34	23.43	46.86

Dental Indemnity Insurance 2009-2010

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Coverage Categories	<i>Per Paycheck 24 Pay Periods</i>	<i>Monthly Rate</i>	<i>Per Paycheck 18 Pay Periods</i>	<i>Monthly Rate</i>
Emp Only	22.13	44.25	27.05	54.10
Emp + Spouse	43.28	86.55	52.90	105.80
Emp + Child(ren)	41.55	83.09	50.78	101.56
Emp + Family	59.79	119.57	73.08	146.16