

MONTHLY PREMIUMS FOR DENTAL AND VISION

Effective July 1, 2022 - June 30, 2023

| Tier Level | United Healthcare Dental (DHMO Plan D125H) | | Delta Dental (PPO Plan) | | Vision Service Plan (VSP) | |
|------------------|---|--------------|-------------------------|---------------|---------------------------|--------------|
| | From | To | From | To | From | To |
| Retiree Only | 19.47 | 18.18 | 42.60 | 42.60 | 6.48 | 6.48 |
| Retiree + One | 28.42 | 26.50 | 79.99 | 79.99 | 12.52 | 12.52 |
| Retiree + Family | 44.24 | 41.21 | 107.02 | 107.02 | 14.63 | 14.63 |