

2020 Dental Rates

Biweekly (26 Pays)

United Concordia Dental DHMO – Biweekly Rates				United Concordia Dental DPPO – Biweekly Rates			
Coverage Level	Total Cost	City Cost	Employee Cost	Coverage Level	Total Cost	City Cost	Employee Cost
Participant Only	\$ 5.93	\$ 5.93	\$ -	Participant Only	\$ 12.36	\$ 5.93	\$ 6.43
Participant + Child	\$ 11.69	\$ 11.69	\$ -	Participant + Child	\$ 20.99	\$ 11.69	\$ 9.30
Participant + Spouse	\$ 11.87	\$ 11.87	\$ -	Participant + Spouse	\$ 24.71	\$ 11.87	\$ 12.84
Participant + Family	\$ 16.93	\$ 16.93	\$ -	Participant + Family	\$ 34.57	\$ 16.93	\$ 17.64

Weekly (52 Pays)

United Concordia Dental DHMO – Weekly Rates				United Concordia Dental DPPO – Weekly Rates			
Coverage Level	Total Cost	City Cost	Employee Cost	Coverage Level	Total Cost	City Cost	Employee Cost
Participant Only	\$ 2.97	\$ 2.97	\$ -	Participant Only	\$ 6.18	\$ 2.97	\$ 3.21
Participant + Child	\$ 5.84	\$ 5.84	\$ -	Participant + Child	\$ 10.49	\$ 5.84	\$ 4.65
Participant + Spouse	\$ 5.93	\$ 5.93	\$ -	Participant + Spouse	\$ 12.35	\$ 5.93	\$ 6.42
Participant + Family	\$ 8.47	\$ 8.47	\$ -	Participant + Family	\$ 17.28	\$ 8.46	\$ 8.82

21-Pays - Biweekly (10-Months)

United Concordia Dental DHMO – 21-Pays (Biweekly) Rates				United Concordia Dental DPPO – 21-Pays (Biweekly) Rates			
Coverage Level	Total Cost	City Cost	Employee Cost	Coverage Level	Total Cost	City Cost	Employee Cost
Participant Only	\$ 7.34	\$ 7.34	\$ -	Participant Only	\$ 15.30	\$ 7.34	\$ 7.96
Participant + Child	\$ 14.47	\$ 14.47	\$ -	Participant + Child	\$ 25.98	\$ 14.47	\$ 11.51
Participant + Spouse	\$ 14.69	\$ 14.69	\$ -	Participant + Spouse	\$ 30.59	\$ 14.69	\$ 15.90
Participant + Family	\$ 20.97	\$ 20.97	\$ -	Participant + Family	\$ 42.80	\$ 20.97	\$ 21.83

Monthly (12-Months)

United Concordia Dental DHMO – Monthly Rates				United Concordia Dental DPPO – Monthly Rates			
Coverage Level	Total Cost	City Cost	Employee Cost	Coverage Level	Total Cost	City Cost	Employee Cost
Participant Only	\$ 12.85	\$ 12.85	\$ -	Participant Only	\$ 26.78	\$ 12.85	\$ 13.93
Participant + Child	\$ 25.32	\$ 25.32	\$ -	Participant + Child	\$ 45.47	\$ 25.32	\$ 20.15
Participant + Spouse	\$ 25.71	\$ 25.71	\$ -	Participant + Spouse	\$ 53.53	\$ 25.71	\$ 27.82
Participant + Family	\$ 36.69	\$ 36.69	\$ -	Participant + Family	\$ 74.90	\$ 36.69	\$ 38.21