



2022 Dental and Vision Rates

FIRE MANAGEMENT UNIT				
	Monthly Premium	City's Monthly Contribution	Employee's Monthly Contribution	Employee's Pay Period Contribution
DELTA DENTAL PPO				
▪ Single	\$52.72	\$45.78	\$6.94	\$3.47
▪ Two Party	\$105.44	\$45.78	\$59.66	\$29.83
▪ Family	\$131.80	\$45.78	\$86.02	\$43.01
DELTA DENTAL HMO				
▪ Single	\$15.52	\$15.52	\$0.00	\$0.00
▪ Two Party	\$31.03	\$31.03	\$0.00	\$0.00
▪ Family	\$45.78	\$45.78	\$0.00	\$0.00
VSP (ANTHEM PPO & CAL CARE)				
▪ Single	\$8.05	\$8.05	\$0.00	\$0.00
▪ Two Party	\$12.21	\$12.21	\$0.00	\$0.00
▪ Family	\$22.31	\$22.31	\$0.00	\$0.00