

**DENTAL /VISION
SUPPORT PERSONNEL**

DENTAL RATES (ADN)

		Hours worked per day			
		4-5.9	6-7.9		
		50%	25%	COBRA	
monthly premium					
Non Coordinaton of Benefit Plan (Class 5)	(80/80/50)	45.07	22.54	11.27	45.97
Coordination of Benefits Plan (Class 6)	(50/50/50)	41.51	20.76	10.38	42.34

VISION RATES--003 (SET SEG)

		Hours worked per day			
		4-5.9	6-7.9		
		50%	25%	COBRA	
monthly premium					
SINGLE		3.17	1.59	0.79	3.23
FAMILY (2+)		9.78	4.89	2.45	9.98