

2020 MONTHLY HEALTH AND DENTAL RATES SPOC-Covered

	Code	Total	State Share	Employee Share
Delta Dental				
Single	DS400	\$34.70	\$34.70	\$0.00
Family	DS600	\$87.26	\$68.26	\$19.00
DS Contract Holder	DS800	\$43.63	\$34.13	\$9.50
DS Contributing Spouse	DS810	\$43.63	\$34.13	\$9.50