



**Employee Dental & Vision Election Sheet**  
 Effective January 1, 2021 through December 31, 2021

Dental Care Plus/CORE PLAN

<u>Type of Coverage</u>	<u>Employee</u>	<u>Employee + Spouse</u>	<u>Employee + Child(ren)</u>	<u>Family</u>
Premium	\$20.50	\$41.01	\$45.21	\$65.15
Employer Contribution	\$20.50	\$20.50	\$20.50	\$20.50
<b>Employee Pays/Monthly Payroll Deduction:</b>	<b>\$0.00</b>	<b>\$20.51</b>	<b>\$24.71</b>	<b>\$44.65</b>

Dental Care Plus/BUY-UP PLAN

<u>Type of Coverage</u>	<u>Employee</u>	<u>Employee + Spouse</u>	<u>Employee + Child(ren)</u>	<u>Family</u>
Premium	\$27.93	\$55.89	\$62.24	\$89.98
Employer Contribution	\$20.50	\$20.50	\$20.50	\$20.50
<b>Employee Pays/Monthly Payroll Deduction:</b>	<b>\$7.43</b>	<b>\$35.39</b>	<b>\$41.74</b>	<b>\$69.18</b>

Avesis VISION PLAN

<u>Type of Coverage</u>	<u>Employee</u>	<u>Employee + Spouse</u>	<u>Employee + Child(ren)</u>	<u>Family</u>
Premium	\$7.12	\$12.46	\$13.97	\$18.87
Employer Contribution	\$7.12	\$7.12	\$7.12	\$7.12
<b>Employee Pays/Monthly Payroll Deduction:</b>	<b>\$0.00</b>	<b>\$5.34</b>	<b>\$6.85</b>	<b>\$11.75</b>