

**University System of New Hampshire Dental Rates
75% - 100% Time Employees
Effective January 1, 2017**

		Bi-Weekly	Employee Monthly	Annual	Monthly COBRA	Bi-Weekly	Two Person Monthly	Annual	Monthly COBRA	Bi-Weekly	Family Monthly	Annual	Monthly COBRA
Delta Dental Basic Option	Employee	\$ -	\$ -	\$ -		\$ 11.49	\$ 24.90	\$ 298.80		\$ 26.69	\$ 57.83	\$ 693.96	
	Employer		\$ 28.74	\$ 344.88			\$ 28.74	\$ 344.88			\$ 28.74	\$ 344.88	
	Total		\$ 28.74	\$ 344.88	\$ 29.31		\$ 53.64	\$ 643.68	\$ 54.71		\$ 86.57	\$ 1,038.84	\$88.30
Delta Dental High Option	Employee	\$ 11.43	\$ 24.76	\$ 297.12		\$ 32.77	\$ 71.01	\$ 852.12		\$ 63.00	\$ 136.49	\$ 1,637.88	
	Employer		\$ 28.74	\$ 344.88			\$ 28.74	\$ 344.88			\$ 28.74	\$ 344.88	
	Total		\$ 53.50	\$ 642.00	\$ 54.57		\$ 99.75	\$ 1,197.00	\$ 101.75		\$ 165.23	\$ 1,982.76	\$168.53

Assumes 100% time and 26 Pay periods