

**University System of New Hampshire Dental Rates**  
**75% - 100% Time Employees**  
**Effective January 1, 2026**

		Employee				Two Person				Family			
		Bi-Weekly	Monthly	Annual	Monthly COBRA	Bi-Weekly	Monthly	Annual	Monthly COBRA	Bi-Weekly	Monthly	Annual	Monthly COBRA
<b>Delta Dental</b>	Employee	\$ 16.69	\$ 36.17	\$ 434.04	\$ 36.89	\$ 31.22	\$ 67.64	\$ 811.68	\$ 68.99	\$ 50.26	\$ 108.89	\$ 1,306.68	\$111.07
<b>Basic Option</b>													
<b>Delta Dental</b>	Employee	\$ 33.42	\$ 72.40	\$ 868.80	\$ 73.85	\$ 62.15	\$ 134.66	\$ 1,615.92	\$ 137.35	\$ 103.26	\$ 223.72	\$ 2,684.64	\$228.19
<b>High Option</b>													

**Assumes 26 Pay periods**