

Retiree Dental & Vision Rates

HCPSS Monthly Dental Rates 2016

Coverage	Monthly Rates
Delta Dental—PPO	
Individual	\$34.94
Parent/Child(ren)	\$54.01
Husband/Wife	\$75.35
Family	\$100.27
Cigna DHMO	
Individual	\$11.18
Parent/Child	\$25.07
Husband/Wife	\$19.00
Family	\$35.29

HCPSS Monthly Vision Rates 2016

Coverage	Monthly Rates
VSPVision	
Individual	\$6.90
Parent/Child(ren)	\$9.39
Husband/Wife	\$13.80
Family	\$17.54