

## HCPSS Annual Dental Rates 2024

Coverage	<u>Annual Rates</u>	<u>Per Pay, 20 Periods</u>
<b>CIGNA — DPPO</b>		
Employee	\$493.80	\$24.69
Employee/Child(ren)	\$798.96	\$39.95
Employee/Spouse	\$1,138.80	\$56.94
Family	\$1,536.96	\$76.85

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<b>Aetna DHMO</b>		
Employee	\$143.88	\$7.19
Employee/Child(ren)	\$322.80	\$16.14
Employee/Spouse	\$244.68	\$12.23
Family	\$454.20	\$22.71

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## HCPSS Annual Vision Rates 2024

Coverage	<u>Annual Rates</u>	<u>Per Pay, 20 Periods</u>
<b>VSP Vision</b>		
Employee	\$82.68	\$4.13
Employee/Child(ren)	\$112.44	\$5.62
Employee/Spouse	\$165.48	\$8.27
Family	\$209.88	\$10.49