

Town of West Boylston
Insurance Premium Rates - DENTAL INSURANCE Effective July 1, 2023 - June 30, 2024

<u>Altus Dental</u>	<u>All Employees</u>
	<u>High</u>
	<u>Plan</u>
<u>Family</u>	
Total Monthly Premium Cost	\$139.98
Employee / Retiree Monthly Cost (<u>100%</u>)	\$139.98
Bi-Weekly Payroll Deduction Amount	\$69.99
<u>2-Person</u>	
Total Monthly Premium Cost	\$97.15
Employee / Retiree Monthly Cost (<u>100%</u>)	\$97.15
Bi-Weekly Payroll Deduction Amount	\$48.58
<u>Individual</u>	
Total Monthly Premium Cost	\$48.58
Employee / Retiree Monthly Cost (<u>100%</u>)	\$48.58
Bi-Weekly Payroll Deduction Amount	\$24.29