



PERACare Active Monthly Dental and Vision Rates

Plan Years January 1, 2009, and July 1, 2009



CIGNA Dental

	Dental HMO	Dental PPO
Employee Only	\$12.63	\$26.63
Employee + Spouse	\$23.70	\$53.38
Employee + Child(ren)	\$24.78	\$61.38
Employee + Spouse + Child(ren)	\$37.65	\$85.65

VSP Vision

	PPO #1	PPO #2	PPO #3
Employee Only	\$6.64	\$4.47	\$0.73
Employee + Spouse	\$10.64	\$7.19	\$1.14
Employee + Child(ren)	\$10.84	\$7.35	\$1.17
Employee + Spouse + Child(ren)	\$17.50	\$11.83	\$1.90