

# SEEM Collaborative

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## Guardian Dental

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The following rates are effective December 1, 2016 and continue through November 30, 2017.

*Note: The rates in effect are the same rates that were in effect for the period covering December 1, 2015 through November 30, 2016*

Rates quoted are per pay period and are deducted 24 times per year.

<u>Dental Insurance Coverage</u>	<u>December 1 2016 - November 30, 2017</u>
Employee	\$19.29 per pay period
Employee + 1 dependent	\$38.46 per pay period
Family	\$66.65 per pay period

<u>Cobra Dental Insurance</u>	<u>December 1 2016 - November 30, 2017</u>
Employee	\$19.67 per pay period
Employee + 1 dependent	\$39.22 per pay period
Family	\$67.98 per pay period