DENTAL INSURANCE							
Premium Co-Pay Schedule							
Eligibility	Eligik	Eligible full-time regular employees hired on or after July 1, 2013.					
Pace pays for	95	95% of individual coverage and 70% of dependent coverage					
Coverage	Monti	nly Premium		Pace		Employee	
Individual	\$	30.63	\$	29.10	\$	1.53	
Family	\$	100.72	\$	71.15	\$	29.57	

Premium Co-Pay Schedule - Grandfathered Employees							
Eligibility	Eligible full-time regular employees hired prior to July 1, 2013						
Pace pays for	95% of individual coverage and 85% of dependent coverage						
Coverage	Monthly Premium	Pace	Employee				
Individual	\$ 30.63	\$ 29.10	\$ 1.53				
Family	\$ 100.72	\$ 88.68	\$ 12.04				