

RATE CHART & PAYMENT OPTIONS

WTU RETIREES CHAPTER - 2021 DENTAL / VISION BENEFITS RATE CHART

CHAPTER DUES	VISION (Single or Family)	DENTAL SINGLE	DENTAL FAMILY	TOTAL DUE
\$ 55.00				\$ 55.00
INDICATE DENTAL PLAN TYPE: IN-NETWORK or PPO				
\$ 55.00	\$ 264.48			\$ 319.48
\$ 55.00	\$ 264.48	\$ 497.28		\$ 816.76
\$ 55.00	\$ 264.48		\$ 994.56	\$ 1,314.04
\$ 55.00		\$ 497.28		\$ 552.28
\$ 55.00			\$ 994.56	\$ 1,049.56

WTU RETIREE CHAPTER – DENTAL / VISION BENEFITS PAYMENT OPTIONS

Use the Options Chart below to help you determine the cost of your benefits for 2021.
The chart includes all possible choices.

<u>Option 1</u> In Network Only Dental & Vision + Dues (Member Only)	\$ 816.76
<u>Option 2</u> In Network Only Dental & Vision + Dues (Family)	\$ 1,314.04
<u>Option 3</u> PPO Dental & Vision + Dues (Member Only)	\$ 816.76
<u>Option 4</u> PPO Dental & Vision + Dues (Member Only)	\$ 1,314.04
<u>Option 5</u> In Network Only Dental + Dues (Member Only)	\$ 552.28
<u>Option 6</u> In Network Only Dental + Dues (Family)	\$ 1,049.56
<u>Option 7</u> PPO Dental + Dues (Member Only)	\$ 552.28
<u>Option 8</u> PPO Dental + Dues (Family)	\$ 1,049.56
<u>Option 9</u> Vision + Dues (Member Only)	\$ 319.48
<u>Option 10</u> Vision + Dues (Family)	\$ 319.48
<u>Option 11</u> Union Membership Dues Only	\$ 55.00