

LOW PLAN			
DENTAL +/- VISION STAND-ALONE (with HARTFORD MEDICAL) - POST-65			
	Dental/Vision	Dental Only	Vision Only
Single	\$58.52	\$52.15	\$6.37
Two-Person	\$117.04	\$104.30	\$12.74
Family	\$175.56	\$156.45	\$19.11

LOW PLAN			
DENTAL +/- VISION STAND-ALONE (NO MEDICAL) UNDER 65			
	Dental/Vision	Dental Only	Vision Only
Single	\$64.26	\$56.40	\$7.86
Two-Person	\$124.26	\$108.54	\$15.72
Family	\$212.86	\$186.77	\$26.09

LOW PLAN			
DENTAL +/- VISION STAND-ALONE (NO MEDICAL) POST-65 and PRE-65 MEDICARE			
	Dental/Vision	Dental Only	Vision Only
Single	\$62.77	\$56.40	\$6.37
Two-Person	\$121.29	\$108.55	\$12.74
Family	\$179.81	\$160.70	\$19.11

HIGH PLAN			
DENTAL +/- VISION STAND-ALONE (with HARTFORD MEDICAL) - POST-65			
	Dental/Vision	Dental Only	Vision Only
Single	\$62.04	\$55.67	\$6.37
Two-Person	\$124.08	\$111.34	\$12.74
Family	\$186.12	\$167.01	\$19.11

HIGH PLAN			
DENTAL +/- VISION STAND-ALONE (NO MEDICAL) UNDER 65			
	Dental/Vision	Dental Only	Vision Only
Single	\$71.67	\$63.81	\$7.86
Two-Person	\$139.09	\$123.37	\$15.72
Family	\$238.80	\$212.71	\$26.09

HIGH PLAN			
DENTAL +/- VISION STAND-ALONE (NO MEDICAL) POST-65 and PRE-65 MEDICARE			
	Dental/Vision	Dental Only	Vision Only
Single	\$66.29	\$59.92	\$6.37
Two-Person	\$128.33	\$115.59	\$12.74
Family	\$190.37	\$171.26	\$19.11