

<b>MONTHLY DENTAL PREMIUMS</b>	<b>PASSIVE PPO 2000</b>	<b>DENTAL PPO</b>	<b>DENTAL HMO</b>
Participant Only	\$48	\$39.00	\$14
Participant Plus One	\$96	\$79	\$26
Family	\$144	\$118	\$45