



Guardian – Voluntary Dental Insurance
Monthly Premium Rates for Plan Period
January 1, 2019 – December 31, 2019

These rates reflect a **0%** increase over the 2018 plan year.

Employee Only	\$39.82
Employee + Child(ren)	\$91.72
Employee + Spouse	\$79.68
Family Rate	\$131.58

COBRA Rates:

Employee Only:	\$40.62
Employee + Child(ren)	\$93.55
Employee + Spouse	\$81.27
Family	\$134.21