2025 Dental Plan Semi-Monthly Rates

For employees represented by the San Jose Police Officers' Association and the International Association of Fire Fighters, Local 230

Effective from 1/1/2025 (PP 1) through 12/31/2025 (PP 26)
Dental plan premiums are deducted the first 2 paydays of each month and are pre-tax.

Delta Dental Plans

Total

Delita Delital Flails		
	Delta Dental PPO	DeltaCare HMO
100% Benefits: Full-time emplo	oyees including RWW employees that work 35-39	hours
Employee Contribution	\$2.65	\$0.00
City Contribution	\$50.30	\$20.91
Total	\$52.95	\$20.91
75% Benefits: Full-time employ	ees including RWW employees that work 30-34 h	ours
Employee Contribution	\$15.22	\$5.23
City Contribution	\$37.73	\$15.68
Total	\$52.95	\$20.91
62.5% Benefits: Full-time emplo	oyees including RWW employees that work 25-29	hours
Employee Contribution	\$21.51	\$7.84
City Contribution	\$31.44	\$13.07
Total	\$52.95	\$20.91
50% Benefits: Full-time employ	yees including RWW employees that work 20-24 h	ours
Employee Contribution	\$27.80	\$10.45
City Contribution	\$25.15	\$10.46

DENTAL IN-LIEU PLAN PAYMENTS Payment in-lieu of coverage is available for qualified enrollees (full-time and RWW who work 35+ hours) Payments are made every payday and are subject to tax withholding		
If eligible for EE only coverage If eligible for EE+SP/DP and/or Child(ren) coverage:	\$19.95 \$19.95	

\$20.91

\$52.95