



State of Connecticut - Office of the State Comptroller

Healthcare Policy & Benefit Services Division

July 2024 - June 2025 Biweekly Dental Insurance Rates

Administered By
CIGNA

		Total Monthly Premium	Monthly State Share	Monthly Employee Share	BW State Share	BW Employee Share
Basic Dental Plan	Employee Only	\$40.83	\$40.83	\$0.00	\$18.84	\$0.00
	Employee +1	\$124.53	\$99.42	\$25.11	\$45.89	\$11.59
	Family	\$124.53	\$99.42	\$25.11	\$45.89	\$11.59
	FLES	\$83.70	\$70.84	\$12.86	\$32.70	\$5.94
Enhanced Dental Plan	Employee Only	\$34.49	\$34.49	\$0.00	\$15.92	\$0.00
	Employee +1	\$105.19	\$83.98	\$21.21	\$38.76	\$9.79
	Family	\$105.19	\$83.98	\$21.21	\$38.76	\$9.79
	FLES	\$70.70	\$59.84	\$10.86	\$27.62	\$5.01
Dental HMO	Employee Only	\$22.73	\$22.73	\$0.00	\$10.49	\$0.00
	Employee +1	\$50.01	\$41.83	\$8.18	\$19.31	\$3.78
	Family	\$61.37	\$49.78	\$11.59	\$22.98	\$5.35
	FLES	\$38.64	\$33.87	\$4.77	\$15.63	\$2.20
Judges Plan	Employee Only	\$42.67	\$40.83	\$1.84	\$18.84	\$0.85
	Employee +1	\$129.72	\$99.42	\$30.30	\$45.89	\$13.98
	Family	\$129.72	\$99.42	\$30.30	\$45.89	\$13.98
	FLES	\$87.05	\$70.84	\$16.21	\$32.70	\$7.48
Total Care DHMO	Employee Only	\$28.36	\$28.36	\$0.00	\$13.09	\$0.00
	Employee +1	\$62.39	\$52.18	\$10.21	\$24.08	\$4.71
	Family	\$76.57	\$62.11	\$14.46	\$28.67	\$6.67
	FLES	\$48.21	\$42.26	\$5.95	\$19.50	\$2.75