

Closed specialty benefits product rates

For businesses of 1-100 eligible employees

Please note the following concerning closed specialty plans

Closed plans are not available to new groups; closed plan rates only apply to groups renewing into a closed plan.

This rate manual does not reflect any discount a group may obtain through the Bundled Discount Savings program.

Dental In-Network Only (Regions 1, 3, 4, 5, 6, 7, and 9)*

Rates are for groups with 1-50 eligible employees

ID	Dental In-Network Only 1-50 (Regions 1, 3, 4, 5, 6, 7, and 9)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D317	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$41.90	\$87.50	\$98.50	\$128.30
D318	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$38.70	\$81.00	\$91.20	\$118.70

Dental In-Network Only (Regions 1, 3, 4, 5, 6, 7, and 9)*

Rates are for groups with 51-100 eligible employees

ID	Dental In-Network Only 51-100 (Regions 1, 3, 4, 5, 6, 7, and 9)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D387	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$31.40	\$65.70	\$73.80	\$96.20
D388	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$29.10	\$60.70	\$68.40	\$89.10

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Dental In-Network Only (Regions 2, 8, 10, 11, 13, and 14)*

Rates are for groups with 1-50 eligible employees

ID	Dental In-Network Only 1-50 (Regions 2, 8, 10, 11, 13, and 14)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D317	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$45.80	\$91.30	\$115.80	\$138.20
D318	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$42.30	\$84.50	\$107.20	\$127.90

Dental In-Network Only (Regions 2, 8, 10, 11, 13, and 14)*

Rates are for groups with 51-100 eligible employees

ID	Dental In-Network Only 51-100 (Regions 2, 8, 10, 11, 13, and 14)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D387	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$34.30	\$68.50	\$86.90	\$103.60
D388	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$31.70	\$63.50	\$80.50	\$95.90

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Dental In-Network Only (Regions 12, 15, 16, 17, 18, and 19)*

Rates are for groups with 1-50 eligible employees

ID	Dental In-Network Only (Regions 12, 15, 16, 17, 18, and 19)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D317	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$45.80	\$91.30	\$117.20	\$136.90
D318	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$42.30	\$84.50	\$108.40	\$126.70

Dental In-Network Only (Regions 12, 15, 16, 17, 18, and 19)*

Rates are for groups with 51-100 eligible employees

ID	Dental In-Network Only (Regions 12, 15, 16, 17, 18, and 19)*	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D387	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/Ortho	\$34.30	\$68.50	\$87.80	\$102.80
D388	Smile SM In-Network Only Dental Plan 50/1500/Endo-Perio 80%/No Ortho	\$31.70	\$63.50	\$81.30	\$95.00

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Dental PPO (Regions 1, 4, 5, 6, and 9)

Rates are for groups with 1-50 eligible employees

ID	Dental PPO (Regions 1, 4, 5, 6, and 9)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D067	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$36.60	\$72.30	\$89.40	\$122.60
D272	Smile SM Basic 75/1000/No Ortho/Mac	\$30.90	\$62.00	\$74.70	\$108.20
D273	Smile SM Value 50/1500/No Ortho/MAC	\$39.20	\$82.10	\$92.60	\$120.30
D275	Smile SM Plus 50/1500/Ortho/Mac	\$54.90	\$109.40	\$137.40	\$160.60
D280	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$86.50	\$173.10	\$219.10	\$293.90
D497	Smile SM 50/1500/No Ortho/Mac/NR	\$40.00	\$79.00	\$97.80	\$117.30
D499	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$26.60	\$53.50	\$67.60	\$91.50
D501	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$28.70	\$57.20	\$72.10	\$95.90
D507	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$48.50	\$97.30	\$123.20	\$164.30
D513	Smile SM Plus 50/1500/Ortho/Mac/NR	\$47.10	\$94.20	\$118.90	\$138.70
D517	Smile SM Value 50/1500/No Ortho/MAC/NR	\$35.80	\$72.30	\$89.80	\$107.80
D525	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$34.20	\$68.10	\$85.60	\$114.00
D527	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$73.60	\$148.10	\$186.50	\$242.40
D529	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$58.70	\$118.10	\$148.70	\$193.30
D531	Smile SM Basic 50/1000/No Ortho/MAC	\$32.50	\$65.20	\$82.20	\$111.40
D537	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$43.10	\$86.20	\$108.70	\$126.90
D539	Smile SM Plus Gold 50/1500/Ortho/U80	\$66.00	\$131.30	\$165.10	\$222.40
D576	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$88.30	\$175.60	\$220.80	\$297.30
D578	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$80.10	\$159.30	\$200.50	\$269.80
D582	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$75.10	\$149.50	\$188.10	\$253.20

Dental PPO (Regions 3 and 7)

Rates are for groups with 1-50 eligible employees

ID	Dental PPO (Regions 3 and 7)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D067	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$36.60	\$72.30	\$89.40	\$122.60
D272	Smile SM Basic 75/1000/No Ortho/Mac	\$30.90	\$62.00	\$74.70	\$108.20
D273	Smile SM Value 50/1500/No Ortho/MAC	\$39.20	\$82.10	\$92.60	\$120.30
D275	Smile SM Plus 50/1500/Ortho/Mac	\$54.90	\$109.40	\$137.40	\$160.60
D280	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$86.50	\$173.10	\$219.10	\$293.90
D497	Smile SM 50/1500/No Ortho/Mac/NR	\$42.40	\$83.60	\$103.50	\$124.30
D499	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$28.30	\$56.80	\$71.50	\$96.90
D501	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$30.40	\$60.60	\$76.30	\$101.60
D507	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$51.40	\$103.00	\$130.40	\$173.90
D513	Smile SM Plus 50/1500/Ortho/Mac/NR	\$49.90	\$99.80	\$125.90	\$146.90
D517	Smile SM Value 50/1500/No Ortho/MAC/NR	\$38.00	\$76.60	\$95.00	\$114.20
D525	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$36.20	\$72.10	\$90.60	\$120.70
D527	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$77.90	\$157.00	\$197.50	\$256.80
D529	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$62.10	\$125.10	\$157.60	\$204.80
D531	Smile SM Basic 50/1000/No Ortho/MAC	\$34.40	\$69.10	\$87.10	\$117.90
D537	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$45.60	\$91.30	\$115.10	\$134.30
D539	Smile SM Plus Gold 50/1500/Ortho/U80	\$69.90	\$139.00	\$174.90	\$235.50
D576	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$93.40	\$185.90	\$233.80	\$314.80
D578	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$84.80	\$168.70	\$212.10	\$285.60
D582	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$79.60	\$158.40	\$199.10	\$268.10

Dental PPO (Regions 2, 8, 10, 11, 13, and 14)

Rates are for groups with 1-50 eligible employees

ID	Dental PPO (Regions 2, 8, 10, 11, 13, and 14)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D067	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$34.10	\$66.50	\$84.50	\$100.70
D272	Smile SM Basic 75/1000/No Ortho/Mac	\$30.00	\$61.10	\$75.90	\$90.80
D273	Smile SM Value 50/1500/No Ortho/MAC	\$43.00	\$85.70	\$108.80	\$129.60
D275	Smile SM Plus 50/1500/Ortho/Mac	\$60.50	\$121.20	\$152.40	\$181.70
D280	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$90.50	\$179.80	\$225.60	\$304.30
D497	Smile SM 50/1500/No Ortho/Mac/NR	\$42.40	\$83.60	\$103.50	\$124.30
D499	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$28.30	\$56.80	\$71.50	\$96.90
D501	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$30.40	\$60.60	\$76.30	\$101.60
D507	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$51.40	\$103.00	\$130.40	\$173.90
D513	Smile SM Plus 50/1500/Ortho/Mac/NR	\$49.90	\$99.80	\$125.90	\$146.90
D517	Smile SM Value 50/1500/No Ortho/MAC/NR	\$38.00	\$76.60	\$95.00	\$114.20
D525	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$36.20	\$72.10	\$90.60	\$120.70
D527	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$77.90	\$157.00	\$197.50	\$256.80
D529	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$62.10	\$125.10	\$157.60	\$204.80
D531	Smile SM Basic 50/1000/No Ortho/MAC	\$34.40	\$69.10	\$87.10	\$117.90
D537	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$45.60	\$91.30	\$115.10	\$134.30
D539	Smile SM Plus Gold 50/1500/Ortho/U80	\$69.90	\$139.00	\$174.90	\$235.50
D576	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$93.40	\$185.90	\$233.80	\$314.80
D578	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$84.80	\$168.70	\$212.10	\$285.60
D582	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$79.60	\$158.40	\$199.10	\$268.10

Dental PPO (Regions 12, 16, 17, and 19)

Rates are for groups with 1-50 eligible employees

ID	Dental PPO (Regions 12, 16, 17, and 19)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D067	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$39.80	\$79.70	\$100.70	\$134.80
D272	Smile SM Basic 75/1000/No Ortho/Mac	\$32.10	\$64.50	\$82.90	\$111.50
D273	Smile SM Value 50/1500/No Ortho/MAC	\$43.00	\$85.70	\$110.10	\$128.60
D275	Smile SM Plus 50/1500/Ortho/Mac	\$57.10	\$114.20	\$144.40	\$167.70
D280	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$90.50	\$179.80	\$225.60	\$304.30
D497	Smile SM 50/1500/No Ortho/Mac/NR	\$42.40	\$83.60	\$103.50	\$124.30
D499	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$28.30	\$56.80	\$71.50	\$96.90
D501	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$30.40	\$60.60	\$76.30	\$101.60
D507	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$51.40	\$103.00	\$130.40	\$173.90
D513	Smile SM Plus 50/1500/Ortho/Mac/NR	\$49.90	\$99.80	\$125.90	\$146.90
D517	Smile SM Value 50/1500/No Ortho/MAC/NR	\$38.00	\$76.60	\$95.00	\$114.20
D525	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$36.20	\$72.10	\$90.60	\$120.70
D527	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$77.90	\$157.00	\$197.50	\$256.80
D529	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$62.10	\$125.10	\$157.60	\$204.80
D531	Smile SM Basic 50/1000/No Ortho/MAC	\$34.40	\$69.10	\$87.10	\$117.90
D537	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$45.60	\$91.30	\$115.10	\$134.30
D539	Smile SM Plus Gold 50/1500/Ortho/U80	\$69.90	\$139.00	\$174.90	\$235.50
D576	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$93.40	\$185.90	\$233.80	\$314.80
D578	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$84.80	\$168.70	\$212.10	\$285.60
D582	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$79.60	\$158.40	\$199.10	\$268.10

Dental PPO (Regions 15 and 18)

Rates are for groups with 1-50 eligible employees

ID	Dental PPO (Regions 15 and 18)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D067	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$39.80	\$79.70	\$100.70	\$134.80
D272	Smile SM Basic 75/1000/No Ortho/Mac	\$32.10	\$64.50	\$82.90	\$111.50
D273	Smile SM Value 50/1500/No Ortho/MAC	\$43.00	\$85.70	\$110.10	\$128.60
D275	Smile SM Plus 50/1500/Ortho/Mac	\$57.10	\$114.20	\$144.40	\$167.70
D280	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$90.50	\$179.80	\$225.60	\$304.30
D497	Smile SM 50/1500/No Ortho/Mac/NR	\$44.10	\$87.00	\$107.70	\$129.20
D499	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$29.40	\$59.10	\$74.40	\$100.70
D501	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$31.70	\$63.00	\$79.30	\$105.70
D507	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$53.40	\$107.10	\$135.70	\$181.10
D513	Smile SM Plus 50/1500/Ortho/Mac/NR	\$51.90	\$103.70	\$130.90	\$152.80
D517	Smile SM Value 50/1500/No Ortho/MAC/NR	\$39.40	\$79.60	\$98.90	\$118.90
D525	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$37.70	\$74.90	\$94.30	\$125.60
D527	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$81.10	\$163.20	\$205.50	\$267.10
D529	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$64.70	\$130.20	\$163.90	\$213.10
D531	Smile SM Basic 50/1000/No Ortho/MAC	\$35.80	\$72.00	\$90.60	\$122.70
D537	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$47.50	\$94.90	\$119.70	\$139.80
D539	Smile SM Plus Gold 50/1500/Ortho/U80	\$72.70	\$144.70	\$181.90	\$244.90
D576	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$97.20	\$193.30	\$243.40	\$327.50
D578	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$88.20	\$175.50	\$220.70	\$297.20
D582	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$82.80	\$164.70	\$207.20	\$279.00

Dental PPO (Regions 1, 4, 5, 6, and 9)

Rates are for groups with 51-100 eligible employees

ID	Dental PPO (Regions 1, 4, 5, 6, and 9)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D364	Smile SM Basic 75/1000/No Ortho/Mac	\$23.30	\$46.50	\$56.00	\$81.20
D365	Smile SM Value 50/1500/No Ortho/MAC	\$29.50	\$61.60	\$69.40	\$90.30
D367	Smile SM Plus 50/1500/Ortho/Mac	\$41.20	\$82.10	\$103.00	\$120.40
D372	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$64.80	\$129.90	\$164.30	\$220.50
D373	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$27.40	\$54.30	\$67.00	\$91.90
D498	Smile SM 50/1500/No Ortho/Mac/NR	\$30.00	\$59.30	\$73.30	\$87.90
D500	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$20.00	\$40.20	\$50.70	\$68.60
D503	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$21.60	\$42.90	\$54.00	\$72.00
D508	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$36.30	\$72.90	\$92.30	\$123.40
D514	Smile SM Plus 50/1500/Ortho/Mac/NR	\$35.40	\$70.60	\$89.20	\$104.10
D518	Smile SM Value 50/1500/No Ortho/MAC/NR	\$26.90	\$54.20	\$67.30	\$80.90
D526	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$25.70	\$51.00	\$64.20	\$85.50
D528	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$55.20	\$111.20	\$139.90	\$181.80
D530	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$44.00	\$88.70	\$111.60	\$145.10
D532	Smile SM Basic 50/1000/No Ortho/MAC	\$24.40	\$48.90	\$61.60	\$83.50
D538	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$32.30	\$64.60	\$81.40	\$95.10
D540	Smile SM Plus Gold 50/1500/Ortho/U80	\$49.50	\$98.40	\$123.90	\$166.80
D577	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$66.10	\$131.50	\$165.70	\$223.00
D579	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$60.00	\$119.40	\$150.30	\$202.40
D583	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$56.30	\$112.00	\$141.10	\$190.00

Dental PPO (Regions 3 and 7)

Rates are for groups with 51-100 eligible employees

ID	Dental PPO (Regions 3 and 7)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D364	Smile SM Basic 75/1000/No Ortho/Mac	\$23.30	\$46.50	\$56.00	\$81.20
D365	Smile SM Value 50/1500/No Ortho/MAC	\$29.50	\$61.60	\$69.40	\$90.30
D367	Smile SM Plus 50/1500/Ortho/Mac	\$41.20	\$82.10	\$103.00	\$120.40
D372	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$64.80	\$129.90	\$164.30	\$220.50
D373	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$27.40	\$54.30	\$67.00	\$91.90
D498	Smile SM 50/1500/No Ortho/Mac/NR	\$31.70	\$62.80	\$77.60	\$93.30
D500	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$21.20	\$42.60	\$53.60	\$72.70
D503	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$22.90	\$45.50	\$57.20	\$76.20
D508	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$38.50	\$77.20	\$97.80	\$130.50
D514	Smile SM Plus 50/1500/Ortho/Mac/NR	\$37.40	\$74.80	\$94.40	\$110.20
D518	Smile SM Value 50/1500/No Ortho/MAC/NR	\$28.50	\$57.40	\$71.30	\$85.70
D526	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$27.20	\$54.00	\$68.00	\$90.50
D528	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$58.40	\$117.70	\$148.10	\$192.60
D530	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$46.60	\$93.90	\$118.10	\$153.70
D532	Smile SM Basic 50/1000/No Ortho/MAC	\$25.80	\$51.80	\$65.20	\$88.50
D538	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$34.20	\$68.50	\$86.30	\$100.70
D540	Smile SM Plus Gold 50/1500/Ortho/U80	\$52.30	\$104.20	\$131.20	\$176.70
D577	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$70.10	\$139.40	\$175.40	\$236.10
D579	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$63.60	\$126.50	\$159.10	\$214.30
D583	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$59.70	\$118.70	\$149.40	\$201.20

Dental PPO (Regions 2, 8, 10, 11, 13, and 14)

Rates are for groups with 51-100 eligible employees

ID	Dental PPO (Regions 2, 8, 10, 11, 13, and 14)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D364	Smile SM Basic 75/1000/No Ortho/Mac	\$22.40	\$45.80	\$57.00	\$68.30
D365	Smile SM Value 50/1500/No Ortho/MAC	\$32.30	\$64.30	\$81.60	\$97.20
D367	Smile SM Plus 50/1500/Ortho/Mac	\$45.50	\$90.70	\$114.40	\$136.30
D372	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$67.90	\$134.80	\$169.30	\$228.30
D373	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$25.60	\$50.00	\$63.50	\$75.60
D498	Smile SM 50/1500/No Ortho/Mac/NR	\$31.70	\$62.80	\$77.60	\$93.30
D500	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$21.20	\$42.60	\$53.60	\$72.70
D503	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$22.90	\$45.50	\$57.20	\$76.20
D508	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$38.50	\$77.20	\$97.80	\$130.50
D514	Smile SM Plus 50/1500/Ortho/Mac/NR	\$37.40	\$74.80	\$94.40	\$110.20
D518	Smile SM Value 50/1500/No Ortho/MAC/NR	\$28.50	\$57.40	\$71.30	\$85.70
D526	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$27.20	\$54.00	\$68.00	\$90.50
D528	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$58.40	\$117.70	\$148.10	\$192.60
D530	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$46.60	\$93.90	\$118.10	\$153.70
D532	Smile SM Basic 50/1000/No Ortho/MAC	\$25.80	\$51.80	\$65.20	\$88.50
D538	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$34.20	\$68.50	\$86.30	\$100.70
D540	Smile SM Plus Gold 50/1500/Ortho/U80	\$52.30	\$104.20	\$131.20	\$176.70
D577	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$70.10	\$139.40	\$175.40	\$236.10
D579	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$63.60	\$126.50	\$159.10	\$214.30
D583	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$59.70	\$118.70	\$149.40	\$201.20

Dental PPO (Regions 12, 16, 17, and 19)

Rates are for groups with 51-100 eligible employees

ID	Dental PPO (Regions 12, 16, 17, and 19)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D364	Smile SM Basic 75/1000/No Ortho/Mac	\$24.10	\$48.40	\$62.10	\$83.60
D365	Smile SM Value 50/1500/No Ortho/MAC	\$32.30	\$64.30	\$82.60	\$96.40
D367	Smile SM Plus 50/1500/Ortho/Mac	\$42.80	\$85.60	\$108.30	\$125.80
D372	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$67.90	\$134.80	\$169.30	\$228.30
D373	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$29.90	\$59.70	\$75.60	\$101.10
D498	Smile SM 50/1500/No Ortho/Mac/NR	\$31.70	\$62.80	\$77.60	\$93.30
D500	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$21.20	\$42.60	\$53.60	\$72.70
D503	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$22.90	\$45.50	\$57.20	\$76.20
D508	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$38.50	\$77.20	\$97.80	\$130.50
D514	Smile SM Plus 50/1500/Ortho/Mac/NR	\$37.40	\$74.80	\$94.40	\$110.20
D518	Smile SM Value 50/1500/No Ortho/MAC/NR	\$28.50	\$57.40	\$71.30	\$85.70
D526	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$27.20	\$54.00	\$68.00	\$90.50
D528	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$58.40	\$117.70	\$148.10	\$192.60
D530	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$46.60	\$93.90	\$118.10	\$153.70
D532	Smile SM Basic 50/1000/No Ortho/MAC	\$25.80	\$51.80	\$65.20	\$88.50
D538	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$34.20	\$68.50	\$86.30	\$100.70
D540	Smile SM Plus Gold 50/1500/Ortho/U80	\$52.30	\$104.20	\$131.20	\$176.70
D577	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$70.10	\$139.40	\$175.40	\$236.10
D579	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$63.60	\$126.50	\$159.10	\$214.30
D583	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$59.70	\$118.70	\$149.40	\$201.20

Dental PPO (Regions 15 and 18)

Rates are for groups with 51-100 eligible employees

ID	Dental PPO (Regions 15 and 18)	Employee	Employee + spouse	Employee + child(ren)	Employee + family
D364	Smile SM Basic 75/1000/No Ortho/Mac	\$24.10	\$48.40	\$62.10	\$83.60
D365	Smile SM Value 50/1500/No Ortho/MAC	\$32.30	\$64.30	\$82.60	\$96.40
D367	Smile SM Plus 50/1500/Ortho/Mac	\$42.80	\$85.60	\$108.30	\$125.80
D372	Smile SM Deluxe Gold 50/1500/Ortho/U85	\$67.90	\$134.80	\$169.30	\$228.30
D373	Smile SM Basic Voluntary 75/1000/No Ortho/MAC	\$29.90	\$59.70	\$75.60	\$101.10
D498	Smile SM 50/1500/No Ortho/Mac/NR	\$33.00	\$65.20	\$80.90	\$97.00
D500	Smile SM Basic 75/1000/No Ortho/Mac/NR	\$22.00	\$44.30	\$55.80	\$75.60
D503	Smile SM Basic Voluntary 75/1000/No Ortho/MAC/NR	\$23.80	\$47.30	\$59.50	\$79.20
D508	Smile SM Deluxe 50/1500/Ortho/MAC/NR	\$40.10	\$80.40	\$101.80	\$135.80
D514	Smile SM Plus 50/1500/Ortho/Mac/NR	\$38.90	\$77.80	\$98.20	\$114.70
D518	Smile SM Value 50/1500/No Ortho/MAC/NR	\$29.60	\$59.70	\$74.20	\$89.20
D526	Smile SM Basic Voluntary 50/1000/No Ortho/MAC	\$28.30	\$56.20	\$70.70	\$94.20
D528	Smile SM Basic Voluntary 50/1500/Ortho/U80	\$60.70	\$122.40	\$154.10	\$200.40
D530	Smile SM Basic Voluntary 50/1000/No Ortho/U80	\$48.50	\$97.80	\$122.90	\$159.80
D532	Smile SM Basic 50/1000/No Ortho/MAC	\$26.90	\$53.90	\$68.00	\$92.00
D538	Smile SM Plus 50/1500/No Ortho/MAC/WP	\$35.60	\$71.20	\$89.80	\$104.80
D540	Smile SM Plus Gold 50/1500/Ortho/U80	\$54.50	\$108.40	\$136.50	\$183.80
D577	Smile SM Plus Gold 50/2500/Ortho/U90/ADV	\$72.80	\$145.00	\$182.30	\$245.80
D579	Smile SM Plus Gold 50/2500/No Ortho/U90/ADV	\$66.10	\$131.50	\$165.40	\$223.00
D583	Ultimate Dental PPO for Small Business 50/2000/No Ortho/U90	\$62.10	\$123.60	\$155.40	\$209.30

Vision 1-50

Rates are for groups with 1-50 eligible employees, closed plans only

ID	Vision 1-50	Employee	Employee + spouse	Employee + child(ren)	Employee + family
V519	Basic Vision for Small Business 15/25/120	\$7.80	\$14.60	\$13.50	\$19.10
V520	Basic Vision for Small Business 15/25/150	\$9.00	\$17.00	\$15.70	\$22.30
V522	Basic Vision Plus for Small Business 15/25/150/150	\$12.00	\$22.60	\$20.80	\$29.40
V523	Basic Vision Voluntary for Small Business 15/25/120	\$11.10	\$21.00	\$19.20	\$27.30
V271	Preferred Vision for Small Business 15/25/120	\$8.40	\$15.90	\$14.60	\$20.70
V272	Preferred Vision for Small Business 15/25/150	\$9.80	\$18.60	\$17.10	\$24.30
V274	Preferred Vision Plus for Small Business 15/25/150/150	\$12.90	\$24.30	\$22.30	\$31.60
V275	Preferred Vision Voluntary for Small Business 15/25/120	\$12.00	\$22.80	\$20.90	\$29.60
V278	Ultimate Vision for Small Business 15/25/120	\$12.00	\$22.80	\$20.90	\$29.60
V282	Ultimate Vision for Small Business 15/25/150	\$14.00	\$26.30	\$24.40	\$34.50
V280	Ultimate Vision Plus for Small Business 15/25/150/150	\$18.70	\$35.50	\$32.70	\$46.30
V281	Ultimate Vision Voluntary for Small Business 15/25/150	\$20.00	\$37.70	\$34.70	\$49.10

Underwritten by Blue Shield of California Life & Health Insurance Company.

Vision 51-100

Rates are for groups with 51-100 eligible employees, closed plans only

ID	Vision 51-100	Employee	Employee + spouse	Employee + child(ren)	Employee + family
V526	Basic Vision for Small Business 15/25/120	\$6.20	\$11.70	\$10.90	\$15.40
V527	Basic Vision for Small Business 15/25/150	\$7.20	\$13.60	\$12.50	\$17.80
V529	Basic Vision Plus for Small Business 15/25/150/150	\$9.40	\$18.00	\$16.60	\$23.40
V530	Basic Vision Voluntary for Small Business 15/25/120	\$8.90	\$16.80	\$15.50	\$21.90
V394	Preferred Vision for Small Business 15/25/120	\$6.80	\$12.80	\$11.70	\$16.60
V395	Preferred Vision for Small Business 15/25/150	\$7.90	\$14.80	\$13.70	\$19.40
V397	Preferred Vision Plus for Small Business 15/25/150/150	\$10.20	\$19.40	\$17.80	\$25.30
V398	Preferred Vision Voluntary for Small Business 15/25/120	\$9.50	\$18.10	\$16.70	\$23.70
V401	Ultimate Vision for Small Business 15/25/120	\$9.50	\$18.10	\$16.70	\$23.70
V405	Ultimate Vision for Small Business 15/25/150	\$11.20	\$21.20	\$19.50	\$27.50
V403	Ultimate Vision Plus for Small Business 15/25/150/150	\$15.10	\$28.40	\$26.10	\$37.00
V404	Ultimate Vision Voluntary for Small Business 15/25/150	\$15.90	\$30.20	\$27.70	\$39.30

Underwritten by Blue Shield of California Life & Health Insurance Company.



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