

**METLIFE INSURANCE**  
**IAFF AND SEIU 2026 DENTAL INSURANCE PREMIUM RATES**  
**FOR DENTAL PLAN COVERAGE EFFECTIVE 1/1/2026-12/31/2026**

CCSD covers 85% of employees and dependents' dental premiums of lower cost plan  
Employee covers 15% of premiums

Life insurance: CCSD pays 100% of Employee and Dependents' Life Insurance Premiums to Lincoln Life Insurance

	<b>85.00%</b>			<b>15.00%</b>	
	<b>Monthly Premium 2026</b>	<b>Monthly EmploYER Portion</b>	<b>24 pymts/yr EmploYER Portion</b>	<b>Monthly EmploYEE Portion</b>	<b>24 pymts/yr EmploYEE Portion</b>
<b>DENTAL &amp; VISION PREMIUMS</b>					
Employee Only	57.51	48.88	24.44	8.63	<b>4.31</b>
Yee + Spouse	114.69	97.49	48.74	17.20	<b>8.60</b>
Yee + Child (ren)	114.51	97.33	48.67	17.18	<b>8.59</b>
Yee + Family	181.88	154.60	77.30	27.28	<b>13.64</b>
<b>DENTAL PREMIUMS</b>	<b>Monthly</b>	<b>EmploYER</b>	<b>24 pymts/yr</b>	<b>EmploYEE</b>	<b>24 pymts/yr</b>
Employee Only	45.68	38.83	19.41	6.85	<b>3.43</b>
Yee + Spouse	90.98	77.33	38.67	13.65	<b>6.82</b>
Yee + Child (ren)	94.44	80.27	40.14	14.17	<b>7.08</b>
Yee + Family	148.78	126.46	63.23	22.32	<b>11.16</b>
<b>VISION PREMIUMS</b>	<b>Monthly</b>	<b>EmploYER</b>	<b>24 pymts/yr</b>	<b>EmploYEE</b>	<b>24 pymts/yr</b>
Employee Only	11.83	10.06	5.03	1.77	<b>0.89</b>
Yee + Spouse	23.71	20.15	10.08	3.56	<b>1.78</b>
Yee + Child (ren)	20.07	17.06	8.53	3.01	<b>1.51</b>
Yee + Family	33.10	28.14	14.07	4.97	<b>2.48</b>
<b>LIFE INSURANCE PREMIUMS</b>	<b>Monthly Premium 2026</b>	<b>Monthly EmploYER Portion</b>	<b>24 pymts/yr EmploYER Portion</b>	<b>Monthly EmploYEE Portion</b>	<b>24 pymts/yr EmploYEE Portion</b>
Employee Only	7.78	7.78	3.89	0.00	0.00
Yee + Spouse	8.72	8.72	4.36	0.00	0.00
Yee + Child (ren)	8.72	8.72	4.36	0.00	0.00
Yee + Family	8.72	8.72	4.36	0.00	0.00