

County of San Bernardino**Attachment B**

Retiree Medical and Dental Premium Rates for Plan Year

2021 Proposed 2021 Retiree Dental Premium Rates

Plan	Coverage Type	2020 Published Monthly Rate	2021 Published Monthly Rate	Dollar Change	Percent Change
DeltaCare USA DHMO	Retiree only	\$19.71	\$19.71	\$0.00	0.00%
	Retiree +1	\$30.47	\$30.47	\$0.00	0.00%
	Retiree +2 or more	\$43.41	\$43.41	\$0.00	0.00%
Delta Dental DPPO Low Option	Retiree only	\$44.10	\$44.10	\$0.00	0.00%
	Retiree +1	\$81.07	\$81.07	\$0.00	0.00%
	Retiree +2 or more	\$139.21	\$139.21	\$0.00	0.00%
Delta Dental DPPO High Option	Retiree only	\$61.93	\$61.93	\$0.00	0.00%
	Retiree +1	\$114.98	\$114.98	\$0.00	0.00%
	Retiree +2 or more	\$198.41	\$198.41	\$0.00	0.00%

NOTE: Published rates include a \$3.12 administrative fee