

**University System of New Hampshire Dental Rates
75% - 100% Time Employees
Effective January 1, 2025**

		Bi-Weekly	Employee Monthly	Annual	Monthly COBRA		Bi-Weekly	Two Person Monthly	Annual	Monthly COBRA		Bi-Weekly	Family Monthly	Annual	Monthly COBRA
Delta Dental Basic Option	Employee	\$ 15.90	\$ 34.45	\$ 413.40	\$ 35.14		\$ 29.73	\$ 64.42	\$ 773.04	\$ 65.71		\$ 47.86	\$ 103.70	\$ 1,244.40	\$105.77
Delta Dental High Option	Employee	\$ 31.82	\$ 68.95	\$ 827.40	\$ 70.33		\$ 59.19	\$ 128.25	\$ 1,539.00	\$ 130.82		\$ 98.34	\$ 213.07	\$ 2,556.84	\$217.33

Assumes 100% time and 26 Pay periods