

**2024 CONTRA COSTA COUNTY  
MONTHLY DENTAL PLAN PREMIUMS**

**RETIREES WHO WERE  
ELECTED OFFICIALS AND SWORN MGMT EMPLOYEES -  
UNREP FIRE SAFETY MGMT AT THE TIME OF RETIREMENT**

**DEDUCTIONS EFFECTIVE JANUARY 1, 2024**

<b>PLAN/COVERAGE DESCRIPTION</b>		<b>TOTAL MONTHLY PREMIUM</b>	<b>COUNTY MONTHLY SUBSIDY</b>	<b>EMPLOYEE MONTHLY SHARE</b>
<b>DELTA DENTAL PREMIER PPO - \$1,800 ANNUAL MAXIMUM</b>				
For CCHP Alternate A Plan	Retiree	\$46.52	\$41.17	\$5.35
	Retiree + 1	\$105.08	\$93.00	\$12.08
	Retiree + 2 or more	\$105.08	\$93.00	\$12.08
For CalPERS Health Plans	Retiree	\$46.52	\$34.02	\$12.50
	Retiree + 1	\$105.08	\$76.77	\$28.31
	Retiree + 2 or more	\$105.08	\$76.77	\$28.31
Without a Health Plan	Retiree	\$46.52	\$43.35	\$3.17
	Retiree + 1	\$105.08	\$97.81	\$7.27
	Retiree + 2 or more	\$105.08	\$97.81	\$7.27
<b>DELTA CARE (HMO)</b>				
For CCHP Alternate A Plan	Retiree	\$24.17	\$24.17	\$0.00
	Retiree + 1	\$52.23	\$52.23	\$0.00
	Retiree + 2 or more	\$52.23	\$52.23	\$0.00
For CalPERS Health Plans	Retiree	\$24.17	\$21.31	\$2.86
	Retiree + 1	\$52.23	\$46.05	\$6.18
	Retiree + 2 or more	\$52.23	\$46.05	\$6.18
Without a Health Plan	Retiree	\$24.17	\$24.17	\$0.00
	Retiree + 1	\$52.23	\$52.23	\$0.00
	Retiree + 2 or more	\$52.23	\$52.23	\$0.00