

**SHASTA-TRINTIY SCHOOLS INSURANCE GROUP
JPA DENTAL PLANS**

2009-10 RATE MATRIX

09-10: Urban Rates	Orthodontia Benefit (Lifetime Maximum) Delta Pays/Employee Pays						
	None	\$500	\$1,000		\$2,000		
		50/50	50/50	80/20	50/50	60/40	100/0
Annual Dental Maximum \$1,000							
Base Plan - No Ortho	\$88.00						
Child-Only Ortho		\$98.00			\$108.00		\$111.00
Child/Adult Ortho		\$101.00			\$110.00		
Annual Dental Maximum \$1,500							
Child-Only Ortho		\$115.00	\$119.00				
Annual Dental Maximum \$2,000							
Child-Only Ortho		\$128.00			\$138.00	\$141.00	
Child-Adult Ortho		\$129.00			\$142.00	\$147.00	

09-10: Rural Rates	Orthodontia Benefit (Lifetime Maximum) Delta Pays/Employee Pays						
	None	\$500	\$1,000		\$2,000		
		50/50	50/50	80/20	50/50	60/40	100/0
Annual Dental Maximum \$1,000							
Base Plan - No Ortho	\$75.00						
Child Only Ortho			\$85.00				
Child/Adult Ortho			\$87.00		\$93.00		\$99.00