

RATES

JUNE 1 - MAY 31, 2026
EMPLOYEE CONTRIBUTIONS

PREMIER RADIOLOGY

Lincoln Financial



Your contributions toward the cost of dental coverage is automatically deducted from your paycheck before taxes.

Bi-Weekly:

Coverage Tier	Bi-Weekly Employee Contribution
Preferred Plan	
Employee Only	\$8.81
Employee + Spouse	\$23.92
Employee + Child(ren)	\$37.24
Family	\$59.19

Monthly:

Coverage Tier	Monthly Employee Contribution
Employee Only	\$19.08
Employee + Spouse	\$51.82
Employee + Child(ren)	\$80.68
Family	\$128.24



PREMIER