

MSD OF NORTH POSEY COUNTY

Dental Payments as of December 1, 2025 to November 30, 2026
Dental Insurance Coverage - January 1, 2026 to December 31, 2026

Dental Health Options

PARAMOUNT DENTAL

Formerly Health Resources, INC (HRI)

DHO Plan 6B

Yearly Maximum \$1,000.00

Ortho Lifetime \$1,000.00

See Benefit Summary Sheet for Further Details

Employee + Family

Yearly Premium	\$1,390.83
Employee Share	\$1,390.83
Cobra Monthly Premium: \$115.90	

Employee + 1 Dependent

Yearly Premium	\$798.42
Employee Share	\$798.42
Cobra Monthly Premium: \$66.54	

Employee Only

Yearly Premium	\$389.11
Employee Share	\$389.11
Cobra Monthly Premium: \$32.43	