

Town of Concord
Dental Insurance & Vision Insurance Rates

Effective 7/1/2025

(Payroll deductions change as of June 2025)

Although there are 26 biweekly paydates per year, employee insurance deductions & FSA/HSA contributions are made 24 times per year (max of 2 times per month). Employees are responsible for verifying that their deductions match those required for the benefits in which they have enrolled and for reporting any errors to HR so their payents can be reconciled.

	Dental Blue Freedom	
	Individual Coverage	Family Coverage
Monthly Premium	\$56.84	\$161.46
<i>Town's Contribution Rate</i>	50%	50%
<i>Town Share</i>	\$28.42	\$80.74
<i>Employee Share</i>	\$28.42	\$80.72
Biweekly Payroll Deduction	\$14.21	\$40.36

	Blue 20/20 Plus - Vision			
	Individual	EE + Spouse	EE + Child(ren)	Family
Monthly Premium	\$6.77	\$11.51	\$11.85	\$18.62
<i>Town's Contribution Rate</i>	0%	0%	0%	0%
<i>Employee Share</i>	\$6.76	\$11.50	\$11.84	\$18.62
Biweekly Payroll Deduction	\$3.38	\$5.75	\$5.92	\$9.31