



## NWU Dental & Vision Plan Rates Effective 01/01/2014

Monthly Rates Including Administrative Fees

<u>Dental HMO + Vision</u>	<u>Rate</u>
Member	\$44.31
Member + 1 Dependent	\$66.17
Member + 2 Dependents	\$106.90

<u>Dental PPO + Vision</u>	<u>Rate</u>
Member	\$113.13
Member + 1 Dependent	\$199.12
Member + 2 Dependents	\$247.18

Please make your check payable to Bollinger and return with your application to:

**Bollinger**  
**400 Market Street, Suite 450**  
**Philadelphia, PA 19106**

Please do not hesitate to contact us with any questions at 1-800-952-4050, ext. 4765