AlwaysCare Rates

**SOUTHERN UNIVERSITY SYSTEM**

**Policy #444265-0001**

# Dental and Vision Rates

| | **Dental** per month | **Vision** per month |
|---|---|---|
| **Employee Only** | $30.43 | $7.04 |
| **Employee plus 1 Adult** | $63.82 | $14.06 |
| **Employee plus Children** | $63.82 | $14.82 |
| **Employee plus Family** | $100.93 | $23.30 |
| **Employee plus Dependent (Child)** | N/A | N/A |

**Please note all rates are subject to change by Unum in the future.**

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