



Volunteers of America®
PENNSYLVANIA

2025 and 2026 Dental & Vision Bi-Weekly Deduction Rates

Dental Bi-Weekly Employee Rates:

| Coverage Level | 2025 | 2026 |
|-----------------------|---------|---------|
| Employee | \$8.15 | \$9.36 |
| Employee + Spouse | \$16.30 | \$18.70 |
| Employee + Child(ren) | \$20.63 | \$24.49 |
| Employee + Family | \$30.44 | \$35.86 |

Vision Bi-Weekly Employee Rates:

| Coverage Level | 2025 | 2026 |
|-----------------------|--------|--------|
| Employee | \$2.58 | \$2.58 |
| Employee + Spouse | \$4.91 | \$4.91 |
| Employee + Child(ren) | \$5.76 | \$5.76 |
| Employee + Family | \$8.10 | \$8.10 |