

Amherst College						
Dental Insurance Premiums - Employee and Child(ren) Coverage						
July 1, 2024 - June 30, 2025						
Sliding Scale Level*	Level 6**	Level 5**	Level 4**	Level 3**	Level 2**	Level 1
Minimum Household Income	\$0	\$64,029	\$67,973	\$71,922	\$75,865	\$79,814
Maximum Household Income	\$64,028	\$67,972	\$71,921	\$75,864	\$79,813	N/A
Dental Standard Coverage						
Monthly Premium Cost	\$82.25					
Monthly Employee Cost	\$19.20	\$21.11	\$23.04	\$24.95	\$26.88	\$28.79
Weekly Employee Cost	\$4.43	\$4.87	\$5.32	\$5.76	\$6.20	\$6.64
Dental Coverage Including Orthodontia						
Monthly Premium Cost	\$95.30					
Monthly Employee Cost	\$32.72	\$34.54	\$36.37	\$38.19	\$40.01	\$41.84
Weekly Employee Cost	\$7.55	\$7.97	\$8.39	\$8.81	\$9.23	\$9.65

\*The Sliding Scale Program provides higher contributions by the College based on family income.

\*\*To be eligible for Income Levels 6 through 2 rates you must apply with the Office of Human Resources.