

Amherst College						
Dental Insurance Premiums - Family 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	\$129.01					
Monthly Employee Cost	\$25.38	\$27.91	\$30.46	\$32.98	\$35.53	\$38.06
Weekly Employee Cost	\$5.86	\$6.44	\$7.03	\$7.61	\$8.20	\$8.78
Dental Coverage Including Orthodontia						
Monthly Premium Cost	\$149.47					
Monthly Employee Cost	\$45.76	\$48.31	\$50.86	\$53.42	\$55.97	\$58.52
Weekly Employee Cost	\$10.56	\$11.15	\$11.74	\$12.33	\$12.92	\$13.50

\*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.