Amherst College Dental Insurance Premiums - Dental Family Coverage						
Sliding Scale Level*	Level 6**	Level 5**	Level 4**	Level 3**	Level 2**	Level 1
Minimum Household Income	\$0	\$62,165	\$65,993	\$69,827	\$73,655	\$77,489
Maximum Household Income	\$62,164	\$65,992	\$69,826	\$73,654	\$77,488	N/A
Dental Blue Freedom						
Monthly Premium Cost	\$126.23					
Monthly Employee Cost	\$24.83	\$27.30	\$29.80	\$32.27	\$34.77	\$37.24
Weekly Employee Cost	\$5.73	\$6.30	\$6.88	\$7.45	\$8.02	\$8.59
Dental Blue Freedom with Orthodontics						
Monthly Premium Cost	\$146.25					
Monthly Employee Cost	\$44.78	\$47.27	\$49.77	\$52.27	\$54.76	\$57.26
Weekly Employee Cost	\$10.33	\$10.91	\$11.49	\$12.06	\$12.64	\$13.21

^{*}The Sliding Scale Program provides higher contributions by the College, based on household income. Please contact the Office of Human Resources for additional information.

^{**}To be eligible for Income Levels 2 through 6 rates, you must apply for Sliding Scale consideration.