2025 Dental and Vision Plan Deduction Codes and Premiums

The following tables show premiums effective January 1, 2025. For employees in CoBen, the state share and employee share do not apply and the total dental premium will be deducted from the monthly CoBen allowance.

State-Sponsored Dental Plans

Delta Dental PPO plus Premier Basic Plan—Represented Employees

Group Number: 9949-0101 **Dental Org. Code:** 351-007

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$36.98	\$12.33	\$49.31
Party Code 2	\$64.58	\$21.52	\$86.10
Party Code 3	\$93.33	\$31.11	\$124.44

Delta Dental PPO plus Premier Enhanced Plan—Excluded Employees

Group Number: 9949-2101 **Dental Org. Code:** 351-008

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$0.00	\$51.29	\$51.29
Party Code 2	\$0.00	\$100.95	\$100.95
Party Code 3	\$0.00	\$141.81	\$141.81

Delta Dental Preferred Provider Option (PPO)—Excluded and Represented

Employees

Group Number: 9946 **Dental Org. Code:** 351-018

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$33.80	\$11.26	\$45.06
Party Code 2	\$65.71	\$21.90	\$87.61
Party Code 3	\$98.87	\$32.95	\$131.82

Prepaid Dental Plans—State Pays 100%

DeltaCare USA

Group Number: 72003 **Dental Org. Code:** 351-009

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$19.44	\$0.00	\$19.44
Party Code 2	\$31.90	\$0.00	\$31.90
Party Code 3	\$44.13	\$0.00	\$44.13

MetLife Standard Plan* Group Number: 74503 Dental Org. Code: 351-016

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$13.85	\$0.00	\$13.85
Party Code 2	\$22.44	\$0.00	\$22.44
Party Code 3	\$31.42	\$0.00	\$31.42

MetLife Enhanced Plan* Group Number: 74503 Dental Org. Code: 351-015

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$16.06	\$0.00	\$16.06
Party Code 2	\$27.18	\$0.00	\$27.18
Party Code 3	\$33.48	\$0.00	\$33.48

Premier Access

Group Number: 12700 **Dental Org. Code:** 351-020

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$14.21	\$0.00	\$14.21
Party Code 2	\$23.02	\$0.00	\$23.02
Party Code 3	\$32.24	\$0.00	\$32.24

Western Dental

Group Number: 2140352 **Dental Org. Code:** 351-025

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$15.77	\$0.00	\$15.77
Party Code 2	\$26.02	\$0.00	\$26.02
Party Code 3	\$36.91	\$0.00	\$36.91

Union-Sponsored Dental Plans

CAHP/Blue Cross (R05) Group Number: 336817-A Dental Org. Code: 351-013

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$36.98	\$20.12	\$57.10
Party Code 2	\$64.58	\$35.07	\$99.65
Party Code 3	\$93.33	\$52.12	\$145.45

CCPOA/Primary Dental (R06) Group Number: Fee-For-Service **Dental Org. Code:** 351-006

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$69.06	\$0	\$69.06
Party Code 2	\$69.06	\$0	\$69.06
Party Code 3	\$69.06	\$0	\$69.06

CCPOA/Western Dental (R06)

Group Number: Prepaid **Dental Org. Code:** 351-249

Party Code	State Share	Employee Share	Total Premium
Party Code 1	\$69.06	\$0	\$69.06
Party Code 2	\$69.06	\$0	\$69.06
Party Code 3	\$69.06	\$0	\$69.06

CCPOA/Primary Dental (S06, M06, E06, C06)

Group Number: Fee-For-Service **Dental Org. Code:** 351-246

Party Code	Total Premium
Party Code 1	\$37.00
Party Code 2	\$79.00
Party Code 3	\$135.00

State-Sponsored Vision Plans

VSP Basic Plan

Group Number: 30052011

Vision Org. Code: 475-001 (Non-CoBen) or 475-002 (CoBen)

Party Code	State Share	Employee Share	Total Premium (CoBen)
Party Code 1	\$8.10	\$0	\$8.10
Party Code 2	\$8.10	\$0	\$8.10
Party Code 3	\$8.10	\$0	\$8.10

VSP Premier Plan

Group Number: 30034581 **Vision Org. Code:** 361-475

Party Code	State Share	Employee Share	Total Premium (CoBen)
Party Code 1	\$8.10	\$8.63	\$16.73
Party Code 2	\$8.10	\$17.09	\$25.19
Party Code 3	\$8.10	\$27.41	\$35.51

Carrier Contact Information for State-Sponsored Dental and Vision Plans

Delta Dental of California

P.O. Box 997330 Sacramento, CA 95899-7330 (800) 225-3368 www.deltadentalins.com/state/

DeltaCare USA

P.O. Box 1803 Alpharetta, GA 30023 (800) 422-4234 www.deltadentalins.com/state/

MetLife*

P.O. Box 14410 Lexington, KY 40512-4401 (800) 880-1800

www.metlife.com/safeguard/soc/

*Benefits provided by SafeGuard Health Plans, Inc., a MetLife company.

Premier Access

8890 Cal Center Drive Sacramento, CA 95826 (888) 534-3466 www.socdhmo.com

Western Dental Benefits Division

530 South Main Street, 1st Floor Orange, CA 92868 (866) 859-7525 www.westerndental.com/state-of-ca

VSP Vision Care

3333 Quality Drive Rancho Cordova, CA 95670 (800) 400-4569 FAX: (916) 389-8304 stateofcaemployee.vspforme.com