

**DELTA DENTAL OF DELAWARE, INC.
INDIVIDUAL OFF MARKET ONLY**

Rate Effective Date 1/1/2019
Rate Expiration Date 12/31/2019

Plan ID	Plan Description	Age	Individual Rate
26018DE0010001	Delta Dental PPO Pediatric Basic Plan -- Low	0-18	24.29
26018DE0010002	Delta Dental PPO Pediatric Preferred Plan -- High	0-18	31.40