

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

**Rate Effective Date** 1/1/2020  
**Rate Expiration Date** 12/31/2020

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