



State of Connecticut - Office of the State Comptroller
Healthcare Policy & Benefit Services Division
July 2025 - June 2026 Full (100%) Dental Insurance Rates

Administered By
CIGNA

Plan Name	Class Coverage	Monthly Dental Rate
Basic Dental Plan	Employee Only	\$40.26
	Employee +1	\$122.79
	Family	\$122.79
Enhanced Dental Plan	Employee Only	\$39.43
	Employee +1	\$120.26
	Family	\$120.26
Dental HMO - Closed to New Enrollments	Employee Only	\$23.64
	Employee +1	\$52.01
	Family	\$63.83
Judges Plan	Employee Only	\$42.07
	Employee +1	\$127.89
	Family	\$127.89
Total Care DHMO	Employee Only	\$29.49
	Employee +1	\$64.88
	Family	\$79.62