

Insurance Premiums

County of Kankakee

January 1, 2026 - December 31, 2026

Delta Dental	<u>SINGLE</u>	<u>EMP + Spouse</u>	<u>EMP + Child(ren)</u>	<u>FAMILY</u>
Total cost per employee per month:	\$26.00	\$51.00	\$62.00	\$101.00
Employee's cost per paycheck:	\$13.00	\$25.50	\$31.00	\$50.50