## **TRB Dental Subsidy**

The first tab on the excel spreadsheet is for members who are receiving only dental benefits from the BOE

Last Name	First Name	Coverage	Retiree or Spouse	Dental Rate Eff Date	Dental Rate Term Date	GROUP#	Monthly Rate	Town Number	BOE Name
DOE	JOHN	CIGNA	REITREE	7/1/2020	6/30/2021	399-Dntl-2P	\$48.00	399	SAMPLE BOARD
DOE	JANE	CIGNA	SPOUSE	7/1/2020	6/30/2021	399-Dntl-2P	\$48.00	399	SAMPLE BOARD
SMITH	MICHAEL	CIGNA	RETIREE	7/1/2020	6/30/2020	399-DNTL-MEM	\$32.00	399	SAMPLE BOARD
SMITH	MARY	CIGNA	SPOUSE	7/1/2020	6/30/2020	399-DNTL-SPOUSE	\$36.00	399	SAMPLE BOARD

The second tab of the Excel spreadsheet is where you will provide the rates for different dental covered recipients under your BOE

Town Number	BOE Name	Group #	Group Description	Monthly Dental Rate	Dental Rate From Date	Dental Rate To Date	Plan Year	Comments
399	SAMPLE BOARD	399-DNTL-2P	Cigna 1 person	\$ 48.00	7/1/2020	6/30/2021	2021	
399	SAMPLE BOARD	399-DNTL-MEM	Cigna member rate	\$ 32.00	7/1/2020	6/30/2021	2021	
399	SAMPLE BOARD	399-DNTL-SPOUSE	Cigna spouse rate	\$ 36.00	7/1/2020	6/30/2021	2021	

TRB asks that you complete the all columns within the spreadsheet \*Note – two additional columns have been added moving forward

## Group Examples: