

## 2026 plan rates

(Premiums effective Jan. 1, 2026 through Dec. 31, 2026)

Age	Delta Dental EPO	Delta Dental PPO™	Delta Dental PPO™ MAC	Delta Dental PPO™ Bright Smiles	Delta Dental Premier® 1000	Willamette EPO
<b>0-18</b>	\$46.00	\$41.00	\$40.00	\$41	\$42.00	\$49.49
<b>19-24</b>	\$34.00	\$28.00	\$27.00	N/A	\$39.00	\$49.49
<b>25</b>	\$34.00	\$28.00	\$27.00	N/A	\$39.00	\$49.49
<b>26-29</b>	\$34.00	\$28.00	\$27.00	N/A	\$39.00	\$53.92
<b>30-34</b>	\$36.00	\$30.00	\$29.00	N/A	\$42.00	\$53.92
<b>35-39</b>	\$39.00	\$33.00	\$32.00	N/A	\$46.00	\$59.77
<b>40-44</b>	\$40.00	\$34.00	\$33.00	N/A	\$47.00	\$59.77
<b>45-49</b>	\$41.00	\$35.00	\$34.00	N/A	\$48.00	\$70.03
<b>50-54</b>	\$44.00	\$38.00	\$37.00	N/A	\$52.00	\$70.03
<b>55-59</b>	\$48.00	\$41.00	\$40.00	N/A	\$57.00	\$82.65
<b>60-63</b>	\$52.00	\$45.00	\$44.00	N/A	\$62.00	\$82.65
<b>64+</b>	\$55.00	\$48.00	\$47.00	N/A	\$66.00	\$82.65