



Benefits Putting the pieces together to improve your health

CONTRACTUAL/VARIABLE HOUR EMPLOYEES Monthly Subsidized Rates

Effective 01/01/2016 thru 12/31/2016

Rates for employees who work 30 hours per week or an average of 130 hours per month.

	PPO HEALTH PLANS	
Plan Type	CareFirst BC/BS	UnitedHealthcare Options
Individual	\$121.42	\$119.44
Individual + one person	\$218.56	\$215.00
Individual + two or more	\$303.56	\$298.63

	IHM HEALTH PLAN		
Plan Type	CareFirst BC/BS	UnitedHealthcare	Kaiser Permanente
Individual	\$108.06	\$108.71	\$94.75
Individual + one person	\$226.76	\$226.08	\$201.50
Individual + two or more	\$280.93	\$269.57	\$249.64

PRESCRIPTIO	PRESCRIPTION DRUG		DENTAL		
Plan Type	Express Scripts		Plan Type	Delta Dental	United Concordia
i ian iype	Express scripts		rian type	DHMO	DPPO
Individual	\$57.43		Individual	\$12.87	\$23.27
Individual + Child	\$76.33		Individual + Child	\$22.44	\$44.48
Individual + Spouse	\$95.32		Individual + Spouse	\$25.78	\$46.54
Individual + two or more	\$114.86		Individual + two or more	\$36.21	\$87.20

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE PREMIUM RATES						
Amount Individual Only Family						
\$100,000	\$1.50	\$2.80				
\$200,000	\$3.00	\$5.60				
\$300,000	\$4.50	\$8.40				

TERM LIFE INSURANCE PREMIUM RATES						
Age of Employee/ Retiree	Employee Retiree Rates (per \$1,000)	Age of Spouse	Spouse Rates (per \$1,000)			
Under 30	\$0.034	Under 30	\$0.102			
30 to 34	\$0.041	30 to 34	\$0.110			
35 to 39	\$0.054	35 to 39	\$0.138			
40 to 44	\$0.085	40 to 44	\$0.202			
45 to 49	\$0.137	45 to 49	\$0.313			
50 to 54	\$0.216	50 to 54	\$0.464			
55 to 59	\$0.392	55 to 59	\$0.722			
60 to 64	\$0.553	60 to 64	\$1.106			
65 to 69	\$0.826	65 to 69	\$1.608			
70 to 74	\$1.480	70 to 74	\$2.528			
75 to 79	\$2.060	75 to 79	\$2.528			
80 and older	\$2.060	80 and older	\$2.528			
Dependent Child Coverage is \$0.156 per \$1,000 per month.						

ENROLLMENT FORMS CAN BE FOUND ON OUR WEBSITE AT: www.dbm.maryland.gov/benefits





Benefits Putting the pieces together to improve your health

CONTRACTUAL/VARIABLE HOUR EMPLOYEES Monthly Non-Subsidized Rates

Effective 01/01/2016 thru 12/31/2016

Rates for employees who work under 30 hours per week or less than an average of 130 hours per month.

PPO HEALTH PLANS					
Plan Type	CareFirst BC/BS	UnitedHealthcare Options			
Individual	\$485.68	\$477.78			
Individual + one person	\$874.22	\$860.01			
Individual + two or more	\$1,214.24	\$1,194.50			

	IHM HEALTH PLAN		
Plan Type	CareFirst BC/BS	UnitedHealthcare Select	Kaiser Permanente
Individual	\$432.23	\$434.83	\$384.07
Individual + one person	\$907.06	\$904.31	\$806.01
Individual + two or more	\$1,123.72	\$1,078.26	\$998.55

PRESCRIPTION DRUG			DENTAL		
Plan Type	Express Scripts	Plan Type -		Delta Dental	United Concordia
	Express scripts		i ian iype	DHMO	DPPO
Individual	\$229.72		Individual	\$12.87	\$23.27
Individual + Child	\$305.32		Individual + Child	\$22.44	\$44.48
Individual + Spouse	\$381.27		Individual + Spouse	\$25.78	\$46.54
Individual + two or more	\$459.46		Individual + two or more	\$36.21	\$87.20

ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE PREMIUM RATES						
Amount Individual Only Family						
\$100,000	\$1.50	\$2.80				
\$200,000	\$3.00	\$5.60				
\$300,000	\$4.50	\$8.40				

TERM LIFE INSURANCE PREMIUM RATES						
Age of Employee/ Retiree	Employee Retiree Rates (per \$1,000)	Age of Spouse	Spouse Rates (per \$1,000)			
Under 30	\$0.034	Under 30	\$0.102			
30 to 34	\$0.041	30 to 34	\$0.110			
35 to 39	\$0.054	35 to 39	\$0.138			
40 to 44	\$0.085	40 to 44	\$0.202			
45 to 49	\$0.137	45 to 49	\$0.313			
50 to 54	\$0.216	50 to 54	\$0.464			
55 to 59	\$0.392	55 to 59	\$0.722			
60 to 64	\$0.553	60 to 64	\$1.106			
65 to 69	\$0.826	65 to 69	\$1.608			
70 to 74	\$1.480	70 to 74	\$2.528			
75 to 79	\$2.060	75 to 79	\$2.528			
80 and older	\$2.060	80 and older	\$2.528			
Dependent Child Coverage is \$0.156 per \$1,000 per month.						

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