



# Health Benefits

Together, we are working toward a *healthier community*



State of Maryland Department of  
Budget & Management

## DIRECT PAY ENROLLEES Effective 01/01/2021 thru 12/31/2021 Monthly Rates

**IMPORTANT:**  
COBRA ENROLLEES NEED TO ADD  
2% FOR ADMINISTRATIVE FEE.

PPO HEALTH PLANS		
Plan Type	CareFirst BC/BS	UnitedHealthcare Options
Individual	\$532.92	\$524.24
Individual + one person	\$959.24	\$943.64
Individual + two or more	\$1,332.32	\$1,310.68

EPO HEALTH PLANS			IHM HEALTH PLAN
Plan Type	CareFirst BC/BS	UnitedHealthcare Select	Kaiser Permanente
Individual	\$474.26	\$477.12	\$473.94
Individual + one person	\$995.26	\$992.26	\$994.61
Individual + two or more	\$1,233.00	\$1,183.12	\$1,232.19

PRESCRIPTION DRUG	
Plan Type	CVS Caremark
Individual	\$225.36
Individual + Child	\$299.52
Individual + Spouse	\$374.02
Individual + two or more	\$450.72

DENTAL		
Plan Type	Delta Dental	United Concordia
	DHMO	DPPO
Individual	\$16.31	\$24.64
Individual + Child	\$32.68	\$47.10
Individual + Spouse	\$28.44	\$49.28
Individual + two or more	\$45.90	\$92.34

ACCIDENTAL DEATH & DISMEMBERMENT		
Amount	Individual Only	Family
\$100,000	\$1.20	\$2.30
\$200,000	\$2.40	\$4.60
\$300,000	\$3.60	\$6.90

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	\$0.03	Under 30	\$0.09
30 to 34	\$0.04	30 to 34	\$0.10
35 to 39	\$0.05	35 to 39	\$0.12
40 to 44	\$0.08	40 to 44	\$0.18
45 to 49	\$0.13	45 to 49	\$0.28
50 to 54	\$0.20	50 to 54	\$0.42
55 to 59	\$0.37	55 to 59	\$0.65
60 to 64	\$0.52	60 to 64	\$1.00
65 to 69	\$0.77	65 to 69	\$1.45
70 to 74	\$1.38	70 to 74	\$2.28
75 to 79	\$2.06	75 to 79	\$2.28
80 and older	\$2.06	80 and older	\$2.28

Dependent Child Coverage is \$0.14 per \$1,000 per month.

FORMS CAN BE FOUND ON OUR WEBSITE AT: [www.dbm.maryland.gov/benefits](http://www.dbm.maryland.gov/benefits)