



# Health Benefits

*Together, we are working toward a healthier community*



State of Maryland Department of  
Budget & Management

## DIRECT PAY ENROLLEES Effective 01/01/2022 thru 12/31/2022 Monthly Rates

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

PPO HEALTH PLANS		
Plan Type	CareFirst BC/BS	UnitedHealthcare Options
Individual	\$559.58	\$550.44
Individual + one person	\$1,007.20	\$990.82
Individual + two or more	\$1,398.94	\$1,376.22

EPO HEALTH PLANS			IHM HEALTH PLAN
Plan Type	CareFirst BC/BS	UnitedHealthcare Select	Kaiser Permanente
Individual	\$497.96	\$500.98	\$497.64
Individual + one person	\$1,045.02	\$1,041.88	\$1,044.34
Individual + two or more	\$1,294.66	\$1,242.28	\$1,293.82

PRESCRIPTION DRUG	
Plan Type	CVS Caremark
Individual	\$247.90
Individual + Child	\$329.46
Individual + Spouse	\$411.42
Individual + two or more	\$495.80

DENTAL		
Plan Type	Delta Dental	United Concordia
	DHMO	DPPO
Individual	\$16.66	\$25.86
Individual + Child	\$33.38	\$49.46
Individual + Spouse	\$29.06	\$51.74
Individual + two or more	\$46.88	\$96.96

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)

