

Health Benefits

Together, we are working toward a healthier community



State of Maryland Department of Budget & Management

DIRECT PAY ENROLLEES Effective 01/01/2023 thru 12/31/2023 Monthly Rates

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

| | PPO HEALTH PLANS | |
|--------------------------|------------------|--------------------------|
| Plan Type | CareFirst BC/BS | UnitedHealthcare Options |
| Individual | \$587.56 | \$577.96 |
| Individual + one person | \$1,057.56 | \$1,040.36 |
| Individual + two or more | \$1,468.90 | \$1,445.02 |

| EPO HEALTH PLANS | | IHM HEALTH PLAN | |
|--------------------------|-----------------|-------------------------|-------------------|
| Plan Type | CareFirst BC/BS | UnitedHealthcare Select | Kaiser Permanente |
| Individual | \$522.86 | \$526.02 | \$522.52 |
| Individual + one person | \$1,097.26 | \$1,093.96 | \$1,096.56 |
| Individual + two or more | \$1,359.38 | \$1,304.40 | \$1,358.50 |

| PRESCRIPTION DRUG | | |
|--------------------------|--------------|--|
| Plan Type | CVS Caremark | |
| Individual | \$272.70 | |
| Individual + Child | \$362.40 | |
| Individual + Spouse | \$452.56 | |
| Individual + two or more | \$545.38 | |

| DENTAL | | | |
|--------------------------|--------------|------------------|--|
| Dlan Tuna | Delta Dental | United Concordia | |
| Plan Type | DHMO | DPP0 | |
| Individual | \$17.40 | \$27.14 | |
| Individual + Child | \$34.88 | \$51.94 | |
| Individual + Spouse | \$30.36 | \$54.32 | |
| Individual + two or more | \$48.98 | \$101.80 | |

| 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 p | er \$1,000 per month. | | - |