

100% HEALTH RATES

Montgomery County - Full-Scope Temporary Employees

Effective January 1, 2025

HEALTH PLANS	MONTHLY RATES		
	SELF	SELF+1	FAMILY
MEDICAL:			
Carefirst High Option POS (medical only)	\$843.09	\$1,458.45	\$2,455.74
Carefirst Standard Option POS (medical only)	\$784.08	\$1,356.34	\$2,283.85
UnitedHealthcare Select HMO (medical only)	\$690.15	\$1,326.74	\$2,109.14
Kaiser HMO (medical with Rx)	\$816.02	\$1,534.12	\$2,415.42
PRESCRIPTION:			
Caremark Standard Option \$10/\$20/\$35 Rx Plan	\$308.92	\$571.50	\$885.63
DENTAL:			
Dental PPO (Traditional Dental Plan)	\$43.84	\$97.68	\$140.57
Dental HMO (DHMO)	\$14.65	\$27.73	\$40.57
VISION:			
Vision Plan	\$4.74	\$7.50	\$11.38

MONTGOMERY COUNTY EMPLOYEE RATES - FULL-SCOPE TEMPORARY EMPLOYEES

Effective January 1, 2025

OPTIONAL LIFE INSURANCE

Effective January 1, 2025

How to Calculate the Estimated Monthly Employee Cost (After-Tax)

- 1) Determine your coverage amount for Optional Life Insurance (subject to plan maximums):
 - Take your basic annual earnings (i.e., your annual full-time equivalent salary) and multiply by the level of Optional Life Insurance you are electing.
For example, if your annual full-time equivalent salary is \$26,700, and you want an additional two times your basic annual earnings in Optional Life Insurance, then $\$26,700 \times 2 = \$53,400$.
 - Round this amount to the next \$1,000.
For example, you would round \$53,400 to \$54,000.
- 2) Divide the amount determined in 1) by \$1,000. *For example, $\$54,000/\$1,000 = 54$.*
- 3) From the table below, find the total monthly cost for your age band as of January 1 (if you are a new hire during the year, you should use your age as of your hire date). This is your monthly cost for each \$1,000 of Optional Life Insurance coverage you elect. If you move into a higher age band during the year, the new cost for that age band will apply as of that date.

AGE	TOTAL MONTHLY COST
	12 PAY PERIODS
<25	\$0.049
25-29	\$0.056
30-34	\$0.069
35-39	\$0.078
40-44	\$0.084
45-49	\$0.118
50-54	\$0.172
55-59	\$0.310
60-64	\$0.466
65-69	\$0.884
70-74	\$1.564
75-79	\$2.011
80-84	\$2.011
85-89	\$2.011
90-94	\$2.011
95+	\$2.011

For example, if you are 44 as of January 1, the total monthly cost is \$0.084 for every \$1,000 of Optional Life Insurance you elect. Should you turn 45 during the year, your new monthly cost will be \$0.118 for every \$1,000 of Optional Life Insurance you elect.

- 4) Multiply the total monthly cost determined in 3) by the amount determined in 2). This is your estimated monthly cost for the Optional Life Insurance you have elected.
For example, $\$0.084 \times 54 = \4.54 . This monthly cost would increase to $\$0.118 \times 54$ or \$6.37 should you move into the next age band during the plan year.

Please note that salary adjustments during the year that change your coverage amount, will also change your monthly cost for Optional Life Insurance.

DEPENDENT LIFE INSURANCE

Effective January 1, 2025

Estimated Total Employee Monthly Cost (After-Tax)

COVERAGE		TOTAL MONTHLY COST
		12 PAY PERIODS
\$2,000 - Spouse, \$1,000 - Child	100% Employee Paid	\$0.875
\$4,000 - Spouse, \$2,000 - Child	100% Employee Paid	\$1.751
\$10,000 - Spouse, \$5,000 - Child	100% Employee Paid	\$4.377