

100% HEALTH RATES

Montgomery County Outside Agency & Municipality Employees

Effective January 1, 2017

HEALTH PLANS	MONTHLY RATES		
	SELF	SELF+1	FAMILY
MEDICAL:			
Carefirst High Option POS (medical only)	\$549.06	\$949.80	\$1,599.28
Carefirst Standard Option POS (medical only)	\$510.62	\$883.31	\$1,487.34
UnitedHealthcare Select HMO (medical only)	\$480.74	\$924.17	\$1,469.18
Kaiser HMO (medical with Rx)	\$557.53	\$1,048.16	\$1,650.31
PRESCRIPTION:			
Caremark High Option \$5/\$10 Rx Plan	\$355.57	\$657.84	\$1,019.43
Caremark Standard Option \$10/\$20/\$35 Rx Plan	\$174.16	\$322.18	\$499.28
DENTAL:			
Dental PPO (Traditional Dental Plan)	\$34.68	\$77.26	\$111.17
Dental HMO (DHMO)	\$15.41	\$29.19	\$42.75
VISION:			
Vision Plan	\$3.70	\$5.86	\$8.89