# Plan Rates

## **Salary Tiers**

Our goal is to ensure that our medical plans remain affordable for all employees. Johns Hopkins pays most of the cost of your medical, dental and vision coverage, and all of the cost of your short-term disability and basic life insurance.

As mentioned previously, your biweekly cost of medical and prescription coverage for you and your covered dependents is determined by salary levels, which are grouped into three tiers — employees who earn the least pay the lowest premiums. See the rates table below for the 2023 tiers. Your tier is determined by your salary on Jan. 1, 2023.

	CDP			OAP			
Full Time Rates by Salary	Under \$50,000	\$50,000— \$119,000	\$120,000 & Over	Under \$50,000	\$50,000— \$119,000	\$120,000 & Over	
Employee	\$58.43	\$59.89	\$61.35	\$104.01	\$106.61	\$109.21	
Employee & Child(ren)	\$98.99	\$101.46	\$103.94	\$185.58	\$190.22	\$194.86	
Employee & Spouse	\$129.53	\$132.77	\$136.01	\$220.68	\$226.19	\$231.71	
Family	\$156.57	\$160.49	\$164.40	\$302.41	\$309.97	\$317.53	

#### 2023 MEDICAL PLAN PREMIUMS (BI-WEEKLY)

#### 2023 DENTAL PLAN PREMIUMS (BI-WEEKLY)

	Cigna
Employee	\$12.49
Employee & Child(ren)	\$23.17
Employee & Spouse	\$35.31
Family	\$46.10

### 2023 VISION PREMIUMS (BI-WEEKLY)

	Superior
Employee	\$1.69
Employee & Child(ren)	\$3.05
Employee & Spouse	\$3.39
Family	\$5.08