

## Mid-Atlantic — Maryland, Virginia, and District of Columbia

# 2022 Medical Plan Rates

Kaiser Plans are available in Maryland, Virginia, and District of Columbia.

The following charts show your per-pay-period contributions for medical coverage based on your annual eligible compensation. Contributions are per pay period, deducted 26 times per year.

<b>Regular and fixed term full-time employees</b>	You	You + spouse <sup>1</sup>	You + children	You + spouse <sup>1</sup> + children
<b>Based on annual eligible compensation of less than \$45,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$50.82	\$130.56	\$94.74	\$163.20
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$25.56	\$77.40	\$49.02	\$89.88
Higher Use Plan with HSA — VA <sup>2</sup>	\$48.78	\$126.18	\$91.02	\$157.32
Copay Plan with HRA — MD, DC <sup>2</sup>	\$52.62	\$135.30	\$98.10	\$169.14
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$26.34	\$80.04	\$50.58	\$92.76
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$50.46	\$130.92	\$94.20	\$163.08
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$29.46	\$89.64	\$56.64	\$103.86
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$26.34	\$80.04	\$50.58	\$92.76
<b>Based on annual eligible compensation of \$45,000 – \$100,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$71.28	\$180.90	\$132.42	\$227.34
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$37.56	\$109.86	\$71.46	\$129.42
Higher Use Plan with HSA — VA <sup>2</sup>	\$68.52	\$175.02	\$127.56	\$219.48
Copay Plan with HRA — MD, DC <sup>2</sup>	\$73.80	\$187.50	\$137.22	\$235.68
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$38.64	\$113.76	\$73.74	\$133.62
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$70.92	\$181.62	\$132.06	\$227.58
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$43.26	\$127.38	\$82.56	\$149.58
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$38.64	\$113.76	\$73.74	\$133.62

<sup>1</sup> Includes domestic partner. <sup>2</sup> Includes Out of Area coverage.

## Regular and fixed term full-time employees

	You	You + spouse <sup>1</sup>	You + children	You + spouse <sup>1</sup> + children
<b>Based on annual eligible compensation of more than \$100,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$88.92	\$223.14	\$165.00	\$282.06
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$49.02	\$139.02	\$92.82	\$166.14
Higher Use Plan with HSA — VA <sup>2</sup>	\$85.74	\$216.12	\$159.24	\$272.64
Copay Plan with HRA — MD, DC <sup>2</sup>	\$92.22	\$231.36	\$171.00	\$292.56
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$50.58	\$144.06	\$95.94	\$171.66
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$88.74	\$224.40	\$164.88	\$282.84
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$56.64	\$161.34	\$107.40	\$192.30
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$50.58	\$144.06	\$95.94	\$171.66

<sup>1</sup> Includes domestic partner. <sup>2</sup> Includes Out of Area coverage.

## Regular and fixed term part-time employees

	You	You + spouse <sup>1</sup>	You + children	You + spouse <sup>1</sup> + children
<b>Based on annual eligible compensation of less than \$45,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$66.66	\$161.52	\$122.94	\$207.60
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$37.32	\$108.30	\$77.34	\$134.34
Higher Use Plan with HSA — VA <sup>2</sup>	\$64.68	\$157.14	\$119.28	\$201.72
Copay Plan with HRA — MD, DC <sup>2</sup>	\$69.24	\$167.64	\$127.56	\$215.52
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$37.32	\$112.38	\$80.04	\$139.14
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$66.96	\$163.20	\$123.66	\$209.46
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$48.00	\$125.82	\$89.64	\$155.76
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$42.84	\$112.38	\$80.04	\$139.08
<b>Based on annual eligible compensation of \$45,000 – \$100,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$92.10	\$221.58	\$169.62	\$285.72
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$58.38	\$150.48	\$108.60	\$187.80
Higher Use Plan with HSA — VA <sup>2</sup>	\$89.40	\$215.64	\$164.70	\$277.80
Copay Plan with HRA — MD, DC <sup>2</sup>	\$95.64	\$229.98	\$175.92	\$296.64
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$60.42	\$156.18	\$112.50	\$194.52
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$92.58	\$224.10	\$170.88	\$288.54
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$67.62	\$174.96	\$126.00	\$217.92
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$60.42	\$156.12	\$112.50	\$194.52

<sup>1</sup> Includes domestic partner. <sup>2</sup> Includes Out of Area coverage.

## Regular and fixed term part-time employees

	You	You + spouse <sup>1</sup>	You + children	You + spouse <sup>1</sup> + children
<b>Based on annual eligible compensation of more than \$100,000</b>				
Copay Plan with Health Reimbursement Account (HRA) — VA <sup>2</sup>	\$113.10	\$270.42	\$208.14	\$349.80
Lower Use Plan with Health Savings Account (HSA) — VA <sup>2</sup>	\$73.26	\$186.24	\$135.96	\$233.88
Higher Use Plan with HSA — VA <sup>2</sup>	\$109.98	\$263.40	\$202.20	\$340.44
Copay Plan with HRA — MD, DC <sup>2</sup>	\$117.42	\$280.62	\$216.00	\$363.24
Lower Use Plan with HSA — MD, DC <sup>2</sup>	\$75.84	\$193.26	\$140.94	\$242.46
Higher Use Plan with HSA — MD, DC <sup>2</sup>	\$113.94	\$273.66	\$209.82	\$353.64
Health Maintenance Organization (HMO) — Kaiser Mid-Atlantic	\$84.96	\$216.54	\$157.80	\$271.56
High-Deductible Health Plan (HDHP) — Kaiser Mid-Atlantic	\$75.84	\$193.26	\$140.94	\$242.46

<sup>1</sup> Includes domestic partner. <sup>2</sup> Includes Out of Area coverage.

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If you have an outstanding balance that is past due, an additional contribution of up to the same per-pay-period amount as your current coverage will be deducted from your pay until your outstanding past-due balance is zero. If you are no longer enrolled in coverage, a flat amount of up to \$125 per pay period will be deducted from your pay until your outstanding past-due balance is zero. If you are on a leave of absence, you may be billed directly. For more information, see Chapter 1 and Appendix D of the *Benefits Book*.