

BlueDHMO

Monthly Premium for Groups with 1-50 Employees Quarter 1 - January 1, 2023 to March 31, 2023

MARYLAND

OPTION NUMBER	INDIVIDUAL	INDIVIDUAL & CHILDREN	INDIVIDUAL & ADULT	FAMILY
Option 1 - \$0 Copay	\$18.13	\$43.51	\$36.26	\$70.71
Option 2 - \$10 Copay	\$14.87	\$35.69	\$29.74	\$57.99

DISTRICT OF COLUMBIA

OPTION NUMBER	INDIVIDUAL	INDIVIDUAL & CHILDREN	INDIVIDUAL & ADULT	FAMILY
Option 1 - \$0 Copay	\$18.51	\$44.42	\$37.02	\$72.19
Option 2 - \$10 Copay	\$15.18	\$36.43	\$30.36	\$59.20

VIRGINIA

OPTION NUMBER	INDIVIDUAL	INDIVIDUAL & CHILDREN	INDIVIDUAL & ADULT	FAMILY
Option 1 - \$0 Copay	\$17.85	\$42.84	\$35.70	\$69.62
Option 2 - \$10 Copay	\$14.63	\$35.11	\$29.26	\$57.06

Base rates effective January 1, 2023

This is not a quote. CareFirst reserves the right to revise the rates if applicable law or regulatory authority requires such revisions. See benefit summary for plan details.
AGE BAND RATING DOES NOT APPLY

Revised 10/31/22