

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.

Your biweekly cost of medical and prescription coverage for you and your covered dependents is determined by salary level. Salary levels are grouped into four tiers — employees who earn the least pay the lowest premiums.

See the rates table below for the 2022 tiers. Your tier is determined by your salary on Jan. 1, 2022. Salaries of part-time employees are annualized to determine their tier.

2022 MEDICAL PLAN PREMIUMS (BI-WEEKLY)

Full Time Rates by Salary	EHP EPO				EHP PPO			
	Under \$50,000	\$50,000–\$119,999	\$120,000–\$249,999	\$250,000 & Over	Under \$50,000	\$50,000–\$119,999	\$120,000–\$249,999	\$250,000 & Over
Employee	\$53.83	\$60.24	\$73.73	\$113.76	\$68.50	\$75.16	\$86.24	\$126.27
Employee & Child(ren)	\$117.66	\$132.47	\$154.95	\$236.03	\$142.93	\$157.74	\$180.22	\$261.30
Employee & Spouse	\$142.42	\$159.84	\$195.06	\$298.67	\$178.15	\$195.46	\$224.27	\$327.55
Family	\$151.50	\$170.21	\$218.13	\$318.13	\$202.78	\$221.50	\$249.41	\$350.05

Part Time Rates by Salary	EHP EPO				EHP PPO			
	Under \$50,000	\$50,000–\$119,999	\$120,000–\$249,999	\$250,000 & Over	Under \$50,000	\$50,000–\$119,999	\$120,000–\$249,999	\$250,000 & Over
Employee	\$129.87	\$143.83	\$178.77	\$286.05	\$147.59	\$162.09	\$191.28	\$298.56
Employee & Child(ren)	\$245.40	\$271.61	\$336.91	\$501.20	\$290.67	\$316.88	\$362.17	\$526.47
Employee & Spouse	\$300.09	\$331.21	\$403.36	\$582.77	\$348.97	\$380.09	\$432.24	\$609.51
Family	\$321.40	\$354.84	\$431.04	\$635.24	\$372.68	\$406.13	\$462.32	\$666.53

2022 DENTAL PLAN PREMIUMS (BI-WEEKLY)

	Comprehensive		High	
	Full Time	Part Time	Full Time	Part Time
Employee	\$5.44	\$7.94	\$9.07	\$13.24
Employee & Child(ren)	\$10.88	\$15.88	\$18.13	\$26.47
Employee & Spouse	\$14.96	\$21.84	\$24.94	\$36.40
Family	\$16.32	\$23.82	\$27.21	\$39.72

2022 VISION PREMIUMS (BI-WEEKLY)

	Full Time	Part Time
Employee	\$1.69	\$2.70
Employee & Child(ren)	\$3.05	\$4.87
Employee & Spouse	\$3.39	\$5.42
Family	\$5.08	\$8.13