

**Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2023 (Chart 1 of 5)**

**Chart 1:**

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee & Domestic Partner		
					INDIVIDUAL-2 ADULTS		
MEDICAL PLANS					Annual	Semimonthly	Weekly
CareFirst (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$9,789.84	\$407.91	\$188.27
CareFirst (union)	\$10,629.84	\$15,456.48	\$22,222.44	\$27,816.72	\$11,592.60	\$483.03	\$222.93
EHP Classic (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$9,789.84	\$407.91	\$188.27
BlueChoice (union)	\$13,001.88	\$18,906.00	\$27,181.32	\$34,023.84	\$14,179.44	\$590.81	\$272.68
Kaiser Permanente (non-union)	\$7,318.92	\$13,905.12	\$15,368.88	\$21,955.92	\$8,049.96	\$335.42	\$154.81
Kaiser Permanente (union)	\$8,304.72	\$15,778.20	\$17,439.12	\$24,912.60	\$9,134.40	\$380.60	\$175.66
BCBS CDHP (non-union)<\$40,000	\$8,312.00	\$12,746.56	\$17,285.44	\$21,437.92	\$8,973.44	\$373.89	\$172.57
BCBS CDHP (non-union)>\$40,001<\$60,000	\$8,062.00	\$12,246.56	\$16,785.44	\$20,937.92	\$8,723.44	\$363.48	\$167.76
BCBS CDHP (non-union)>\$60,000	\$7,812.00	\$11,746.56	\$16,285.44	\$20,437.92	\$8,473.44	\$353.06	\$162.95
BCBS HI/HHWP (PPP)	\$24,361.44	\$48,722.88	\$48,722.88	\$73,084.32	\$24,361.44	it w	\$468.49
DENTAL PLANS							
Delta Standard (non-union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$343.68	\$14.32	\$6.61
Delta Standard (union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$343.68	\$14.32	\$6.61
Delta Enhanced (non-union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$467.52	\$19.48	\$8.99
Delta Enhanced (union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$467.52	\$19.48	\$8.99
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$51.72	\$2.16	\$0.99
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$51.72	\$2.16	\$0.99
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			

**Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2023 (Chart 2 of 5)**

**Chart 2:**

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee & Domestic Partner's child(ren)		
					INDIVIDUAL-ADULT+CHILD(REN)		
MEDICAL PLANS					Annual	Semimonthly	Weekly
CareFirst (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$4,545.84	\$189.41	\$87.42
CareFirst (union)	\$10,629.84	\$15,456.48	\$22,222.44	\$27,816.72	\$4,826.64	\$201.11	\$92.82
EHP Classic (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$4,545.84	\$189.41	\$87.42
BlueChoice (union)	\$13,001.88	\$18,906.00	\$27,181.32	\$34,023.84	\$5,904.12	\$246.01	\$113.54
Kaiser Permanente (non-union)	\$7,318.92	\$13,905.12	\$15,368.88	\$21,955.92	\$6,586.20	\$274.43	\$126.66
Kaiser Permanente (union)	\$8,304.72	\$15,778.20	\$17,439.12	\$24,912.60	\$7,473.48	\$311.40	\$143.72
BCBS CDHP (non-union)<\$40,000	\$8,312.00	\$12,746.56	\$17,285.44	\$21,437.92	\$4,434.56	\$184.77	\$85.28
BCBS CDHP (non-union)>\$40,001<\$60,000	\$8,062.00	\$12,246.56	\$16,785.44	\$20,937.92	\$4,184.56	\$174.36	\$80.47
BCBS CDHP (non-union)>\$60,000	\$7,812.00	\$11,746.56	\$16,285.44	\$20,437.92	\$3,934.56	\$163.94	\$75.66
BCBS HI/HHWP (PPP)	\$24,361.44	\$48,722.88	\$48,722.88	\$73,084.32	\$24,361.44	\$1,015.06	\$468.49
DENTAL PLANS							
Delta Standard (non-union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$298.56	\$12.44	\$5.74
Delta Standard (union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$298.56	\$12.44	\$5.74
Delta Enhanced (non-union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$406.56	\$16.94	\$7.82
Delta Enhanced (union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$406.56	\$16.94	\$7.82
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			

**Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2023 (Chart 3 of 5)**

**Chart 3:**

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee, Domestic Partner & Domestic Partner's child(ren)		
					INDIVIDUAL-2 ADULTS+CHILD(REN)		
MEDICAL PLANS					Annual	Semimonthly	Weekly
CareFirst (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$14,587.68	\$607.82	\$280.53
CareFirst (union)	\$10,629.84	\$15,456.48	\$22,222.44	\$27,816.72	\$17,186.88	\$716.12	\$330.52
EHP Classic (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$14,587.68	\$607.82	\$280.53
BlueChoice (union)	\$13,001.88	\$18,906.00	\$27,181.32	\$34,023.84	\$21,021.96	\$875.92	\$404.27
Kaiser Permanente (non-union)	\$7,318.92	\$13,905.12	\$15,368.88	\$21,955.92	\$14,637.00	\$609.88	\$281.48
Kaiser Permanente (union)	\$8,304.72	\$15,778.20	\$17,439.12	\$24,912.60	\$16,607.88	\$692.00	\$319.38
BCBS CDHP (non-union)<\$40,000	\$8,312.00	\$12,746.56	\$17,285.44	\$21,437.92	\$13,125.92	\$546.91	\$252.42
BCBS CDHP (non-union)>\$40,001<\$60,000	\$8,062.00	\$12,246.56	\$16,785.44	\$20,937.92	\$12,875.92	\$536.50	\$247.61
BCBS CDHP (non-union)	\$7,812.00	\$11,746.56	\$16,285.44	\$20,437.92	\$12,625.92	\$526.08	\$242.81
BCBS HI/HHWP (PPP)	\$24,361.44	\$48,722.88	\$48,722.88	\$73,084.32	\$48,722.88	\$2,030.12	\$936.98
DENTAL PLANS							
Delta Standard (non-union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$1,000.08	\$41.67	\$19.23
Delta Standard (union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$1,000.08	\$41.67	\$19.23
Delta Enhanced (non-union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$1,361.76	\$56.74	\$26.19
Delta Enhanced (union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$1,361.76	\$56.74	\$26.19
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$118.68	\$4.95	\$2.28
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000	\$0.011 per \$1,000	\$0.011 per \$1,000/24	
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000	\$0.011 per \$1,000	\$0.011 per \$1,000/24	

**Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2023 (Chart 4 of 5)**

**Chart 4:**

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee, Employee's child(ren), Domestic Partner, & Domestic Partner's child(ren)		
					ADULT+CHILD(REN)-2 ADULTS+CHILD(REN)		
MEDICAL PLANS					Annual	Semimonthly	Weekly
CareFirst (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$10,041.84	\$418.41	\$193.11
CareFirst (union)	\$10,629.84	\$15,456.48	\$22,222.44	\$27,816.72	\$12,360.24	\$515.01	\$237.70
EHP Classic (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$10,041.84	\$418.41	\$193.11
BlueChoice (union)	\$13,001.88	\$18,906.00	\$27,181.32	\$34,023.84	\$15,117.84	\$629.91	\$290.73
Kaiser Permanente (non-union)	\$7,318.92	\$13,905.12	\$15,368.88	\$21,955.92	\$8,050.80	\$335.45	\$154.82
Kaiser Permanente (union)	\$8,304.72	\$15,778.20	\$17,439.12	\$24,912.60	\$9,134.40	\$380.60	\$175.66
BCBS CDHP (non-union)<\$40,000	\$8,312.00	\$12,746.56	\$17,285.44	\$21,437.92	\$8,691.36	\$362.14	\$167.14
BCBS CDHP (non-union)>\$40,001<\$60,000	\$8,062.00	\$12,246.56	\$16,785.44	\$20,937.92	\$8,691.36	\$362.14	\$167.14
BCBS CDHP (non-union)	\$7,812.00	\$11,746.56	\$16,285.44	\$20,437.92	\$8,691.36	\$362.14	\$167.14
BCBS HI/HHWP (PPP)	\$24,361.44	\$48,722.88	\$48,722.88	\$73,084.32	\$24,361.44	\$1,015.06	\$468.49
DENTAL PLANS							
Delta Standard (non-union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$701.52	\$29.23	\$13.49
Delta Standard (union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$701.52	\$29.23	\$13.49
Delta Enhanced (non-union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$955.20	\$39.80	\$18.37
Delta Enhanced (union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$955.20	\$39.80	\$18.37
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			

**Johns Hopkins University's Non-Dependent Domestic Partner Tax Chart Effective 1/1/2023 (Chart 5 of 5)**

**Chart 5:**

PLAN NAMES	ANNUAL FULL COST				IMPUTED TAXABLE INCOME		
	INDIVIDUAL	ADULT+CHILD(REN)	2 ADULTS	2 ADULTS+CHILD(REN)	Employee, Domestic Partner & Employee's child(ren)		
					2 ADULT+CHILD(REN)-2 ADULTS		
MEDICAL PLANS					Annual	Semimonthly	Weekly
CareFirst (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$4,797.84	\$199.91	\$92.27
CareFirst (union)	\$10,629.84	\$15,456.48	\$22,222.44	\$27,816.72	\$5,594.28	\$233.10	\$107.58
EHP Classic (non-union)	\$9,025.20	\$13,571.04	\$18,815.04	\$23,612.88	\$4,797.84	\$199.91	\$92.27
BlueChoice (union)	\$13,001.88	\$18,906.00	\$27,181.32	\$34,023.84	\$6,842.52	\$285.11	\$131.59
Kaiser Permanente (non-union)	\$7,318.92	\$13,905.12	\$15,368.88	\$21,955.92	\$6,587.04	\$274.46	\$126.67
Kaiser Permanente (union)	\$8,304.72	\$15,778.20	\$17,439.12	\$24,912.60	\$7,473.48	\$311.40	\$143.72
BCBS CDHP (non-union)<\$40,000	\$8,312.00	\$12,746.56	\$17,285.44	\$21,437.92	\$4,152.48	\$173.02	\$79.86
BCBS CDHP (non-union)>\$40,001<\$60,000	\$8,062.00	\$12,246.56	\$16,785.44	\$20,937.92	\$4,152.48	\$173.02	\$79.86
BCBS CDHP (non-union)>\$60,000	\$7,812.00	\$11,746.56	\$16,285.44	\$20,437.92	\$4,152.48	\$173.02	\$79.86
BCBS HI/HHWP (PPP)	\$24,361.44	\$48,722.88	\$48,722.88	\$73,084.32	\$24,361.44	\$1,015.06	\$468.49
DENTAL PLANS							
Delta Standard (non-union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$656.40	\$27.35	\$12.62
Delta Standard (union)	\$298.32	\$596.88	\$642.00	\$1,298.40	\$656.40	\$27.35	\$12.62
Delta Enhanced (non-union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$894.24	\$37.26	\$17.20
Delta Enhanced (union)	\$406.56	\$813.12	\$874.08	\$1,768.32	\$894.24	\$37.26	\$17.20
VISION PLANS							
EyeMed (non-union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
EyeMed (union)	\$64.80	\$116.52	\$116.52	\$183.48	\$66.96	\$2.79	\$1.29
ACCIDENTAL DEATH & DISMEMBERMENT							
\$10,000.00	\$0.014 per \$1,000			\$0.014 per \$1,000			
\$50,000.00	\$0.014 per \$1,000			\$0.025 per \$1,000			
1 - 8 times salary	\$0.014 per \$1,000			\$0.025 per \$1,000			