

(FOR EMPLOYERS WHO OFFER THE EMPLOYEES' PRESCRIPTION DRUG PLAN OR A PRIVATE PLAN)

DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
Medical Plans Available with Prescription Drug Program #201			
AETNA FREEDOM10 #018			
Single	\$799.96	—	\$799.96
Member & Spouse/Partner	\$801.56	\$798.36	\$1,599.92
Family	\$802.14	\$1,429.75	\$2,231.89
Parent & Child	\$800.66	\$631.27	\$1,431.93
NJ DIRECT10 #050			
Single	\$792.04	—	\$792.04
Member & Spouse/Partner	\$793.64	\$790.43	\$1,584.07
Family	\$794.22	\$1,415.57	\$2,209.79
Parent & Child	\$792.74	\$625.01	\$1,417.75
AETNA FREEDOM15 #180			
Single	\$761.75	—	\$761.75
Member & Spouse/Partner	\$763.35	\$760.14	\$1,523.49
Family	\$763.93	\$1,361.34	\$2,125.27
Parent & Child	\$762.45	\$601.08	\$1,363.53
NJ DIRECT15 #150			
Single	\$754.23	—	\$754.23
Member & Spouse/Partner	\$755.83	\$752.62	\$1,508.45
Family	\$756.41	\$1,347.87	\$2,104.28
Parent & Child	\$754.93	\$595.13	\$1,350.06
AETNA HMO #019			
Single	\$739.94	—	\$739.94
Member & Spouse/Partner	\$741.54	\$738.34	\$1,479.88
Family	\$742.12	\$1,322.31	\$2,064.43
Parent & Child	\$740.64	\$583.85	\$1,324.49
HORIZON HMO #011			
Single	\$732.54	—	\$732.54
Member & Spouse/Partner	\$734.14	\$730.93	\$1,465.07
Family	\$734.72	\$1,309.05	\$2,043.77
Parent & Child	\$733.24	\$578.00	\$1,311.24
PRESCRIPTION DRUG PROGRAM #201			
Single	\$196.39	—	\$196.39
Member & Spouse/Partner	\$196.39	\$196.40	\$392.79
Family	\$196.39	\$351.55	\$547.94
Parent & Child	\$196.39	\$155.16	\$351.55

(FOR EMPLOYERS WHO OFFER THE EMPLOYEES' PRESCRIPTION DRUG PLAN OR A PRIVATE PLAN)

DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
Medical Plans Available with Prescription Drug Program #205			
AETNA FREEDOM1525 #063			
Single	\$738.94	—	\$738.94
Member & Spouse/Partner	\$740.54	\$737.34	\$1,477.88
Family	\$741.12	\$1,320.53	\$2,061.65
Parent & Child	\$739.64	\$583.07	\$1,322.71
NJ DIRECT1525 #051			
Single	\$731.63	—	\$731.63
Member & Spouse/Partner	\$733.23	\$730.03	\$1,463.26
Family	\$733.81	\$1,307.43	\$2,041.24
Parent & Child	\$732.33	\$577.28	\$1,309.61
AETNA LIBERTY PLAN #067			
Single	\$565.67	—	\$565.67
Member & Spouse/Partner	\$567.27	\$564.07	\$1,131.34
Family	\$567.85	\$1,010.37	\$1,578.22
Parent & Child	\$566.37	\$446.18	\$1,012.55
OMNIA HEALTH PLAN #057			
Single	\$565.67	—	\$565.67
Member & Spouse/Partner	\$567.27	\$564.08	\$1,131.35
Family	\$567.85	\$1,010.37	\$1,578.22
Parent & Child	\$566.37	\$446.18	\$1,012.55
PRESCRIPTION DRUG PROGRAM #205			
Single	\$178.12	—	\$178.12
Member & Spouse/Partner	\$178.12	\$178.15	\$356.27
Family	\$178.12	\$318.84	\$496.96
Parent & Child	\$178.12	\$140.72	\$318.84
Medical Plans Available with Prescription Drug Program #206			
AETNA FREEDOM2030 #064			
Single	\$694.58	—	\$694.58
Member & Spouse/Partner	\$696.18	\$692.99	\$1,389.17
Family	\$696.76	\$1,241.13	\$1,937.89
Parent & Child	\$695.28	\$548.03	\$1,243.31
NJ DIRECT2030 #052			
Single	\$687.70	—	\$687.70
Member & Spouse/Partner	\$689.30	\$686.10	\$1,375.40
Family	\$689.88	\$1,228.81	\$1,918.69
Parent & Child	\$688.40	\$542.59	\$1,230.99
PRESCRIPTION DRUG PROGRAM #206			
Single	\$181.29	—	\$181.29
Member & Spouse/Partner	\$181.29	\$181.25	\$362.54
Family	\$181.29	\$324.50	\$505.79
Parent & Child	\$181.29	\$143.22	\$324.51

(FOR EMPLOYERS WHO OFFER THE EMPLOYEES' PRESCRIPTION DRUG PLAN OR A PRIVATE PLAN)

DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
Medical Plans Available with Prescription Drug Program #207			
AETNA FREEDOM2035 #066			
Single	\$597.34	—	\$597.34
Member & Spouse/Partner	\$598.94	\$595.74	\$1,194.68
Family	\$599.52	\$1,067.06	\$1,666.58
Parent & Child	\$598.04	\$471.20	\$1,069.24
NJ DIRECT2035 #056			
Single	\$591.42	—	\$591.42
Member & Spouse/Partner	\$593.02	\$589.82	\$1,182.84
Family	\$593.60	\$1,056.46	\$1,650.06
Parent & Child	\$592.12	\$466.52	\$1,058.64
PRESCRIPTION DRUG PROGRAM #207			
Single	\$163.16	—	\$163.16
Member & Spouse/Partner	\$163.16	\$163.14	\$326.30
Family	\$163.16	\$292.04	\$455.20
Parent & Child	\$163.16	\$128.89	\$292.05
High Deductible Health Plans with Built In Prescription Drug			
AETNA VALUE HD4000 #092			
Single	\$499.77	—	\$499.77
Member & Spouse/Partner	\$501.37	\$498.15	\$999.52
Family	\$501.95	\$892.41	\$1,394.36
Parent & Child	\$500.47	\$394.12	\$894.59
NJ DIRECT HD4000 #090			
Single	\$500.45	—	\$500.45
Member & Spouse/Partner	\$502.05	\$498.83	\$1,000.88
Family	\$502.63	\$893.62	\$1,396.25
Parent & Child	\$501.15	\$394.65	\$895.80
AETNA VALUE HD1500 #093			
Single	\$741.22	—	\$741.22
Member & Spouse/Partner	\$742.82	\$739.61	\$1,482.43
Family	\$743.40	\$1,324.60	\$2,068.00
Parent & Child	\$741.92	\$584.86	\$1,326.78
NJ DIRECT HD1500 #091			
Single	\$742.23	—	\$742.23
Member & Spouse/Partner	\$743.83	\$740.61	\$1,484.44
Family	\$744.41	\$1,326.41	\$2,070.82
Parent & Child	\$742.93	\$585.66	\$1,328.59

For copayments and deductibles, please refer to the *Plan Design Charts* on our Web site at: www.nj.gov/treasury/pensions

**(FOR EMPLOYERS WHO OFFER PRESCRIPTION DRUGS THROUGH THE SHBP
BASED ON THE MEDICAL PLAN THE SUBSCRIBER IS ENROLLED)**

**DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM**

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
AETNA FREEDOM10 #018			
Single	\$986.35	—	\$986.35
Member & Spouse/Partner	\$987.95	\$984.76	\$1,972.71
Family	\$988.53	\$1,763.40	\$2,751.93
Parent & Child	\$987.05	\$778.52	\$1,765.57
NJ DIRECT10 #050			
Single	\$935.24	—	\$935.24
Member & Spouse/Partner	\$936.84	\$933.65	\$1,870.49
Family	\$937.42	\$1,671.92	\$2,609.34
Parent & Child	\$935.94	\$738.15	\$1,674.09
AETNA FREEDOM15 #180			
Single	\$948.14	—	\$948.14
Member & Spouse/Partner	\$949.74	\$946.54	\$1,896.28
Family	\$950.32	\$1,694.99	\$2,645.31
Parent & Child	\$948.84	\$748.33	\$1,697.17
NJ DIRECT15 #150			
Single	\$890.57	—	\$890.57
Member & Spouse/Partner	\$892.17	\$888.98	\$1,781.15
Family	\$892.75	\$1,591.93	\$2,484.68
Parent & Child	\$891.27	\$702.84	\$1,594.11
AETNA HMO #019			
Single	\$926.33	—	\$926.33
Member & Spouse/Partner	\$927.93	\$924.74	\$1,852.67
Family	\$928.51	\$1,655.96	\$2,584.47
Parent & Child	\$927.03	\$731.11	\$1,658.14
HORIZON HMO #011			
Single	\$918.93	—	\$918.93
Member & Spouse/Partner	\$920.53	\$917.33	\$1,837.86
Family	\$921.11	\$1,642.70	\$2,563.81
Parent & Child	\$919.63	\$725.25	\$1,644.88
AETNA FREEDOM1525 #063			
Single	\$866.71	—	\$866.71
Member & Spouse/Partner	\$868.31	\$865.09	\$1,733.40
Family	\$868.89	\$1,549.24	\$2,418.13
Parent & Child	\$867.41	\$684.01	\$1,551.42
NJ DIRECT1525 #051			
Single	\$859.40	—	\$859.40
Member & Spouse/Partner	\$861.00	\$857.78	\$1,718.78
Family	\$861.58	\$1,536.14	\$2,397.72
Parent & Child	\$860.10	\$678.22	\$1,538.32

**(FOR EMPLOYERS WHO OFFER PRESCRIPTION DRUGS THROUGH THE SHBP
BASED ON THE MEDICAL PLAN THE SUBSCRIBER IS ENROLLED)**

**DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM**

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
AETNA FREEDOM2030 #064			
Single	\$822.36	—	\$822.36
Member & Spouse/Partner	\$823.96	\$820.73	\$1,644.69
Family	\$824.54	\$1,469.83	\$2,294.37
Parent & Child	\$823.06	\$648.96	\$1,472.02
NJ DIRECT2030 #052			
Single	\$815.47	—	\$815.47
Member & Spouse/Partner	\$817.07	\$813.86	\$1,630.93
Family	\$817.65	\$1,457.52	\$2,275.17
Parent & Child	\$816.17	\$643.53	\$1,459.70
AETNA FREEDOM2035 #066			
Single	\$712.33	—	\$712.33
Member & Spouse/Partner	\$713.93	\$710.73	\$1,424.66
Family	\$714.51	\$1,272.88	\$1,987.39
Parent & Child	\$713.03	\$562.03	\$1,275.06
NJ DIRECT2035 #056			
Single	\$706.40	—	\$706.40
Member & Spouse/Partner	\$708.00	\$704.82	\$1,412.82
Family	\$708.58	\$1,262.29	\$1,970.87
Parent & Child	\$707.10	\$557.36	\$1,264.46
AETNA LIBERTY PLAN #067			
Single	\$693.45	—	\$693.45
Member & Spouse/Partner	\$695.05	\$691.82	\$1,386.87
Family	\$695.63	\$1,239.07	\$1,934.70
Parent & Child	\$694.15	\$547.11	\$1,241.26
OMNIA HEALTH PLAN #057			
Single	\$693.45	—	\$693.45
Member & Spouse/Partner	\$695.05	\$691.82	\$1,386.87
Family	\$695.63	\$1,239.07	\$1,934.70
Parent & Child	\$694.15	\$547.11	\$1,241.26

**(FOR EMPLOYERS WHO OFFER PRESCRIPTION DRUGS THROUGH THE SHBP
BASED ON THE MEDICAL PLAN THE SUBSCRIBER IS ENROLLED)**

**DEPARTMENT OF THE TREASURY • DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM**

**LOCAL MONTHLY ACTIVE GROUP — LOCAL GOVERNMENT EMPLOYERS
MONTHLY RATES EFFECTIVE 1/1/2017 TO 12/31/2017**

PLAN/COVERAGE DESCRIPTION	EMPLOYEE SINGLE COST	DEPENDENT COST	TOTAL
AETNA VALUE HD4000 #092			
Single	\$499.77	—	\$499.77
Member & Spouse/Partner	\$501.37	\$498.15	\$999.52
Family	\$501.95	\$892.41	\$1,394.36
Parent & Child	\$500.47	\$394.12	\$894.59
NJ DIRECT HD4000 #090			
Single	\$500.45	—	\$500.45
Member & Spouse/Partner	\$502.05	\$498.83	\$1,000.88
Family	\$502.63	\$893.62	\$1,396.25
Parent & Child	\$501.15	\$394.65	\$895.80
AETNA VALUE HD1500 #093			
Single	\$741.22	—	\$741.22
Member & Spouse/Partner	\$742.82	\$739.61	\$1,482.43
Family	\$743.40	\$1,324.60	\$2,068.00
Parent & Child	\$741.92	\$584.86	\$1,326.78
NJ DIRECT HD1500 #091			
Single	\$742.23	—	\$742.23
Member & Spouse/Partner	\$743.83	\$740.61	\$1,484.44
Family	\$744.41	\$1,326.41	\$2,070.82
Parent & Child	\$742.93	\$585.66	\$1,328.59

For copayments and deductibles, please refer to the *Plan Design Charts* on our Web site at: www.nj.gov/treasury/pensions