



**Chapter 172 Part-Time Local Education Monthly Active Group**  
**Monthly Rates**  
 Effective 1/1/2022 to 12/31/2022

For employers who offer the Employees' Prescription Drug Plan or a private plan

PLAN/COVERAGE DESCRIPTION	MONTHLY RATES
Medical Plans Available with Prescription Drug Program #201	
<b>NJ DIRECT10 #050 — PPO Plan with \$10 Primary Care Copayment</b>	
Single	\$906.43
Member & Spouse/Partner	\$1,812.86
Family	\$2,592.39
Parent & Child	\$1,685.96
<b>NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment</b>	
Single	\$862.90
Member & Spouse/Partner	\$1,725.79
Family	\$2,467.89
Parent & Child	\$1,604.99
<b>PRESCRIPTION DRUG PROGRAM #201</b>	
Single	\$179.52
Member & Spouse/Partner	\$359.04
Family	\$513.43
Parent & Child	\$333.91
Medical Plan Available with Prescription Drug Program #298	
<b>NEW JERSEY EDUCATORS HEALTH PLAN #098 — PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment</b>	
Single	\$822.31
Member & Spouse/Partner	\$1,644.63
Family	\$2,351.82
Parent & Child	\$1,529.50
<b>PRESCRIPTION DRUG PROGRAM #298</b>	
Single	\$122.63
Member & Spouse/Partner	\$245.26
Family	\$350.72
Parent & Child	\$228.09

For copayments and deductibles, please refer to the *Plan Design Charts* on our website at: [www.nj.gov/treasury/pensions](http://www.nj.gov/treasury/pensions)