

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

OVER AGE CHILDREN OF STATE ACTIVE AND RETIRED GROUPS

RATES EFFECTIVE 1/1/2010 TO 12/31/2010

PLAN/COVERAGE DESCRIPTION	Monthly Rate	
	EMPLOYEES WITH SHBP EMPLOYEE PRESCRIPTION DRUG PLAN*	RETIREES WITH PRESCRIPTION DRUG PROVIDED THROUGH MEDICAL PLAN**
<u>NJ DIRECT15 - #150</u> Single	\$244.82	\$230.33
<u>NJ DIRECT10 - #050</u> Single	N/A	\$241.87
<u>NJ PLUS - #101</u> Single	\$233.26	N/A
<u>AETNA, INC. - #005</u> Single	\$244.21	N/A
<u>AETNA, INC. - #019,119</u> Single	\$249.09	\$245.74
<u>CIGNA HealthCare HMO - #006</u> Single	\$246.13	N/A
<u>CIGNA HealthCare HMO - #020,120</u> Single	\$251.05	\$248.20

* Premium includes cost of SHBP medical plan and SHBP Employee Prescription Drug Plan.

** Prescription Drug coverage administered by Medco

#100 Series Active Plans: NJ PLUS and HMO office visit copayment \$10 for Employees Sharing 5% of HMO Premium

#010 Series Retiree Plans: NJ DIRECT10 and HMO office visit copayment \$10

#001 Series Plans: NJ DIRECT15 and HMO office visit copayment \$15