

**DEPARTMENT OF THE TREASURY - DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY SCHOOL EMPLOYEES' HEALTH BENEFITS PROGRAM**

**OVER AGE CHILDREN OF LOCAL MONTHLY ACTIVE AND RETIRED GROUPS
LOCAL EDUCATION EMPLOYERS
RATES EFFECTIVE 1/1/2009-12/31/2009**

PLAN/COVERAGE DESCRIPTION	Monthly Rate		
	EMPLOYERS WITH SHBP EMPLOYEE PRESCRIPTION DRUG PLAN *	EMPLOYERS WITH PRIVATELY PROVIDED PRESCRIPTION DRUG PLAN **	EMPLOYERS WITHOUT PRESCRIPTION DRUG PLAN AND ALL RETIREES ***
<u>NJ DIRECT10 - #050</u>			
Single	\$200.24	\$150.72	\$180.87
<u>NJ DIRECT15 - #150</u>			
Single	\$193.01	\$143.49	\$172.18
<u>AETNA HMO - #019</u>			
Single	\$192.82	\$143.30	\$181.99
<u>CIGNA HEALTHCARE HMO - #020</u>			
Single	\$194.25	\$144.73	\$183.81

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

** Premium for SHBP medical plan only. See your employer for prescription drug coverage information and cost.

*** Prescription drug coverage provided through SHBP medical plan.