



**Chapter 172 Part-Time Active Group —
Local Education Employers
COBRA Monthly Rates - Aetna Plans
Effective 1/1/2025 to 12/31/2025**

For employers who offer prescription drugs through the medical plan in which the subscriber is enrolled

PLAN/COVERAGE DESCRIPTION	COBRA RATES
Freedom10 #018 — PPO Plan with \$10 Primary Care Copayment	
Single	\$1,777.51
Member & Spouse/Partner	\$3,555.02
Family	\$5,083.69
Parent & Child	\$3,306.16
Freedom15 #180 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,705.78
Member & Spouse/Partner	\$3,411.58
Family	\$4,878.54
Parent & Child	\$3,172.76
New Jersey Educators Health Plan #097 — PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment	
Single	\$1,286.22
Member & Spouse/Partner	\$2,572.44
Family	\$3,678.59
Parent & Child	\$2,392.36
Garden State Health Plan #099 - PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment	
Single	\$1,138.73
Member & Spouse/Partner	\$2,277.47
Family	\$3,256.78
Parent & Child	\$2,118.05

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



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Local Education Employers
COBRA Monthly Rates - Horizon Plans
Effective 1/1/2025 to 12/31/2025**

For employers who offer prescription drugs through the medical plan in which the subscriber is enrolled

PLAN/COVERAGE DESCRIPTION	COBRA RATES
NJ DIRECT10 #050 — PPO Plan with \$10 Primary Care Copayment	
Single	\$1,777.51
Member & Spouse/Partner	\$3,555.02
Family	\$5,083.69
Parent & Child	\$3,306.16
NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,705.78
Member & Spouse/Partner	\$3,411.58
Family	\$4,878.54
Parent & Child	\$3,172.76
New Jersey Educators Health Plan #098 — PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment	
Single	\$1,286.22
Member & Spouse/Partner	\$2,572.44
Family	\$3,678.59
Parent & Child	\$2,392.36

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