



Local Retired Group — Education Employers
Medicare and Non-Medicare Monthly Rates Effective 1/1/2020 to 12/31/2020
Medical Including Rx

PLAN/COVERAGE DESCRIPTION	NJ DIRECT ZERO #021 (28D)	NJ DIRECT10 #050 (270)			NJ DIRECT15 #150 (271)		
		Horizon Non-Medicare Retiree Subscriber	Aetna Medicare Advantage Subscriber	Split Vendor NJ DIRECT10 Cost	Horizon Non-Medicare Retiree Subscriber	Aetna Medicare Advantage Subscriber	Split Vendor NJ DIRECT15 Cost
Single — No Medicare	\$1,036.37	\$1,275.49		\$1,275.49	\$1,212.70		\$1,212.70
Single — On Medicare			\$324.60	\$324.60		\$304.88	\$304.88
Member & Spouse/Partner — No Medicare	\$2,259.28	\$2,780.53		\$2,780.53	\$2,643.68		\$2,643.58
Member & Spouse/Partner — One on Medicare	\$1,360.97	\$1,407.58	\$324.60	\$1,732.18	\$1,393.70	\$304.88	\$1,698.58
Member & Spouse/Partner — Both on Medicare			\$649.20	\$649.20		\$609.76	\$609.78
Family — No Medicare	\$2,570.19	\$3,163.18		\$3,163.18	\$3,007.49		\$3,007.49
Family — One on Medicare	\$1,775.49	\$1,762.13	\$324.60	\$2,086.73	\$1,744.69	\$304.88	\$2,049.57
Family — Both on Medicare		\$180.19	\$649.20	\$829.39	\$172.56	\$609.76	\$782.32
Parent & Child — No Medicare	\$1,450.89	\$1,785.67		\$1,785.67	\$1,697.77		\$1,697.77
Parent & Child — Retiree on Medicare		\$185.71	\$324.60	\$510.31	\$177.85	\$304.88	\$482.73

PLAN/COVERAGE DESCRIPTION	Horizon HMO #011 (286)	Horizon HMO #058 (27G)			NJ DIRECT1525 #051 (274)	Horizon HMO1525 #053 (287)	Horizon HMO1525 #059 (27H)		
		Horizon Non-Medicare Retiree Subscriber	Aetna Medicare Advantage Subscriber	Split Vendor Horizon HMO Cost			Horizon Non-Medicare Retiree Subscriber	Aetna Medicare Advantage Subscriber	Split Vendor Horizon HMO1525 Cost
Single — No Medicare	\$1,166.10	\$1,166.10		\$1,166.10	\$1,169.60	\$1,074.06	\$1,074.06		\$1,074.06
Single — On Medicare	\$506.19		\$352.75	\$352.75	\$424.00	\$448.43		\$317.23	\$317.23
Member & Spouse/Partner — No Medicare	\$2,542.33	\$2,542.33		\$2,542.33	\$2,549.71	\$2,341.43	\$2,341.43		\$2,341.23
Member & Spouse/Partner — One on Medicare	\$1,617.16	\$1,110.97	\$352.75	\$1,463.72	\$1,543.26	\$1,477.09	\$1,028.66	\$317.23	\$1,345.89
Member & Spouse/Partner — Both on Medicare	\$1,012.35		\$705.50	\$705.50	\$847.99	\$896.75		\$634.46	\$634.45
Family — No Medicare	\$2,891.95	\$2,891.95		\$2,891.95	\$2,900.57	\$2,663.63	\$2,663.63		\$2,663.63
Family — One on Medicare	\$1,932.54	\$1,436.35	352.75	\$1,779.10	\$1,862.40	\$1,767.56	\$1,319.13	\$317.23	\$1,636.36
Family — Both on Medicare	\$1,250.07	\$165.47	\$705.50	\$870.97	\$1,087.97	\$1,094.57	\$153.28	\$634.46	\$787.74
Parent & Child — No Medicare	\$1,632.82	\$1,632.82		\$1,632.82	\$1,637.39	\$1,503.68	1,503.68		\$1,503.68
Parent & Child — Retiree on Medicare	\$742.34	\$164.54	\$352.75	\$517.29	\$671.32	\$641.21	\$152.83	\$317.23	\$470.06



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (275)	Horizon HMO2030 #054 (288)	NJ DIRECT HD4000 #090 (280)
Single — No Medicare	\$1,120.52	\$1,028.31	\$746.52
Single — On Medicare	\$411.92	\$435.20	
Member & Spouse/Partner — No Medicare	\$2,442.81	\$2,241.77	\$1,627.42
Member & Spouse/Partner — One on Medicare	\$1,487.20	\$1,423.29	\$1,071.12
Member & Spouse/Partner — Both on Medicare	\$823.85	\$870.35	
Family — No Medicare	\$2,778.97	\$2,550.28	\$1,851.38
Family — One on Medicare	\$1,792.81	\$1,701.28	\$1,369.72
Family — Both on Medicare	\$1,056.97	\$1,061.83	
Parent & Child — No Medicare	\$1,568.78	\$1,439.67	\$1,045.12
Parent & Child — Retiree on Medicare	\$652.17	\$621.74	