



Local Retired Group — Education Employers
Medicare and Non-Medicare Monthly Rates Effective 1/1/2021 to 12/31/2021
Medical Only — For Retirees With Medicare Part D Benefits

PLAN/COVERAGE DESCRIPTION	NJ DIRECT10 #050 (270)			NJ DIRECT15 #150 (271)			NEW JERSEY EDUCATORS HEALTH PLAN #098 (28F)
	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	\$811.16		\$811.16	\$811.16		\$811.16	\$811.16
Single — On Medicare		\$125.81	\$125.81		\$106.09	\$106.09	
Member & Spouse/Partner — No Medicare	\$1,768.34		\$1,768.34	\$1,768.34		\$1,768.34	\$1,768.34
Member & Spouse/Partner — One on Medicare	\$957.17	\$125.81	\$1,082.98	\$957.17	\$106.09	\$1,063.26	
Member & Spouse/Partner — Both on Medicare		\$251.62	\$251.62		\$212.18	\$212.18	
Family — No Medicare	\$2,011.69		\$2,011.69	\$2,011.69		\$2,011.69	\$2,011.69
Family — One on Medicare	\$1,200.52	\$125.81	\$1,326.33	\$1,200.52	\$106.09	\$1,306.61	
Family — Both on Medicare	\$67.57	\$251.62	\$319.19	\$59.94	\$212.18	\$272.12	
Parent & Child — No Medicare	\$1,135.62		\$1,135.62	\$1,135.62		\$1,135.62	\$1,135.62
Parent & Child — Retiree on Medicare	\$69.64	\$125.81	\$195.45	\$61.78	\$106.09	\$167.87	

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	\$811.16	\$811.16		\$811.16	\$811.16	\$811.16	\$811.16		\$811.16
Single — On Medicare	\$330.55	N/A	\$151.26	\$151.26	\$250.95	\$267.96		\$115.83	\$115.83
Member & Spouse/Partner — No Medicare	\$1,768.34	\$1,768.34		\$1,768.34	\$1,768.34	\$1,768.34	\$1,768.34		\$1,768.34
Member & Spouse/Partner — One on Medicare	\$1,287.72	\$957.17	\$151.26	\$1,108.43	\$1,208.12	\$1,225.13	\$957.17	\$115.83	\$1,073.00
Member & Spouse/Partner — Both on Medicare	\$661.08	N/A	\$302.52	\$302.52	\$501.89	\$535.78		\$231.66	\$231.66
Family — No Medicare	\$2,011.69	\$2,011.69		\$2,011.69	\$2,011.69	\$2,011.69	\$2,011.69		\$2,011.69
Family — One on Medicare	\$1,531.07	\$1,200.52	\$151.26	\$1,351.78	\$1,451.47	\$1,468.48	\$1,200.52	\$115.83	\$1,316.35
Family — Both on Medicare	\$816.70	\$71.14	\$302.52	\$373.66	\$643.92	\$626.68	\$39.20	\$231.66	\$270.86
Parent & Child — No Medicare	\$1,135.62	\$1,135.62		\$1,135.62	\$1,135.62	\$1,135.62	\$1,135.62		\$1,135.62
Parent & Child — Retiree on Medicare	\$484.79	\$70.50	\$151.26	\$221.76	\$397.31	\$349.58	\$35.25	\$115.83	\$151.08



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (275)	Horizon HMO2030 #054 (288)
Single — No Medicare	\$811.16	\$811.16
Single — On Medicare	\$235.85	\$251.51
Member & Spouse/Partner — No Medicare	\$1,768.34	\$1,768.34
Member & Spouse/Partner — One on Medicare	\$1,193.02	\$1,208.68
Member & Spouse/Partner — Both on Medicare	\$471.70	\$502.97
Family — No Medicare	\$2,011.69	\$2,011.69
Family — One on Medicare	\$1,436.37	\$1,452.03
Family — Both on Medicare	\$605.17	\$585.80
Parent & Child — No Medicare	\$1,135.62	\$1,135.62
Parent & Child — Retiree on Medicare	\$373.39	\$325.15