



Local Retired Group — Government Employers
Medicare and Non-Medicare Monthly Rates Effective 1/1/2023 to 12/31/2023
Medical Including Rx

PLAN/COVERAGE DESCRIPTION	NJ DIRECT #027 (26L)	NJ DIRECT10 #050 (250)			NJ DIRECT15 #150 (251)		
		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	\$1,234.75	\$1,427.65		\$1,427.65	\$1,353.84		\$1,353.84
Single — On Medicare			\$384.38	\$384.38		\$366.68	\$366.68
Member & Spouse/Partner — No Medicare	\$2,691.83	\$3,112.36		\$3,112.36	\$2,951.43		\$2,951.43
Member & Spouse/Partner — One on Medicare	\$1,841.46	\$1,684.71	384.38	\$2,069.09	\$1,597.59	\$366.68	\$1,964.27
Member & Spouse/Partner — Both on Medicare			\$768.76	\$768.76		\$733.36	\$733.36
Family — No Medicare	\$3,062.28	\$3,540.64		\$3,540.64	\$3,357.57		\$3,357.57
Family — One on Medicare	\$2,211.91	\$2,112.99	\$384.38	\$2,497.37	\$2,003.73	\$366.68	\$2,370.41
Family — Both on Medicare			\$768.76	\$1,454.10	\$649.89	\$733.36	\$1,383.25
Parent & Child — No Medicare	\$1,728.68	\$1,998.74		\$1,998.74	\$1,895.40		\$1,895.40
Parent & Child — Retiree on Medicare	\$878.31	\$571.09	\$384.38	\$955.47	\$541.56	\$366.68	\$908.24

PLAN/COVERAGE DESCRIPTION	Horizon HMO #011 (266)	Horizon HMO #058 (25G)			NJ DIRECT1525 #051 (254)	Horizon HMO1525 #053 (267)	Horizon HMO1525 #059 (25H)		
		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	\$1,314.47	\$1,314.47		\$1,314.47	\$1,295.75	\$1,190.28	\$1,190.28		\$1,190.28
Single — On Medicare	\$594.06		\$443.64	\$443.64	\$477.16	\$387.29		\$366.84	\$366.84
Member & Spouse/Partner — No Medicare	\$2,865.92	\$2,865.92		\$2,865.92	\$2,824.82	\$2,594.86	\$2,594.86		\$2,594.86
Member & Spouse/Partner — One on Medicare	\$2,145.51	\$1,551.45	\$443.64	\$1,995.09	\$2,006.23	\$1,791.87	\$1,404.58	\$366.84	\$1,771.42
Member & Spouse/Partner — Both on Medicare	\$1,188.11		\$887.28	\$887.28	\$954.34	\$774.58		\$733.68	\$733.68
Family — No Medicare	\$3,260.61	\$3,260.61		\$3,260.61	\$3,213.53	\$2,951.93	\$2,951.93		\$2,951.93
Family — One on Medicare	\$2,540.20	\$1,946.14	\$443.64	\$2,389.78	\$2,394.94	\$2,148.94	\$1,761.65	\$366.84	\$2,128.49
Family — Both on Medicare	\$1,819.79	\$631.67	\$887.28	\$1,518.95	\$1,576.35	\$1,345.95	\$571.38	\$733.68	\$1,305.06
Parent & Child — No Medicare	\$1,840.67	\$1,840.67		\$1,840.67	\$1,814.11	\$1,666.43	\$1,666.43		\$1,666.43
Parent & Child — Retiree on Medicare	\$1,120.26	\$526.20	\$443.64	\$969.84	\$995.52	\$863.44	\$476.15	\$366.84	\$842.99



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (255)	Horizon HMO2030 #054 (268)
Single — No Medicare	\$1,232.03	\$1,131.20
Single — On Medicare	\$463.36	\$538.15
Member & Spouse/Partner — No Medicare	\$2,685.89	\$2,466.08
Member & Spouse/Partner — One on Medicare	\$1,917.22	\$1,873.03
Member & Spouse/Partner — Both on Medicare	\$926.77	\$1,076.35
Family — No Medicare	\$3,055.49	\$2,805.43
Family — One on Medicare	\$2,286.82	\$2,212.38
Family — Both on Medicare	\$1,518.15	\$1,619.33
Parent & Child — No Medicare	\$1,724.86	\$1,583.72
Parent & Child — Retiree on Medicare	\$956.19	\$990.67

PLAN/COVERAGE DESCRIPTION	OMNIA HEALTH PLAN #057 (26P)	NJ DIRECT HD1500 #091 (261)	NJ DIRECT HD4000 #090 (260)
Single — No Medicare	\$1,037.75	\$1,038.75	\$710.80
Single — On Medicare			
Member & Spouse/Partner — No Medicare	\$2,262.33	\$2,264.48	\$1,549.56
Member & Spouse/Partner — One on Medicare	\$1,608.96	\$1,610.11	\$1,223.14
Member & Spouse/Partner — Both on Medicare			
Family — No Medicare	\$2,573.67	\$2,576.11	\$1,762.80
Family — One on Medicare	\$1,920.30	\$1,921.74	\$1,436.38
Family — Both on Medicare			
Parent & Child — No Medicare	\$1,452.88	\$1,454.27	\$995.14
Parent & Child — Retiree on Medicare			