

State Monthly Active Group Monthly Rates – Aetna Plans

Effective 1/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Program #20	03
Freedom15 #180 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,193.48
Member & Spouse/Partner	\$2,386.96
Family	\$3,413.35
Parent & Child	\$2,219.87
Aetna HMO #019 — HMO Plan with \$15 Primary Care Copayment	
Single	\$1,143.47
Member & Spouse/Partner	\$2,286.94
Family	\$3,270.32
Parent & Child	\$2,126.85
PRESCRIPTION DRUG PROGRAM #203	
Single	\$313.74
Member & Spouse/Partner	\$627.48
Family	\$897.30
Parent & Child	\$583.56
Medical Plans Available with Prescription Drug Program #20	04
Freedom* #031 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,082.62
Member & Spouse/Partner	\$2,165.24
Family	\$3,096.29
Parent & Child	\$2,013.67
Freedom 2019* #032 — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,076.93
Member & Spouse/Partner	\$2,153.86
Family	\$3,080.02
Parent & Child	\$2,003.09
PRESCRIPTION DRUG PROGRAM #204	
Single	\$282.89
Member & Spouse/Partner	\$565.78
Family	\$809.07
Parent & Child	\$526.18
Medical Plans Available with Prescription Drug Program #20	05
Freedom1525 #063 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment	
Single	\$1,160.06
Member & Spouse/Partner	\$2,320.12
Family	\$3,317.77
Parent & Child	\$2,157.71
PRESCRIPTION DRUG PROGRAM #205	,
Single	\$284.55
Member & Spouse/Partner	\$569.10
Family	\$813.81
Parent & Child	\$529.26

^{*} Members hired before July 1, 2019, will be enrolled in Freedom. Members hired after July 1, 2019, will be enrolled in Freedom 2019.



State Monthly Active Group Monthly Rates – Aetna Plans Effective 1/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Progr	ram #206
Freedom2030 #064 — PPO Plan with \$20 Primary Care / \$30 Specialist Care Copayme.	nt
Single	\$1,090.82
Member & Spouse/Partner	\$2,181.64
Family	\$3,119.75
Parent & Child	\$2,028.93
PRESCRIPTION DRUG PROGRAM #206	·
Single	\$289.61
Member & Spouse/Partner	\$579.22
Family	\$828.28
Parent & Child	\$538.67
Medical Plans Available with Prescription Drug Progr	ram #207
Freedom2035 #066 — PPO Plan with \$20 Primary Care / \$35 Specialist Care Copayment	nt
Single	\$938.12
Member & Spouse/Partner	\$1,876.24
Family	\$2,683.02
Parent & Child	\$1,744.90
PRESCRIPTION DRUG PROGRAM #207	
Single	\$260.67
Member & Spouse/Partner	\$521.34
Family	\$745.52
Parent & Child	\$484.85
Medical Plans Available with Prescription Drug Progr	ram #209
Aetna Liberty Plus #067 — Tiered Plan with \$5 Primary Care / \$20 Specialist Care Cop.	ayment for Tier 1
Single	\$797.89
Member & Spouse/Partner	\$1,595.78
Family	\$2,281.97
Parent & Child	\$1,484.08
PRESCRIPTION DRUG PROGRAM #209	
Single	\$210.34
Member & Spouse/Partner	\$420.68
Family	\$601.57
Parent & Child	\$391.23



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Effective 1/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
High Deductible Health Plans with Built In Prescription Drug	<u> </u>
Freedom HDHigh #092 — High Deductible Health Plan with \$4,100 In-Network Deductible	
Single	\$799.02
Member & Spouse/Partner	\$1,598.04
Family	\$2,285.20
Parent & Child	\$1,486.18
Freedom HDLow #093 — High Deductible Health Plan with \$1,600 In-Network Deductible	
Single	\$1,185.00
Member & Spouse/Partner	\$2,370.00
Family	\$3,389.10
Parent & Child	\$2,204.10

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



State Monthly Active Group Monthly Rates – Horizon Plans

Effective 1/1/2026 to 12/31/2026

Single \$1,193.48	PLAN/COVERAGE DESCRIPTION	TOTAL
Single \$1,193.48	Medical Plans Available with Prescription Drug Program #20)3
Member & Spouse/Partner \$2,386.96 Family \$3,413.35 Family \$3,413.35 Parent & Child \$2,219.87 Horizon HMO #011 — HMO Plan with \$15 Primary Care Copayment Single \$1,143.47 Member & Spouse/Partner \$2,286.94 Family \$3,270.32 Parent & Child \$2,126.85 PRESCRIPTION DRUG PROGRAM #203 Single \$313.74 Member & Spouse/Partner \$627.48 Family \$897.30 Parent & Child \$859.36 Medical Plans Available with Prescription Drug Program #204 NJ DIRECT*#027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,155.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$3,080.02 Parent & Child \$2,033.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$3,080.02 Parent & Child \$2,033.09 PRESCRIPTION DRUG PROGRAM #204 Single \$3,000.07 Parent & Child \$2,033.09 PRESCRIPTION DRUG PROGRAM #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,230.12 Family \$3,317.77 Parent & Child \$2,257.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,350.12 Family \$3,317.77 Parent & Spouse/Partner \$2,350.12 Family \$3,317.77 Parent & Spouse/Partner \$2,350.12 Single \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,455.51 Member & Spouse/Partner \$3,669.10 Family \$3,317.77 Parent & Spouse/Partner \$3,669.10 Famil	NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment	
Family \$3,413.35 Parent & Child \$5,219.87 Horizon HMO #011 — HMO Pian with \$15 Primary Care Copayment Single \$1,143.47 Member & Spouse/Partner \$2,286.94 Family \$3,270.32 Parent & Child \$2,126.85 PRESCRIPTION DRUG PROGRAM #203 Single \$313.74 Member & Spouse/Partner \$62,748 Family \$3897.30 Parent & Child \$5897.30 Parent & Child \$5897.30 Parent & Child \$5897.30 Parent & Child \$5897.30 Parent & Child \$583.56 Medical Plans Available with Prescription Drug Program #204 NJ DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$5,036.70 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,165.38 Family \$3,080.02 Parent & Child \$2,030.09 PRESCRIPTION DRUG PROGRAM #204 Single \$1,076.93 Member & Spouse/Partner \$2,165.38 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$2,003.09 PRESCRIPTION DRUG PROGRAM #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,201.27 Family \$3,317.77 Parent & Child \$2,217.71 PRESCRIPTION DRUG PROGRAM #205 Single \$3,317.77 Parent & Child \$2,217.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,255.57 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,255.57 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,265.57 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,265.57 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,565.71 PRESCRIPTION DRUG PROGRAM #205	Single	\$1,193.48
Parent & Child	Member & Spouse/Partner	\$2,386.96
Horizon HMO #011 — HMO Plan with \$15 Primary Care Copayment S1,143,47	Family	\$3,413.35
Single \$1,143.47 Member & Spouse/Partner \$2,286.94 Family \$3,270.32 Parent & Child \$2,126.85 PRESCRIPTION DRUG PROGRAM #203 Single \$313.74 Member & Spouse/Partner \$627.48 Family \$897.30 Parent & Child \$583.56 Medical Plans Available with Prescription Drug Program #204 NJ DIRECT*#027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,215.67 NJ DIRECT 2019*#030 — PPO Plan with \$15 Primary Care Copayment \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 \$2,003.09 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$2,320.12	Parent & Child	\$2,219.87
Member & Spouse/Partner \$2,286.94 Family \$3,270.32 Parent & Child \$2,126.85 PRESCRIPTION DRUG PROGRAM #203 Single \$313.74 Member & Spouse/Partner \$627.48 Family \$897.30 Parent & Child \$583.56 Family \$8897.30 Parent & Child \$583.56 Medical Plans Available with Prescription Drug Program #204 NJ DRECT*#027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019*#030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$2,003.09 Parent & Child	Horizon HMO #011 — HMO Plan with \$15 Primary Care Copayment	·
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Parent & Child \$2,126.85 PRESCRIPTION DRUG PROGRAM #203 Single \$313.74 Member & Spouse/Partner \$627.48 Family \$897.30 Parent & Child \$588.56 Medical Plans Available with Prescription Drug Program #204 NJ DIRECT*#027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$556.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$3,307.77 Parent & Child \$2,301.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,455 Member & Spouse/Partner \$569.10 Family \$3,31.77 Parent & Child \$2,455 Member & Spouse/Partner \$569.10 Family \$3,31.77	Member & Spouse/Partner	\$2,286.94
Single \$313.74	Family	\$3,270.32
Single Single Single Single Single Single Secrite	Parent & Child	\$2,126.85
Member & Spouse/Partner \$627.48 Family \$897.30 Parent & Child \$583.56 Medical Plans Available with Prescription Drug Program #204 My DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 \$2003.09 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,3,317.77 Parent & Child \$2,157.71 <td< td=""><td>PRESCRIPTION DRUG PROGRAM #203</td><td>•</td></td<>	PRESCRIPTION DRUG PROGRAM #203	•
Saprant & Child Saprant &	Single	\$313.74
Parent & Child S583.56 Medical Plans Available with Prescription Drug Program #204 NJ DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment Single	Member & Spouse/Partner	\$627.48
Medical Plans Available with Prescription Drug Program #204 NJ DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,30.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$2,20.10 PRESCRIPTION DRUG PROGRAM #205 Single \$2,245.55 Member & Spouse/Partner \$569.10 Family \$813.81	Family	\$897.30
NJ DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment	Parent & Child	\$583.56
Single \$1,082.62 Member & Spouse/Partner \$2,165.24 Family \$3,096.29 Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,330.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Medical Plans Available with Prescription Drug Program #20	94
Section Sect	NJ DIRECT* #027 — PPO Plan with \$15 Primary Care Copayment	
Samily S	Single	\$1,082.62
Parent & Child \$2,013.67 NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Member & Spouse/Partner	\$2,165.24
NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment \$1,076.93	Family	\$3,096.29
Single \$1,076.93 Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Parent & Child	\$2,013.67
Member & Spouse/Partner \$2,153.86 Family \$3,080.02 Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	NJ DIRECT 2019* #030 — PPO Plan with \$15 Primary Care Copayment	·
\$3,080.02	Single	\$1,076.93
Parent & Child \$2,003.09 PRESCRIPTION DRUG PROGRAM #204 \$282.89 Single \$565.78 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Member & Spouse/Partner	\$2,153.86
PRESCRIPTION DRUG PROGRAM #204 Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Family	\$3,080.02
Single \$282.89 Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Parent & Child	\$2,003.09
Member & Spouse/Partner \$565.78 Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	PRESCRIPTION DRUG PROGRAM #204	·
Family \$809.07 Parent & Child \$526.18 Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Single	\$282.89
Social Nation	Member & Spouse/Partner	\$565.78
Medical Plans Available with Prescription Drug Program #205 NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Family	\$809.07
NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Parent & Child	\$526.18
Single \$1,160.06 Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Medical Plans Available with Prescription Drug Program #20)5
Member & Spouse/Partner \$2,320.12 Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	NJ DIRECT1525 #051 — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment	
Family \$3,317.77 Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Single	\$1,160.06
Parent & Child \$2,157.71 PRESCRIPTION DRUG PROGRAM #205 \$284.55 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Member & Spouse/Partner	\$2,320.12
PRESCRIPTION DRUG PROGRAM #205 Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Family	\$3,317.77
Single \$284.55 Member & Spouse/Partner \$569.10 Family \$813.81	Parent & Child	\$2,157.71
Member & Spouse/Partner \$569.10 Family \$813.81	PRESCRIPTION DRUG PROGRAM #205	•
Family \$813.81	Single	\$284.55
Family \$813.81	Member & Spouse/Partner	\$569.10
	Family	
	Parent & Child	

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PRESCRIPTION DRUG PROGRAM #207	
Single	\$260.67
Member & Spouse/Partner	\$521.34
Family	\$745.52
Parent & Child	\$484.85
Medical Plans Available with Prescription Drug Pro	ogram #209
Horizon OMNIA #057 — Tiered Plan with \$5 Primary Care / \$20 Specialist Care Copa	ayment for Tier 1
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Member & Spouse/Partner	\$1,595.78
Family	\$2,281.97
Parent & Child	\$1,484.08
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