



State Monthly Active Group
Monthly Rates – Aetna Plans
 Effective 7/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Program #203	
26 Freedom 15 #18A — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,169.25
Member & Spouse/Partner	\$2,338.50
Family	\$3,344.06
Parent & Child	\$2,174.81
26 Aetna HMO #011 — HMO Plan with \$15 Primary Care Copayment	
Single	\$1,128.46
Member & Spouse/Partner	\$2,256.93
Family	\$3,227.41
Parent & Child	\$2,098.94
PRESCRIPTION DRUG PROGRAM #203	
Single	\$289.42
Member & Spouse/Partner	\$578.84
Family	\$827.74
Parent & Child	\$538.32
Medical Plans Available with Prescription Drug Program #204	
26 Freedom 03A — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,057.49
Member & Spouse/Partner	\$2,114.97
Family	\$3,024.41
Parent & Child	\$1,966.92
PRESCRIPTION DRUG PROGRAM #204	
Single	\$264.07
Member & Spouse/Partner	\$528.14
Family	\$755.24
Parent & Child	\$491.17
Medical Plans Available with Prescription Drug Program #2A5	
26 Freedom 1525 #06D — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment	
Single	\$1,136.35
Member & Spouse/Partner	\$2,272.71
Family	\$3,249.97
Parent & Child	\$2,113.61
PRESCRIPTION DRUG PROGRAM #2A5	
Single	\$265.46
Member & Spouse/Partner	\$530.93
Family	\$759.22
Parent & Child	\$493.76



**State Monthly Active Group
Monthly Rates – Aetna Plans**
Effective 7/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Program #2A6	
26 Freedom 2030 #06E— PPO Plan with \$20 Primary Care / \$30 Specialist Care Copayment	
Single	\$1,068.75
Member & Spouse/Partner	\$2,137.50
Family	\$3,056.63
Parent & Child	\$1,987.88
PRESCRIPTION DRUG PROGRAM #2A6	
Single	\$268.13
Member & Spouse/Partner	\$536.25
Family	\$766.84
Parent & Child	\$498.71
Medical Plans Available with Prescription Drug Program #2A7	
26 Freedom 2035 #06G— PPO Plan with \$20 Primary Care / \$35 Specialist Care Copayment	
Single	\$924.92
Member & Spouse/Partner	\$1,849.84
Family	\$2,645.26
Parent & Child	\$1,720.35
PRESCRIPTION DRUG PROGRAM #2A7	
Single	\$245.59
Member & Spouse/Partner	\$491.17
Family	\$702.38
Parent & Child	\$456.79
Medical Plans Available with Prescription Drug Program #2A9	
26 Aetna Liberty Plus #06H— Tiered Plan with \$5 Primary Care / \$20 Specialist Care Copayment for Tier 1	
Single	\$787.42
Member & Spouse/Partner	\$1,574.84
Family	\$2,252.03
Parent & Child	\$1,464.61
PRESCRIPTION DRUG PROGRAM #2A9	
Single	\$196.23
Member & Spouse/Partner	\$392.46
Family	\$561.22
Parent & Child	\$364.99
High Deductible Health Plans with Built In Prescription Drug	
26 Freedom HDHigh #09C — High Deductible Health Plan with \$4,100 In-Network Deductible	
Single	\$786.01
Member & Spouse/Partner	\$1,572.00
Family	\$2,247.97
Parent & Child	\$1,461.97
26 Freedom HDLow #09D — High Deductible Health Plan with \$1,600 In-Network Deductible	
Single	\$1,164.95
Member & Spouse/Partner	\$2,329.91
Family	\$3,331.76
Parent & Child	\$2,166.82

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 7/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Program #203	
26 NJ DIRECT 15 #15A — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,169.25
Member & Spouse/Partner	\$2,338.50
Family	\$3,344.06
Parent & Child	\$2,174.81
26 Horizon HMO #01A— HMO Plan with \$15 Primary Care Copayment	
Single	\$1,128.46
Member & Spouse/Partner	\$2,256.93
Family	\$3,227.41
Parent & Child	\$2,098.94
PRESCRIPTION DRUG PROGRAM #203	
Single	\$289.42
Member & Spouse/Partner	\$578.84
Family	\$827.74
Parent & Child	\$538.32
Medical Plans Available with Prescription Drug Program #204	
26 NJ DIRECT #02E — PPO Plan with \$15 Primary Care Copayment	
Single	\$1,057.49
Member & Spouse/Partner	\$2,114.97
Family	\$3,024.41
Parent & Child	\$1,966.92
PRESCRIPTION DRUG PROGRAM #204	
Single	\$264.07
Member & Spouse/Partner	\$528.14
Family	\$755.24
Parent & Child	\$491.17
Medical Plans Available with Prescription Drug Program #2A5	
26 NJ DIRECT 1525 #05B — PPO Plan with \$15 Primary Care / \$25 Specialist Care Copayment	
Single	\$1,136.35
Member & Spouse/Partner	\$2,272.71
Family	\$3,249.97
Parent & Child	\$2,113.61
PRESCRIPTION DRUG PROGRAM #2A5	
Single	\$265.46
Member & Spouse/Partner	\$530.93
Family	\$759.22
Parent & Child	\$493.76



**State Monthly Active Group
Monthly Rates – Horizon Plans**
Effective 7/1/2026 to 12/31/2026

PLAN/COVERAGE DESCRIPTION	TOTAL
Medical Plans Available with Prescription Drug Program #2A6	
26 NJ DIRECT 2030 #05C — PPO Plan with \$20 Primary Care / \$30 Specialist Care Copayment	
Single	\$1,068.75
Member & Spouse/Partner	\$2,137.50
Family	\$3,056.63
Parent & Child	\$1,987.88
PRESCRIPTION DRUG PROGRAM #2A6	
Single	\$268.13
Member & Spouse/Partner	\$536.25
Family	\$766.84
Parent & Child	\$498.71
Medical Plans Available with Prescription Drug Program #2A7	
26 NJ DIRECT 2035 #05D — PPO Plan with \$20 Primary Care / \$35 Specialist Care Copayment	
Single	\$924.92
Member & Spouse/Partner	\$1,849.84
Family	\$2,645.26
Parent & Child	\$1,720.35
PRESCRIPTION DRUG PROGRAM #2A7	
Single	\$245.59
Member & Spouse/Partner	\$491.17
Family	\$702.38
Parent & Child	\$456.79
Medical Plans Available with Prescription Drug Program #2A9	
26 Horizon OMNIA #05E — Tiered Plan with \$5 Primary Care / \$20 Specialist Care Copayment for Tier 1	
Single	\$787.42
Member & Spouse/Partner	\$1,574.84
Family	\$2,252.03
Parent & Child	\$1,464.61
PRESCRIPTION DRUG PROGRAM #2A9	
Single	\$196.23
Member & Spouse/Partner	\$392.46
Family	\$561.22
Parent & Child	\$364.99
High Deductible Health Plans with Built In Prescription Drug	
26 NJ DIRECT HDHigh #09A — High Deductible Health Plan with \$4,100 In-Network Deductible	
Single	\$786.01
Member & Spouse/Partner	\$1,572.00
Family	\$2,247.97
Parent & Child	\$1,461.97
NJ DIRECT HDLow #09B — High Deductible Health Plan with \$1,600 In-Network Deductible	
Single	\$1,164.95
Member & Spouse/Partner	\$2,329.91
Family	\$3,331.76
Parent & Child	\$2,166.82

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