

DEPARTMENT OF THE TREASURY - DIVISION OF PENSIONS AND BENEFITS
NEW JERSEY STATE HEALTH BENEFITS PROGRAM

**STATE MONTHLY ACTIVE GROUP
RATES EFFECTIVE 1/1/2009 to 12/31/2009**

For Employees Sharing 25% of Traditional Plan or 5% of HMO Premium;
NJ PLUS and HMO office visit copayment \$10

PLAN/COVERAGE DESCRIPTION	STATE CONTRIBUTION	EMPLOYEE CONTRIBUTION	TOTAL
<u>NJ PLUS - #101</u>			
Single	\$391.72	-----	\$391.72
Member & Spouse/Partner	\$853.83	-----	\$853.83
Family	\$1,016.26	-----	\$1,016.26
Parent & Child	\$589.31	-----	\$589.31
<u>TRADITIONAL PLAN - #102</u>			
Single	\$580.06	\$193.35	\$773.41
Member & Spouse/Partner	\$1,241.49	\$413.83	\$1,655.32
Family	\$1,477.59	\$492.52	\$1,970.11
Parent & Child	\$856.77	\$285.59	\$1,142.36
<u>AETNA HMO - #119</u>			
Single	\$418.84	\$22.04	\$440.88
Member & Spouse/Partner	\$942.40	\$49.59	\$991.99
Family	\$1,047.10	\$55.11	\$1,102.21
	\$586.37	\$30.86	\$617.23
<u>CIGNA HealthCare HMO - #120</u>			
Single	\$423.03	\$22.26	\$445.29
Member & Spouse/Partner	\$951.83	\$50.09	\$1,001.92
Family	\$1,057.57	\$55.66	\$1,113.23
Parent & Child	\$592.23	\$31.17	\$623.40
<u>PRESCRIPTION DRUG PROGRAM - #202</u>			
Single	\$122.75	-----	\$122.75
Member & Spouse/Partner	\$276.20	-----	\$276.20
Family	\$306.88	-----	\$306.88
Parent & Child	\$171.86	-----	\$171.86