

STATE OF NEW JERSEY — DEPARTMENT OF THE TREASURY  
DIVISION OF PENSIONS AND BENEFITS

**STATE HEALTH BENEFITS PROGRAM**

**Imputed Income for Civil Union or Domestic Partner Coverage**

**State Monthly Group - 1/1/2010 to 12/31/2010**

PLAN NAME AND NUMBER	IMPUTED INCOME		
	No Premium Share or 1.5% of salary member contribution	Premium Share (Member & Spouse or Domestic Partner)	Premium Share (Family)
NJ DIRECT15 — #150	\$470.80		
Aetna HMO — #005	\$469.33		
CIGNA HealthCare HMO — #006	\$474.02		
NJ PLUS — #101	\$439.90	N/A	N/A
Aetna HMO — #119	\$478.71	\$448.79	\$452.38
CIGNA HealthCare HMO — #120	\$483.50	\$453.28	\$456.91
Prescription Drug Plan — #202	\$131.83	N/A	N/A
Prescription Drug Plan — #203	\$129.24	N/A	N/A
Dental Expense Plan — #399	N/A	\$26.62	\$26.63
BeneCare — #301	N/A	\$15.90	\$15.90
Community Dental — #302	N/A	\$15.15	\$15.16
CIGNA Dental Health — #305	N/A	\$13.61	\$13.64
Healthplex — # 307	N/A	\$12.95	\$12.96
Horizon Dental Choice — #317	N/A	\$12.35	\$12.36
Aetna DMO — #319	N/A	\$13.18	\$13.21