



State Retired Group
Medicare and Non-Medicare Monthly Rates Effective 1/1/2021 to 12/31/2021
Medical Including Rx

PLAN/COVERAGE DESCRIPTION	CWA Unity DIRECT #023 (24E)	NJ DIRECT #024 (24F)	NJ DIRECT10 #050 (230)			NJ DIRECT15 #150 (231)		
			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	\$1,052.22	\$1,052.22	\$1,202.33		\$1,202.33	\$1,142.71		\$1,142.71
Single — On Medicare				\$360.17	\$360.17		\$342.03	\$342.03
Member & Spouse/Partner — No Medicare	\$2,293.84	\$2,293.84	\$2,621.09		\$2,621.09	\$2,491.10		\$2,491.10
Member & Spouse/Partner — One on Medicare	\$1,394.25	\$1,394.25	\$1,172.89	\$360.17	\$1,533.06	\$1,173.65	\$342.03	\$1,515.68
Member & Spouse/Partner — Both on Medicare				\$720.34	\$720.34		\$684.06	\$684.06
Family — No Medicare	\$2,609.50	\$2,609.50	\$2,981.81	N/A	\$2,981.81	\$2,833.92		\$2,833.92
Family — One on Medicare	\$1,815.14	\$1,815.14	\$1,484.45	\$360.17	\$1,844.62	\$1,485.48	\$342.03	\$1,827.51
Family — Both on Medicare			\$205.96	\$720.34	\$926.30	\$200.41	\$684.06	\$884.47
Parent & Child — No Medicare	\$1,473.11	\$1,473.11	\$1,683.26		\$1,683.26	\$1,599.77		\$1,599.77
Parent & Child — Retiree on Medicare			\$207.67	\$360.17	\$567.84	\$202.04	\$342.03	\$544.07

PLAN/COVERAGE DESCRIPTION	Horizon HMO #011 (246)	Horizon HMO #058 (23G)			NJ DIRECT1525 #051 (234)	Horizon HMO1525 #053 (247)	Horizon HMO1525 #059 (23H)			Horizon OMNIA #057 (24P)
		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	\$1,076.59	\$1,076.59		\$1,076.59	\$1,102.19	\$993.65	\$993.65		\$993.65	\$883.58
Single — On Medicare	\$628.12		\$453.33	\$453.33	\$475.73	\$588.68		\$388.83	\$388.83	
Member & Spouse/Partner — No Medicare	\$2,345.57	\$2,345.57		\$2,345.57	\$2,402.77	\$2,166.13	\$2,166.13		\$2,166.13	\$1,926.20
Member & Spouse/Partner — One on Medicare	\$1,462.55	\$834.43	\$453.33	\$1,287.76	\$1,355.16	\$1,353.30	\$764.62	\$388.83	\$1,153.45	\$1,225.61
Member & Spouse/Partner — Both on Medicare	\$1,256.22		\$906.66	\$906.66	\$951.46	\$1,177.33		\$777.66	\$777.66	
Family — No Medicare	\$2,668.42	\$2,668.42		\$2,668.42	\$2,733.42	\$2,464.21	\$2,464.21		\$2,464.21	\$2,191.28
Family — One on Medicare	\$1,731.80	\$1,103.68	\$453.33	\$1,557.01	\$1,632.66	\$1,603.06	\$1,014.38	\$388.83	\$1,403.21	\$1,579.02
Family — Both on Medicare	\$1,541.60	\$207.52	\$906.66	\$1,114.18	\$1,226.71	\$1,432.24	\$189.86	\$777.66	\$967.52	
Parent & Child — No Medicare	\$1,506.17	\$1,506.17		\$1,506.17	\$1,543.04	\$1,391.07	\$1,391.07		\$1,391.07	\$1,236.99
Parent & Child — Retiree on Medicare	\$921.12	\$213.13	\$453.33	\$666.46	\$753.24	\$851.21	\$193.81	\$388.83	\$582.64	



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (235)	Horizon HMO2030 #054 (248)
Single — No Medicare	\$1,054.63	\$951.34
Single — On Medicare	\$462.38	\$573.36
Member & Spouse/Partner — No Medicare	\$2,299.12	\$2,073.97
Member & Spouse/Partner — One on Medicare	\$1,306.27	\$1,307.42
Member & Spouse/Partner — Both on Medicare	\$924.79	\$1,146.78
Family — No Medicare	\$2,615.49	\$2,359.36
Family — One on Medicare	\$1,572.05	\$1,546.80
Family — Both on Medicare	\$1,192.29	\$1,394.53
Parent & Child — No Medicare	\$1,476.49	\$1,331.88
Parent & Child — Retiree on Medicare	\$732.11	\$828.65

PLAN/COVERAGE DESCRIPTION	NJ DIRECT HD1500 #091 (241)	NJ DIRECT HD4000 #090 (240)
Single — No Medicare	\$888.24	\$606.75
Single — On Medicare		
Member & Spouse/Partner — No Medicare	\$1,936.35	\$1,322.67
Member & Spouse/Partner — One on Medicare	\$1,230.27	\$606.75
Member & Spouse/Partner — Both on Medicare		
Family — No Medicare	\$2,202.84	\$1,504.68
Family — One on Medicare	\$1,585.54	\$849.41
Family — Both on Medicare		
Parent & Child — No Medicare	\$1,243.51	\$849.41
Parent & Child — Retiree on Medicare		