



Local Retired Group — Government Employers
Medicare and Non-Medicare Monthly Rates Effective 1/1/2024 to 12/31/2024
Medical Including Rx

PLAN/COVERAGE DESCRIPTION	NJ DIRECT #027 (26L)	NJ DIRECT10 #050 (250)			NJ DIRECT15 #150 (251)		
		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	\$1,327.53	\$1,531.14		\$1,531.14	\$1,453.52		\$1,453.52
Single — On Medicare			\$416.97	\$416.97		\$399.10	\$399.10
Member & Spouse/Partner — No Medicare	\$2,894.12	\$3,337.99		\$3,337.99	\$3,168.76		\$3,168.76
Member & Spouse/Partner — One on Medicare	\$1,983.56	\$1,806.85	\$416.97	\$2,223.82	\$1,715.24	\$399.10	\$2,114.34
Member & Spouse/Partner — Both on Medicare			\$833.98	\$833.98		\$798.24	\$798.24
Family — No Medicare	\$3,292.41	\$3,797.32		\$3,797.32	\$3,604.80		\$3,604.80
Family — One on Medicare	\$2,381.85	\$2,266.18	\$416.97	\$2,683.15	\$2,151.28	\$399.10	\$2,550.38
Family — Both on Medicare	\$1,471.33	\$734.99	\$833.98	\$1,568.97	\$697.71	\$798.24	\$1,495.95
Parent & Child — No Medicare	\$1,858.59	\$2,143.63		\$2,143.63	\$2,034.96		\$2,034.96
Parent & Child — Retiree on Medicare	\$948.03	\$612.49	\$416.97	\$1,029.46	\$581.44	\$399.10	\$980.54

PLAN/COVERAGE DESCRIPTION	Horizon HMO #011 (266)	Horizon HMO			NJ DIRECT1525 #051 (254)	Horizon HMO1525 #053 (267)	Horizon HMO1525		
		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	\$1,411.29	\$1,411.29		\$1,411.29	\$1,391.51	\$1,281.91	\$1,281.91		\$1,281.91
Single — On Medicare	\$657.72		\$481.84	\$481.84	\$529.17	\$433.09		\$398.24	\$398.24
Member & Spouse/Partner — No Medicare	\$3,077.06	\$3,077.06		\$3,077.06	\$3,033.60	\$2,794.60	\$2,794.60		\$2,794.60
Member & Spouse/Partner — One on Medicare	\$2,323.49	\$1,665.77	\$481.84	\$2,147.61	\$2,171.26	\$1,945.78	\$1,512.69	\$398.24	\$1,910.93
Member & Spouse/Partner — Both on Medicare	\$1,315.42		\$963.66	\$963.66	\$1,058.34	\$866.18		\$796.48	\$796.48
Family — No Medicare	\$3,500.86	\$3,500.86		\$3,500.86	\$3,451.03	\$3,179.17	\$3,179.17		\$3,179.17
Family — One on Medicare	\$2,747.29	\$2,089.57	\$481.84	\$2,571.41	\$2,588.69	\$2,330.35	\$1,897.26	\$398.24	\$2,295.50
Family — Both on Medicare	\$1,993.72	\$678.30	\$963.66	\$1,641.96	\$1,726.35	\$1,481.53	\$615.35	\$796.48	\$1,411.83
Parent & Child — No Medicare	\$1,976.30	\$1,976.30		\$1,976.30	\$1,948.19	\$1,794.71	\$1,794.71		\$1,794.71
Parent & Child — Retiree on Medicare	\$1,222.73	\$565.01	\$481.84	\$1,046.85	\$1,085.85	\$945.89	\$512.80	\$398.24	\$911.04



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (255)	Horizon HMO2030 #054 (268)	OMNIA HEALTH PLAN #057 (26P)	NJ DIRECT HDHigh #090 (260)	NJ DIRECT HDLow #091 (261)
Single — No Medicare	\$1,324.78	\$1,220.06	\$1,118.11	\$766.57	\$1,118.11
Single — On Medicare	\$514.59	\$594.54			
Member & Spouse/Partner — No Medicare	\$2,888.10	\$2,659.81	\$2,437.53	\$1,671.13	\$2,438.14
Member & Spouse/Partner — One on Medicare	\$2,077.91	\$2,034.29			
Member & Spouse/Partner — Both on Medicare	\$1,029.20	\$1,189.10			
Family — No Medicare	\$3,285.52	\$3,025.81	\$2,772.98	\$1,901.09	\$2,773.67
Family — One on Medicare	\$2,475.33	\$2,400.29			
Family — Both on Medicare	\$1,665.14	\$1,774.77			
Parent & Child — No Medicare	\$1,854.72	\$1,708.13	\$1,565.39	\$1,073.21	\$1,565.79
Parent & Child — Retiree on Medicare	\$1,044.53	\$1,082.61			

PLAN/COVERAGE DESCRIPTION	NJ DIRECT10 1525SP 17A/25A	NJ DIRECT15 1525SP 17D/25B	CWA UNITY DIRECT 1525SP 17B/25W	CWA UNITY DIRECT 2030SP 17C/25X	NJ DIRECT 1525SP 17G/26I	NJ DIRECT 2030SP 17H/26R	NJ DIRECT HDHigh 1525SP 17Y/25Y
Single — No Medicare							
Single — On Medicare							
Member & Spouse/Partner — No Medicare							
Member & Spouse/Partner — One on Medicare	\$2,336.02	\$2,244.41	\$2,095.76	\$2,081.18	\$2,095.76	\$2,081.18	\$1,433.73
Member & Spouse/Partner — Both on Medicare							
Family — No Medicare							
Family — One on Medicare	\$2,795.35	\$2,680.45	\$2,494.05	\$2,479.47	\$2,494.05	\$2,479.47	\$1,663.69
Family — Both on Medicare	\$1,793.33	\$1,756.05	\$1,695.69	\$1,666.55			
Parent & Child — No Medicare							
Parent & Child — Retiree on Medicare	\$1,141.66	\$1,110.61	\$1,060.23	\$1,045.65			