



Chapter 172 Part-Time Local Education Monthly Active Group
Monthly Rates
 Effective 1/1/2022 to 12/31/2022*

For employers who offer the Employees' Prescription Drug Plan or a private plan

PLAN/COVERAGE DESCRIPTION	MONTHLY RATES
Medical Plans Available with Prescription Drug Program #201	
NJ DIRECT10 #050 — PPO Plan with \$10 Primary Care Copayment	
Single	\$906.43
Member & Spouse/Partner	\$1,812.86
Family	\$2,592.39
Parent & Child	\$1,685.96
NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment	
Single	\$862.90
Member & Spouse/Partner	\$1,725.79
Family	\$2,467.89
Parent & Child	\$1,604.99
PRESCRIPTION DRUG PROGRAM #201	
Single	\$179.52
Member & Spouse/Partner	\$359.04
Family	\$513.43
Parent & Child	\$333.91
Medical Plan Available with Prescription Drug Program #298	
NEW JERSEY EDUCATORS HEALTH PLAN #098 — PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment	
Single	\$822.31
Member & Spouse/Partner	\$1,644.63
Family	\$2,351.82
Parent & Child	\$1,529.50
PRESCRIPTION DRUG PROGRAM #298	
Single	\$122.63
Member & Spouse/Partner	\$245.26
Family	\$350.72
Parent & Child	\$228.09
Medical Plan Available with Prescription Drug Program #299	
GARDEN STATE HEALTH PLAN #099 — PPO Plan with \$10 Primary Care Copayment/\$15 Specialist Care Copayment	
Single	\$746.91
Member & Spouse/Partner	\$1,493.82
Family	\$2,136.17
Parent & Child	\$1,389.25
PRESCRIPTION DRUG PROGRAM #299	
Single	\$128.65
Member & Spouse/Partner	\$257.30
Family	\$367.94
Parent & Child	\$239.29

*Garden State Health Plan effective 7/1/2022 - 12/31/2022

For copayments and deductibles, please refer to the *Plan Design Charts* on our website at: www.nj.gov/treasury/pensions