



Local Retired Group — Government Employers
Medicare and Non-Medicare Monthly Rates Effective 1/1/2022 to 12/31/2022
Medical Only — For Retirees With a Private Employer Prescription Drug Plan or With Medicare Part D Benefits

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	\$899.24	\$1,060.53		\$1,060.53	\$997.24		\$997.24
Single — On Medicare			\$171.41	\$171.41		\$154.06	\$154.06
Member & Spouse/Partner — No Medicare	\$1,960.36	\$2,311.96		\$2,311.96	\$2,173.97		\$2,173.97
Member & Spouse/Partner — One on Medicare	\$1,070.65	\$834.14	\$171.41	\$1,005.55	\$827.83	\$154.06	\$981.89
Member & Spouse/Partner — Both on Medicare			\$342.82	\$342.82		\$308.12	\$308.12
Family — No Medicare	\$2,230.14	\$2,630.12		\$2,630.12	\$2,473.14		\$2,473.14
Family — One on Medicare	\$1,430.36	\$1,067.17	\$171.41	\$1,238.58	\$1,060.00	\$154.06	\$1,214.06
Family — Both on Medicare		\$98.80	\$342.82	\$441.62	\$93.93	\$308.12	\$402.05
Parent & Child — No Medicare	\$1,258.95	\$1,484.74		\$1,484.74	\$1,396.13		\$1,396.13
Parent & Child — Retiree on Medicare		\$97.15	\$171.41	\$268.56	\$92.35	\$154.06	\$246.41

PLAN/COVERAGE DESCRIPTION	Horizon HMO #011 (266)	Horizon HMO #058 (25G)			NJ DIRECT1525 #051 (254)	Horizon HMO1525 #053 (267)	Horizon HMO1525 #059 (25H)		
		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	\$968.06	\$968.06		\$968.06	\$952.49	\$854.90	\$854.90		\$854.90
Single — On Medicare	\$321.86		\$195.54	\$195.54	\$248.65	\$323.89		\$161.14	\$161.14
Member & Spouse/Partner — No Medicare	\$2,110.37	\$2,110.37		\$2,110.37	\$2,076.44	\$1,863.69	\$1,863.69		\$1,863.69
Member & Spouse/Partner — One on Medicare	\$1,064.94	\$743.08	\$195.54	\$938.62	\$1,010.48	\$988.92	\$665.03	\$161.14	\$826.17
Member & Spouse/Partner — Both on Medicare	\$643.73		\$391.08	\$391.08	\$497.31	\$647.77		\$322.28	\$322.28
Family — No Medicare	\$2,400.81	\$2,400.81		\$2,400.81	\$2,362.19	\$2,120.16	\$2,120.16		\$2,120.16
Family — One on Medicare	\$1,294.20	\$972.34	\$195.54	\$1,167.88	\$1,252.19	\$1,197.94	\$874.05	\$161.14	\$1,035.19
Family — Both on Medicare	\$801.03	\$97.44	\$391.08	\$488.52	\$644.83	\$770.94	\$62.88	\$322.28	\$385.16
Parent & Child — No Medicare	\$1,355.29	\$1,355.29		\$1,355.29	\$1,333.50	\$1,196.87	\$1,196.87		\$1,196.87
Parent & Child — Retiree on Medicare	\$472.07	\$93.06	\$195.54	\$288.60	\$393.72	\$435.87	\$57.18	\$161.14	\$218.32



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PLAN/COVERAGE DESCRIPTION	NJ DIRECT2030 #052 (255)	Horizon HMO2030 #054 (268)
Single — No Medicare	\$896.35	\$802.68
Single — On Medicare	\$233.16	\$305.99
Member & Spouse/Partner — No Medicare	\$1,954.03	\$1,749.82
Member & Spouse/Partner — One on Medicare	\$953.09	\$934.60
Member & Spouse/Partner — Both on Medicare	\$466.37	\$612.01
Family — No Medicare	\$2,222.94	\$1,990.63
Family — One on Medicare	\$1,181.46	\$1,131.75
Family — Both on Medicare	\$604.70	\$726.11
Parent & Child — No Medicare	\$1,254.88	\$1,123.74
Parent & Child — Retiree on Medicare	\$369.22	\$409.26

PLAN/COVERAGE DESCRIPTION	OMNIA HEALTH PLAN #057 (26P)	NJ DIRECT HD1500 #091 (261)	NJ DIRECT HD4000 #090 (260)
Single — No Medicare	\$742.70	\$747.71	\$504.77
Single — On Medicare			
Member & Spouse/Partner — No Medicare	\$1,619.10	\$1,630.00	\$1,100.40
Member & Spouse/Partner — One on Medicare	\$914.11	\$919.12	\$676.18
Member & Spouse/Partner — Both on Medicare			
Family — No Medicare	\$1,841.92	\$1,854.31	\$1,251.84
Family — One on Medicare	\$1,211.20	\$1,218.21	\$878.09
Family — Both on Medicare			
Parent & Child — No Medicare	\$1,039.79	\$1,046.80	\$706.68
Parent & Child — Retiree on Medicare			