

## Local Monthly Active Group — Education Employers Monthly Rates

Effective 1/1/2022 to 12/31/2022\*

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

	EMPLOYEE	DEPENDENT	
PLAN/COVERAGE DESCRIPTION	SINGLE COST	COST	TOTAL
Medical Plans Available with Prescription Drug	Program #201		
NJ DIRECT10 #050 — PPO Plan with \$10 Primary Care Copayment			
Single	\$855.13		\$855.13
Member & Spouse/Partner	\$857.43	\$852.82	\$1,710.25
Family	\$858.27	\$1,587.39	\$2,445.66
Parent & Child	\$856.15	\$734.38	\$1,590.53
NJ DIRECT15 #150 — PPO Plan with \$15 Primary Care Copayment\$			
Single	\$814.06		\$814.06
Member & Spouse/Partner	\$816.36	\$811.75	\$1,628.11
Family	\$817.20	\$1,511.00	\$2,328.20
Parent & Child	\$815.08	\$699.07	\$1,514.15
PRESCRIPTION DRUG PROGRAM #201	,		
Single	\$169.36		\$169.36
Member & Spouse/Partner	\$169.36	\$169.36	\$338.72
Family	\$169.36	\$315.01	\$484.37
Parent & Child	\$169.36	\$145.65	\$315.01
Medical Plan Available with Prescription Drug	Program #298		
NEW JERSEY EDUCATORS HEALTH PLAN #098 — PPO Plan with \$10 Primary Care	Copayment/\$15 Spec	ialist Care Copayme	ent
Single	\$775.77		\$775.77
Member & Spouse/Partner	\$778.07	\$773.47	\$1,551.54
Family	\$778.91	\$1,439.79	\$2,218.70
Parent & Child	\$776.79	\$666.14	\$1,442.93
PRESCRIPTION DRUG PROGRAM #298			
Single	\$115.69		\$115.69
Member & Spouse/Partner	\$115.69	\$115.69	\$231.36
Family	\$115.69	\$215.18	\$330.87
Parent & Child	\$115.59	\$99.49	\$215.18
Medical Plan Available with Prescription Drug	Program #299		
GARDEN STATE HEALTH PLAN #099 — PPO Plan with \$10 Primary Care Copayment/\$	15 Specialist Care Cop	ayment	
Single	\$704.64		\$704.64
Member & Spouse/Partner	\$706.94	\$702.33	\$1,409.27
Family	\$707.78	\$1,307.48	\$2,015.26
Parent & Child	\$705.66	\$604.96	\$1,310.62
PRESCRIPTION DRUG PROGRAM #299			
Single	\$121.37		\$121.37
Member & Spouse/Partner	\$121.37	\$121.37	\$242.74
Family	\$121.37	\$225.75	\$347.12
Parent & Child	\$121.37	\$104.38	\$225.75