

### Employee's Medical Monthly 2024 Rates

	NJEP Med & Rx*	GSHP Med & Rx**	Choice POS II 1015	Choice POS II 2035	Select 10	Select 1525	Select 2020	Select 2035	HD HSA 1500***
<b>Monthly Rates:</b>	<b>Medical Rates &amp; NJEP &amp; GSHP RX Rates</b>								
Single	\$1,267.72	\$1,149.09	\$1,058.38	\$906.20	\$1,107.97	\$1,018.67	\$956.30	\$821.72	\$988.21
Employee + Spouse	\$2,475.79	\$2,241.09	\$2,094.01	\$1,792.91	\$2,192.13	\$2,015.43	\$1,892.05	\$1,626.28	\$1,955.17
Parent/Child(ren)	\$2,213.86	\$1,996.07	\$1,943.10	\$1,663.70	\$2,034.14	\$1,870.18	\$1,755.69	\$1,508.60	\$1,814.27
Family	\$3,500.05	\$3,165.25	\$2,987.02	\$2,557.51	\$3,126.98	\$2,874.92	\$2,698.92	\$2,319.09	\$2,788.97

\*NJ Educator Plan includes prescription pricing. Medical is with Aetna and Prescription is with Express Scripts.

\*\* Garden State Health Plan includes prescription pricing. Medical is with Aetna and Prescription is with Express Scripts.

\*\*\*HDHP 1500 Plan rates do not include Rx and is only showing Medical.

### Employee's Active Prescription Monthly 2024 Rates

	Express Scripts Inc Rx	*Express Scripts Inc Rx (will be added to the medical rates)
<b>Monthly Rates:</b>	<b>\$0/\$20</b>	<b>NJEP &amp; GSHP Rx Plan</b>
Single	<b>\$234.13</b>	<b>\$227.11</b>
Employee + Spouse	<b>\$429.86</b>	<b>\$416.97</b>
Parent/Child(ren)	<b>\$312.80</b>	<b>\$303.42</b>
Family	<b>\$580.64</b>	<b>\$563.23</b>