2025 RETIREE Health Benefit Costs

	Single		2 Adults		Parent & 1 Child		Parent and Children		Family	
Medical (Direct Access)										
Under 65 (Both)	$1,571.23	$18,854.76	$3,142.45	$37,709.40	$2,765.36	$33,184.32	$2,765.36	$33,184.32	$4,320.87	$51,850.44
Over 65 (Both)	$879.89	$10,558.68	$1,759.77	$21,117.24	$1,548.60	$18,583.20	$1,548.60	$18,583.20	$2,419.69	$29,036.28
One Over 65			$2,451.11	$29,413.32					$3,119.83	$37,437.96
Medical (Traditional)										
Under 65 (Both)	$1,728.35	$20,740.20	$3,456.70	$41,480.40	$3,041.89	$36,502.68	$3,041.89	$36,502.68	$4,752.96	$57,035.52
Over 65 (Both)	$967.87	$11,614.44	$1,935.75	$23,229.00	$1,703.46	$20,441.52	$1,703.46	$20,441.52	$2,661.66	$31,939.92
One Over 65			$2,696.22	$32,354.64					$3,431.81	$41,181.72
CJHIF - Prescription	$303.00	$3,636.00	$652.00	$7,824.00	$442.00	$5,304.00	$442.00	$5,304.00	$775.00	$9,300.00
AETNA - Prescription	$350.00	$4,200.00								
Delta Dental	$36.81	$441.72	$63.37	$760.44	$63.37	$760.44	$104.56	$1,254.72	$104.56	$1,254.72
DSO Dental	$27.49	$329.88	$53.58	$642.96	$53.58	$642.96	$91.57	$1,098.84	$91.57	$1,098.84
United Healthcare Vision	$4.42	$53.04	$7.45	$89.40	$7.79	$93.48	$7.79	$93.48	$10.78	$129.36
TWU (Medical & Rx ONLY if 25 yrs or disabled over 10 years)										
PBA (ALL if 25 yrs or disabled over 10 yrs)										
Note: Medical and Delta Dental are self insured and costs are based on 2020 COBRA Rates, per NJ Chapter 78.										
12/2024 am										