

2024 FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM

2024 Health Maintenance Organizations (HMO) Premium Rates

Plan	Enroll Code	2023 Biweekly Total Premium	2024 Biweekly Total Premium	2024 Biweekly Gov't Pays	2024 Biweekly Employee Pays	2024 Biweekly Change in Employee Payment	2023 Monthly Total Premium	2024 Monthly Total Premium	2024 Monthly Gov't Pays	2024 Monthly Employee Pays	2024 Monthly Change in Employee Payment
Aetna Advantage		Available: All of Pennsylvania									
Advantage Self	Z24	\$230.78	\$230.78	\$173.09	\$57.69	\$0.00	\$500.02	\$500.02	\$375.02	\$125.00	\$0.00
Advantage Self & Family	Z25	\$611.54	\$611.54	\$458.66	\$152.88	\$0.00	\$1,325.00	\$1,325.00	\$993.75	\$331.25	\$0.00
Advantage Self Plus One	Z26	\$507.70	\$507.70	\$380.78	\$126.92	\$0.00	\$1,100.02	\$1,100.02	\$825.02	\$275.00	\$0.00
Aetna Direct		Available: All of Pennsylvania									
CDHP Self	N61	\$296.04	\$296.86	\$222.65	\$74.21	\$0.20	\$641.42	\$643.20	\$482.40	\$160.80	\$0.45
CDHP Self & Family	N62	\$746.57	\$748.64	\$561.48	\$187.16	\$0.52	\$1,617.57	\$1,622.05	\$1,216.54	\$405.51	\$1.12
CDHP Self Plus One	N63	\$649.23	\$651.03	\$488.27	\$162.76	\$0.45	\$1,406.67	\$1,410.57	\$1,057.93	\$352.64	\$0.97
Aetna HealthFund CDHP / Aetna Value Plan		Available: All of Pennsylvania									
CDHP Self	H41	\$399.20	\$414.61	\$271.43	\$143.18	\$3.70	\$864.93	\$898.32	\$588.10	\$310.22	\$8.02
CDHP Self & Family	H42	\$909.93	\$945.07	\$646.18	\$298.89	\$0.38	\$1,971.52	\$2,047.65	\$1,400.06	\$647.59	\$0.81
CDHP Self Plus One	H43	\$901.11	\$935.91	\$586.50	\$349.41	\$8.82	\$1,952.41	\$2,027.81	\$1,270.75	\$757.06	\$19.11
Value Self	H44	\$415.92	\$513.71	\$271.43	\$242.28	\$86.08	\$901.16	\$1,113.04	\$588.10	\$524.94	\$186.51
Value Self & Family	H45	\$954.51	\$1,178.93	\$646.18	\$532.75	\$189.66	\$2,068.11	\$2,554.35	\$1,400.06	\$1,154.29	\$410.92
Value Self Plus One	H46	\$935.81	\$1,155.82	\$586.50	\$569.32	\$194.03	\$2,027.59	\$2,504.28	\$1,270.75	\$1,233.53	\$420.40

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Aetna HealthFund HDHP											
Available: All of Pennsylvania											
HDHP Self	224	\$384.30	\$397.25	\$271.43	\$125.82	\$1.24	\$832.65	\$860.71	\$588.10	\$272.61	\$2.69
HDHP Self & Family	225	\$847.69	\$876.24	\$646.18	\$230.06	\$6.21	\$1,836.66	\$1,898.52	\$1,400.06	\$498.46	\$13.46
HDHP Self Plus One	226	\$831.10	\$859.09	\$586.50	\$272.59	\$2.01	\$1,800.72	\$1,861.36	\$1,270.75	\$590.61	\$4.35
Geisinger Health Plan											
Available: Northeastern, Central and South Central Pennsylvania											
Standard Self	GG4	\$441.68	\$430.31	\$271.43	\$158.88	\$23.08	\$956.97	\$932.34	\$588.10	\$344.24	\$50.00
Standard Self & Family	GG5	\$1,011.22	\$985.20	\$646.18	\$339.02	\$60.78	\$2,190.98	\$2,134.60	\$1,400.06	\$734.54	\$131.70
Standard Self Plus One	GG6	\$954.34	\$929.78	\$586.50	\$343.28	\$50.54	\$2,067.74	\$2,014.52	\$1,270.75	\$743.77	\$109.51
Basic Self	AJ1	\$399.48	\$389.22	\$271.43	\$117.79	\$21.97	\$865.54	\$843.31	\$588.10	\$255.21	\$47.60
Basic Self & Family	AJ2	\$914.63	\$891.12	\$646.18	\$244.94	\$58.27	\$1,981.70	\$1,930.76	\$1,400.06	\$530.70	\$126.26
Basic Self Plus One	AJ3	\$863.18	\$840.99	\$586.50	\$254.49	\$48.17	\$1,870.22	\$1,822.15	\$1,270.75	\$551.40	\$104.36
UnitedHealthcare Ins. Co. Inc. Choice Plus Primary											
Available: All of Pennsylvania											
High Self	AS1	\$328.52	\$365.31	\$271.43	\$93.88	\$11.75	\$711.79	\$791.51	\$588.10	\$203.41	\$25.46
High Self & Family	AS2	\$776.94	\$863.99	\$646.18	\$217.81	\$23.58	\$1,683.37	\$1,871.98	\$1,400.06	\$471.92	\$51.08
High Self Plus One	AS3	\$706.31	\$785.44	\$586.50	\$198.94	\$22.36	\$1,530.34	\$1,701.79	\$1,270.75	\$431.04	\$48.46
UnitedHealthcare Ins. Co. Inc. Choice HDHP											
Available: All of Pennsylvania											
HDHP Self	V41	\$307.01	\$320.10	\$240.08	\$80.02	\$3.27	\$665.19	\$693.55	\$520.16	\$173.39	\$7.09
HDHP Self & Family	V42	\$706.09	\$732.83	\$549.62	\$183.21	\$6.69	\$1,529.86	\$1,587.80	\$1,190.85	\$396.95	\$14.49
HDHP Self Plus One	V43	\$660.06	\$688.24	\$516.18	\$172.06	\$7.05	\$1,430.13	\$1,491.19	\$1,118.39	\$372.80	\$15.27

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United Healthcare Ins. Co. Inc. Choice Open Access HMO											
Available: All of Pennsylvania											
High Self	LR1	\$419.08	\$465.02	\$271.43	\$193.59	\$34.23	\$908.01	\$1,007.54	\$588.10	\$419.44	\$74.16
High Self & Family	LR2	\$993.20	\$1,102.10	\$646.18	\$455.92	\$74.14	\$2,151.93	\$2,387.88	\$1,400.06	\$987.82	\$160.63
High Self Plus One	LR3	\$901.00	\$999.79	\$586.50	\$413.29	\$72.81	\$1,952.17	\$2,166.21	\$1,270.75	\$895.46	\$157.75
United Healthcare Ins. Co. Inc. Choice Primary											
Available: All of Pennsylvania											
High Self	Y81	\$311.73	\$334.71	\$251.03	\$83.68	\$5.75	\$675.42	\$725.21	\$543.91	\$181.30	\$12.45
High Self & Family	Y82	\$737.24	\$791.60	\$593.70	\$197.90	\$13.59	\$1,597.35	\$1,715.13	\$1,286.35	\$428.78	\$29.44
High Self Plus One	Y83	\$670.22	\$719.64	\$539.73	\$179.91	\$12.36	\$1,452.14	\$1,559.22	\$1,169.42	\$389.80	\$26.77
UPMC Health Plan											
Available: Cameron, Centre, Huntingdon and Potter Counties Only											
HDHP Self	8W4	\$325.27	\$322.87	\$242.15	\$80.72	\$0.60	\$704.75	\$699.55	\$524.66	\$174.89	\$1.30
HDHP Self & Family	8W5	\$750.36	\$744.60	\$558.45	\$186.15	\$1.44	\$1,625.78	\$1,613.30	\$1,209.98	\$403.32	\$3.12
HDHP Self Plus One	8W6	\$720.89	\$715.40	\$536.55	\$178.85	\$1.37	\$1,561.93	\$1,550.03	\$1,162.52	\$387.51	\$2.97
Standard Self	UW4	\$338.00	\$356.24	\$267.18	\$89.06	\$4.56	\$732.33	\$771.85	\$578.89	\$192.96	\$9.88
Standard Self & Family	UW5	\$796.43	\$837.96	\$628.47	\$209.49	\$10.38	\$1,725.60	\$1,815.58	\$1,361.69	\$453.89	\$22.49
Standard Self Plus One	UW6	\$759.96	\$799.92	\$586.50	\$213.42	\$13.98	\$1,646.58	\$1,733.16	\$1,270.75	\$462.41	\$30.29