FEDERAL EMPLOYEES HEALTH BENEFITS PROGRAM

2026 Health Maintenance Organizations (HMO) PREMIUM RATES

2020 Health Maintenance Organizations (HMO) FREMIOW RATES												
Plan	Enroll Code	2025 Biweekly Total Premium	2026 Biweekly Total Premium	2026 Biweekly Gov't Pays	2026 Biweekly Employee Pays	2026 Biweekly Change in Employee Payment	2025 Monthly Total Premium	2026 Monthly Total Premium	2026 Monthly Gov't Pays	2026 Monthly Employee Pays	2026 Monthly Change in Employee Payment	
Aetna Advantage	Availabl	Available: All of Pennsylvania										
Advantage Self	Z24	\$212.93	\$245.73	\$184.30	\$61.43	\$8.20	\$461.35	\$532.42	\$399.32	\$133.10	\$17.76	
Advantage Self & Family	Z25	\$564.25	\$651.15	\$488.36	\$162.79	\$21.73	\$1,222.54	\$1,410.83	\$1,058.12	\$352.71	\$47.08	
Advantage Self Plus One	Z26	\$468.44	\$540.59	\$405.44	\$135.15	\$18.04	\$1,014.95	\$1,171.28	\$878.46	\$292.82	\$39.08	
Aetna Direct	Available: All of Pennsylvania											
CDHP Direct Self	N61	\$307.44	\$329.58	\$247.19	\$82.39	\$5.53	\$666.12	\$714.09	\$535.57	\$178.52	\$11.99	
CDHP Direct Self & Family	N62	\$775.32	\$831.16	\$623.37	\$207.79	\$13.96	\$1,679.86	\$1,800.85	\$1,350.64	\$450.21	\$30.25	
CDHP Direct Self Plus One	N63	\$674.24	\$722.79	\$542.09	\$180.70	\$12.14	\$1,460.85	\$1,566.05	\$1,174.54	\$391.51	\$26.30	
Aetna HealthFund CDHP/ Aetna Value Plan	Availabl	e: All of Per	nnsylvania									
CDHP Self	H41	\$527.64	\$643.12	\$324.76	\$318.36	\$88.80	\$1,143.22	\$1,393.43	\$703.65	\$689.78	\$192.40	
CDHP Self & Family	H42	\$1,202.72	\$1,465.93	\$778.03	\$687.90	\$199.41	\$2,605.89	\$3,176.18	\$1,685.73	\$1,490.45	\$432.06	
CDHP Self Plus One	H43	\$1,191.07	\$1,451.73	\$711.17	\$740.56	\$199.49	\$2,580.65	\$3,145.42	\$1,540.87	\$1,604.55	\$432.23	
Value Self	H44	\$648.44	\$659.53	\$324.76	\$334.77	-\$15.59	\$1,404.95	\$1,428.98	\$703.65	\$725.33	-\$33.78	
Value Self & Family	H45	\$1,488.13	\$1,513.56	\$778.03	\$735.53	-\$38.37	\$3,224.28	\$3,279.38	\$1,685.73	\$1,593.65	-\$83.13	
Value Self Plus One	H46	\$1,458.95	\$1,483.88	\$711.17	\$772.71	-\$36.24	\$3,161.06	\$3,215.07	\$1,540.87	\$1,674.20	-\$78.53	
Aetna HealthFund HDHP	Available: All of Pennsylvania											
HDHP Self	224	\$433.28	\$479.52	\$324.76	\$154.76	\$19.56	\$938.77	\$1,038.96	\$703.65	\$335.31	\$42.38	
HDHP Self & Family	225	\$955.72	\$1,057.72	\$778.03	\$279.69	\$38.20	\$2,070.73	\$2,291.73	\$1,685.73	\$606.00	\$82.77	
HDHP Self Plus One	226	\$937.01	\$1,037.02	\$711.17	\$325.85	\$38.84	\$2,030.19	\$2,246.88	\$1,540.87	\$706.01	\$84.15	

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Geisinger Health Plan Available: All of Northeastern, Central, and South Central Pennsylvania												
Standard Self	GG4	\$510.97	\$566.92	\$324.76	\$242.16	\$29.27	\$1,107.10	\$1,228.33	\$703.65	\$524.68	\$63.42	
Standard Self & Family	GG5	\$1,169.88	\$1,298.01	\$778.03	\$519.98	\$64.33	\$2,534.74	\$2,812.36	\$1,685.73	\$1,126.63	\$139.39	
Standard Self Plus One	GG6	\$1,104.05	\$1,224.98	\$711.17	\$513.81	\$59.76	\$2,392.11	\$2,654.12	\$1,540.87	\$1,113.25	\$129.47	
Basic Self	AJ1	\$466.90	\$540.18	\$324.76	\$215.42	\$46.60	\$1,011.62	\$1,170.39	\$703.65	\$466.74	\$100.96	
Basic Self & Family	AJ2	\$1,068.97	\$1,236.75	\$778.03	\$458.72	\$103.98	\$2,316.10	\$2,679.63	\$1,685.73	\$993.90	\$225.30	
Basic Self Plus One	AJ3	\$1,008.82	\$1,167.16	\$711.17	\$455.99	\$97.17	\$2,185.78	\$2,528.85	\$1,540.87	\$987.98	\$210.53	
UnitedHealthcare Insurance Co. Inc. Choice Plus Primary	Availabl	e: All of Pen	ınsylvania									
High Self	AS1	\$379.74	\$466.40	\$324.76	\$141.64	\$46.71	\$822.77	\$1,010.53	\$703.65	\$306.88	\$101.19	
High Self & Family	AS2	\$898.09	\$1,103.04	\$778.03	\$325.01	\$100.49	\$1,945.86	\$2,389.92	\$1,685.73	\$704.19	\$217.73	
High Self Plus One	AS3	\$816.43	\$1,002.76	\$711.17	\$291.59	\$87.48	\$1,768.93	\$2,172.65	\$1,540.87	\$631.78	\$189.55	
UnitedHealthcare Insurance Co. Inc. Choice HDHP	Available: All of Pennsylvania											
HDHP Self	V41	\$324.07	\$348.60	\$261.45	\$87.15	\$6.13	\$702.15	\$755.30	\$566.48	\$188.82	\$13.28	
HDHP Self & Family	V42	\$741.80	\$796.41	\$597.31	\$199.10	\$13.65	\$1,607.23	\$1,725.56	\$1,294.17	\$431.39	\$29.58	
HDHP Self Plus One	V43	\$696.76	\$748.42	\$561.32	\$187.10	\$12.91	\$1,509.65	\$1,621.58	\$1,216.19	\$405.39	\$27.98	

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UnitedHealthcare Insurance Co. Inc. Choice Open Access HMO	Available: All of Pennsylvania										
High Self	LR1	\$522.64	\$569.94	\$324.76	\$245.18	\$20.62	\$1,132.39	\$1,234.87	\$703.65	\$531.22	\$44.67
High Self & Family	LR2	\$1,238.64	\$1,350.75	\$778.03	\$572.72	\$48.31	\$2,683.72	\$2,926.63	\$1,685.73	\$1,240.90	\$104.68
High Self Plus One	LR3	\$1,123.66	\$1,225.38	\$711.17	\$514.21	\$40.55	\$2,434.60	\$2,654.99	\$1,540.87	\$1,114.12	\$87.85
UnitedHealthcare Insurance Co. Inc. Choice Primary	Available: All of Pennsylvania										
High Self	Y81	\$325.74	\$372.11	\$279.08	\$93.03	\$11.60	\$705.77	\$806.24	\$604.68	\$201.56	\$25.12
High Self & Family	Y82	\$770.36	\$880.02	\$660.02	\$220.00	\$27.41	\$1,669.11	\$1,906.71	\$1,430.03	\$476.68	\$59.40
High Self Plus One	Y83	\$700.34	\$800.04	\$600.03	\$200.01	\$24.93	\$1,517.40	\$1,733.42	\$1,300.07	\$433.35	\$54.00
UPMC Health Plan	Available: All of Pennsylvania										
HDHP Self	8W4	\$329.33	\$355.35	\$266.51	\$88.84	\$6.51	\$713.55	\$769.93	\$577.45	\$192.48	\$14.09
HDHP Self & Family	8W5	\$875.97	\$948.90	\$711.68	\$237.22	\$18.23	\$1,897.94	\$2,055.95	\$1,541.96	\$513.99	\$39.51
HDHP Self Plus One	8W6	\$786.71	\$849.20	\$636.90	\$212.30	\$15.62	\$1,704.54	\$1,839.93	\$1,379.95	\$459.98	\$33.85
Standard Self	UW4	\$357.27	\$385.49	\$289.12	\$96.37	\$7.05	\$774.09	\$835.23	\$626.42	\$208.81	\$15.29
Standard Self & Family	UW5	\$979.56	\$1,056.71	\$778.03	\$278.68	\$13.35	\$2,122.38	\$2,289.54	\$1,685.73	\$603.81	\$28.93
Standard Self Plus One	UW6	\$871.63	\$937.89	\$703.42	\$234.47	\$12.84	\$1,888.53	\$2,032.10	\$1,524.08	\$508.02	\$27.82