

# POSTAL EMPLOYEES OR RETIREES

source: <https://www.opm.gov/healthcare-insurance/pshb/premiums/>

POSTAL PLANS - NATIONWIDE	Option	Enrollment Code	Enrollment Type	2026 Biweekly - Total Premium	2026 Biweekly - Govt Pays	2026 Biweekly - Empl. Pays	2026 Biweekly - Change in Empl. Payment	2026 Monthly - Total Premium	2026 Monthly - Govt Pays	2026 Monthly - Empl. Pays	2026 Monthly - Change in Empl. Payment
APWU Health Plan	High Option	23A	Self	411.79	304.64	107.15	-2.71	892.21	660.05	232.16	-5.87
APWU Health Plan	High Option	23B	Self & Family	988.24	712.30	275.94	-1.34	2141.19	1543.32	597.87	-2.90
APWU Health Plan	High Option	23C	Self Plus One	864.71	648.53	216.18	3.13	1873.54	1405.16	468.38	6.77
APWU Health Plan	Consumer Driven Option	23D	Self	364.42	273.32	91.10	10.48	789.58	592.19	197.39	22.71
APWU Health Plan	Consumer Driven Option	23E	Self & Family	864.03	648.02	216.01	24.85	1872.07	1404.05	468.02	53.85
APWU Health Plan	Consumer Driven Option	23F	Self Plus One	792.02	594.02	198.00	22.77	1716.04	1287.03	429.01	49.35
Blue Cross Blue Shield Service Benefit Plan	Basic Option	33A	Self	432.23	304.64	127.59	13.47	936.50	660.05	276.45	29.19
Blue Cross Blue Shield Service Benefit Plan	Basic Option	33B	Self & Family	1069.82	712.30	357.52	39.90	2317.94	1543.32	774.62	86.44
Blue Cross Blue Shield Service Benefit Plan	Basic Option	33C	Self Plus One	971.34	657.50	313.84	32.85	2104.57	1424.58	679.99	71.18
Blue Cross Blue Shield Service Benefit Plan	Standard Option	33D	Self	494.74	304.64	190.10	15.97	1071.94	660.05	411.89	34.61
Blue Cross Blue Shield Service Benefit Plan	Standard Option	33E	Self & Family	1191.51	712.30	479.21	43.78	2581.61	1543.32	1038.29	94.86
Blue Cross Blue Shield Service Benefit Plan	Standard Option	33F	Self Plus One	1081.92	657.50	424.42	36.38	2344.16	1424.58	919.58	78.83
Blue Cross Blue Shield Service Benefit Plan	FEP Blue Focus	35A	Self	300.62	225.47	75.15	15.98	651.34	488.51	162.83	34.62
Blue Cross Blue Shield Service Benefit Plan	FEP Blue Focus	35B	Self & Family	710.82	533.12	177.70	37.78	1540.11	1155.08	385.03	81.86
Blue Cross Blue Shield Service Benefit Plan	FEP Blue Focus	35C	Self Plus One	646.26	484.70	161.56	34.35	1400.23	1050.17	350.06	74.43
GEHA Employee Organization	High Option	37A	Self	468.15	304.64	163.51	35.32	1014.33	660.05	354.28	76.53
GEHA Employee Organization	High Option	37B	Self & Family	1173.13	712.30	460.83	95.61	2541.78	1543.32	998.46	207.15
GEHA Employee Organization	High Option	37C	Self Plus One	1029.92	657.50	372.42	79.38	2231.49	1424.58	806.91	171.99
GEHA Employee Organization	Standard Option	37D	Self	339.08	254.31	84.77	10.41	734.67	551.00	183.67	22.56
GEHA Employee Organization	Standard Option	37E	Self & Family	900.74	675.56	225.18	27.65	1951.60	1463.70	487.90	59.91
GEHA Employee Organization	Standard Option	37F	Self Plus One	729.05	546.79	182.26	22.38	1579.61	1184.71	394.90	48.49
GEHA Employee Organization	High Deductible Health Plan	39A	Self	339.54	254.66	84.88	6.28	735.67	551.75	183.92	13.63
GEHA Employee Organization	High Deductible Health Plan	39B	Self & Family	897.07	672.80	224.27	16.61	1943.65	1457.74	485.91	35.99
GEHA Employee Organization	High Deductible Health Plan	39C	Self Plus One	730.02	547.52	182.50	13.52	1581.71	1186.28	395.43	29.30
MHBP	MHBP Value Plan	73A	Self	281.62	211.22	70.40	7.54	610.18	457.64	152.54	16.34
MHBP	MHBP Value Plan	73B	Self & Family	680.59	510.44	170.15	18.23	1474.61	1105.96	368.65	39.50
MHBP	MHBP Value Plan	73C	Self Plus One	667.26	500.45	166.81	17.87	1445.73	1084.30	361.43	38.72
MHBP	MHBP Standard Option	73D	Self	368.35	276.26	92.09	9.87	798.09	598.57	199.52	21.38
MHBP	MHBP Standard Option	73E	Self & Family	856.01	642.01	214.00	22.93	1854.69	1391.02	463.67	49.68
MHBP	MHBP Standard Option	73F	Self Plus One	847.87	635.90	211.97	22.71	1837.05	1377.79	459.26	49.20
MHBP	Consumer Option	74A	Self	438.17	304.64	133.53	39.10	949.37	660.05	289.32	84.72
MHBP	Consumer Option	74B	Self & Family	1018.10	712.30	305.80	86.38	2205.88	1543.32	662.56	187.16
MHBP	Consumer Option	74C	Self Plus One	969.63	657.50	312.13	94.64	2100.87	1424.58	676.29	205.06
NALC Health Benefit Plan	High Option	77A	Self	425.78	304.64	121.14	11.16	922.52	660.05	262.47	24.18
NALC Health Benefit Plan	High Option	77B	Self & Family	979.72	712.30	267.42	29.00	2122.73	1543.32	579.41	62.83
NALC Health Benefit Plan	High Option	77C	Self Plus One	950.81	657.50	293.31	27.23	2060.09	1424.58	635.51	59.01
NALC Health Benefit Plan	CDHP	77D	Self	268.43	201.32	67.11	7.98	581.60	436.20	145.40	17.29
NALC Health Benefit Plan	CDHP	77E	Self & Family	660.86	495.65	165.21	20.29	1431.86	1073.90	357.96	43.96
NALC Health Benefit Plan	CDHP	77F	Self Plus One	610.51	457.88	152.63	18.75	1322.77	992.08	330.69	40.61
Rural Carrier Benefit Plan	High Option	79A	Self	462.88	304.64	158.24	11.73	1002.91	660.05	342.86	25.42
Rural Carrier Benefit Plan	High Option	79B	Self & Family	1012.56	712.30	300.26	26.89	2193.88	1543.32	650.56	58.26
Rural Carrier Benefit Plan	High Option	79C	Self Plus One	964.00	657.50	306.50	23.97	2088.67	1424.58	664.09	51.94