

U.S. OFFICE OF PERSONNEL MANAGEMENT

HEALTHCARE PLAN INFORMATION

Non-Postal Premium Rates for the Federal Employees Health Benefits Program

FFS (Fee-for-Service/Nationwide Plans)

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide APWU Health Plan - CDHP Self	474	275.85	278.61	208.96	69.65	0.69	597.68	603.66	452.75	150.91	1.49
Nationwide APWU Health Plan - CDHP Self & Family	475	654.04	660.58	495.44	165.14	1.63	1417.09	1431.26	1073.45	357.81	3.54
Nationwide APWU Health Plan - CDHP Self Plus One	476	599.54	605.53	454.15	151.38	1.50	1299.00	1311.98	983.99	327.99	3.24
Nationwide APWU Health Plan - High Self	471	335.18	345.24	241.58	103.66	4.25	726.22	748.02	523.42	224.60	9.22

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide APWU Health Plan - High Self & Family	472	804.42	828.55	562.25	266.30	8.35	1742.91	1795.19	1218.21	576.98	18.09
Nationwide APWU Health Plan - High Self Plus One	473	703.86	724.97	517.46	207.51	7.77	1525.03	1570.77	1121.16	449.61	16.84
Nationwide Blue Cross and Blue Shield Service Benefit Plan Basic Option - Basic Self	111	303.78	314.42	235.82	78.60	2.66	658.19	681.24	510.93	170.31	5.76
Nationwide Blue Cross and Blue Shield Service Benefit Plan Basic Option - Basic Self & Family	112	737.69	763.52	562.25	201.27	10.05	1598.33	1654.29	1218.21	436.08	21.77

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide Blue Cross and Blue Shield Service Benefit Plan Basic Option - Basic Self Plus One	113	682.73	706.63	517.46	189.17	10.56	1479.25	1531.03	1121.16	409.87	22.88
Nationwide Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus - FEP Blue Focus Self	131	212.58	212.58	159.44	53.14	0.00	460.59	460.59	345.44	115.15	0.00
Nationwide Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus Self & Family	132	502.70	502.70	377.03	125.67	0.00	1089.18	1089.18	816.89	272.29	0.00

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus - FEP Blue Focus Self Plus One	133	457.02	457.02	342.77	114.25	0.00	990.21	990.21	742.66	247.55	0.00
Nationwide Blue Cross and Blue Shield Service Benefit Plan Standard Option - Standard Self	104	352.68	365.03	241.58	123.45	6.54	764.14	790.90	523.42	267.48	14.18
Nationwide Blue Cross and Blue Shield Service Benefit Plan Standard Option - Standard Self & Family	105	833.21	862.37	562.25	300.12	13.38	1805.29	1868.47	1218.21	650.26	28.99

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide Blue Cross and Blue Shield Service Benefit Plan Standard Option - Standard Self Plus One	106	771.27	798.27	517.46	280.81	13.66	1671.09	1729.59	1121.16	608.43	29.60
Nationwide Compass Rose Health Plan - High Self	421	337.43	347.55	241.58	105.97	4.31	731.10	753.03	523.42	229.61	9.35
Nationwide Compass Rose Health Plan - High Self & Family	422	809.84	834.13	562.25	271.88	8.51	1754.65	1807.28	1218.21	589.07	18.44
Nationwide Compass Rose Health Plan - High Self Plus One	423	742.35	764.62	517.46	247.16	8.93	1608.43	1656.68	1121.16	535.52	19.35

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide Foreign Service Benefit Plan - High Self	401	275.95	287.02	215.27	71.75	2.76	597.89	621.88	466.41	155.47	6.00
Nationwide Foreign Service Benefit Plan - High Self & Family	402	682.70	710.02	532.52	177.50	6.83	1479.18	1538.38	1153.79	384.59	14.80
Nationwide Foreign Service Benefit Plan - High Self Plus One	403	675.91	696.19	517.46	178.73	6.94	1464.47	1508.41	1121.16	387.25	15.04
Nationwide GEHA Benefit Plan - High Self	311	341.19	349.72	241.58	108.14	2.72	739.25	757.73	523.42	234.31	5.90
Nationwide GEHA Benefit Plan - High Self & Family	312	850.86	876.38	562.25	314.13	9.74	1843.53	1898.82	1218.21	680.61	21.10

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide GEHA Benefit Plan - High Self Plus One	313	750.63	769.39	517.46	251.93	5.42	1626.37	1667.01	1121.16	545.85	11.74
Nationwide GEHA Benefit Plan - Standard Self	314	242.18	250.66	188.00	62.66	2.12	524.72	543.10	407.33	135.77	4.59
Nationwide GEHA Benefit Plan - Standard Self & Family	315	622.08	659.40	494.55	164.85	9.33	1347.84	1428.70	1071.53	357.17	20.21
Nationwide GEHA Benefit Plan - Standard Self Plus One	316	520.71	538.94	404.21	134.73	4.55	1128.21	1167.70	875.78	291.92	9.87
Nationwide GEHA HDHP - HDHP Self	341	237.16	245.47	184.10	61.37	2.08	513.85	531.85	398.89	132.96	4.50
Nationwide GEHA HDHP - HDHP Self & Family	342	600.16	636.18	477.14	159.04	9.00	1300.35	1378.39	1033.79	344.60	19.51

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide GEHA HDHP - HDHP Self Plus One	343	509.91	527.76	395.82	131.94	4.46	1104.81	1143.48	857.61	285.87	9.67
Nationwide GEHA Indemnity Benefit Plan - Elevate Plus Self	251	290.69	301.44	226.08	75.36	2.69	629.83	653.12	489.84	163.28	5.82
Nationwide GEHA Indemnity Benefit Plan - Elevate Plus Self & Family	252	720.91	747.57	560.68	186.89	6.66	1561.97	1619.74	1214.81	404.93	14.44
Nationwide GEHA Indemnity Benefit Plan - Elevate Plus Self Plus One	253	674.39	693.27	517.46	175.81	5.54	1461.18	1502.09	1121.16	380.93	12.01
Nationwide GEHA Indemnity Benefit Plan - Elevate Self	254	189.29	189.29	141.97	47.32	0.00	410.13	410.13	307.60	102.53	0.00

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide GEHA Indemnity Benefit Plan - Elevate Self & Family	255	530.03	530.03	397.52	132.51	0.00	1148.40	1148.40	861.30	287.10	0.00
Nationwide GEHA Indemnity Benefit Plan - Elevate Self Plus One	256	435.38	435.38	326.54	108.84	0.00	943.32	943.32	707.49	235.83	0.00
Nationwide MHBP Consumer Option - HDHP Self	481	264.59	291.04	218.28	72.76	6.61	573.28	630.59	472.94	157.65	14.33
Nationwide MHBP Consumer Option - HDHP Self & Family	482	614.80	676.28	507.21	169.07	15.37	1332.07	1465.27	1098.95	366.32	33.30
Nationwide MHBP Consumer Option - HDHP Self Plus One	483	585.53	644.08	483.06	161.02	14.64	1268.65	1395.51	1046.63	348.88	31.72

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide MHBP Standard Option - Standard Self	454	263.47	287.19	215.39	71.80	5.93	570.85	622.25	466.69	155.56	12.85
Nationwide MHBP Standard Option - Standard Self & Family	455	612.30	667.41	500.56	166.85	13.78	1326.65	1446.06	1084.55	361.51	29.85
Nationwide MHBP Standard Option - Standard Self Plus One	456	606.47	661.06	495.80	165.26	13.64	1314.02	1432.30	1074.23	358.07	29.57
Nationwide MHBP Value Plan - Value Self	414	209.22	213.41	160.06	53.35	1.05	453.31	462.39	346.79	115.60	2.27
Nationwide MHBP Value Plan - Value Self & Family	415	505.63	515.75	386.81	128.94	2.53	1095.53	1117.46	838.10	279.36	5.48
Nationwide MHBP Value Plan - Value Self Plus One	416	495.73	505.65	379.24	126.41	2.48	1074.08	1095.58	821.69	273.89	5.37

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide NALC Health Benefit Plan - CDHP Self	324	218.55	218.55	163.91	54.64	0.00	473.53	473.53	355.15	118.38	0.00
Nationwide NALC Health Benefit Plan - CDHP Self & Family	325	502.63	507.66	380.75	126.91	1.25	1089.03	1099.93	824.95	274.98	2.72
Nationwide NALC Health Benefit Plan - CDHP Self Plus One	326	482.16	482.16	361.62	120.54	0.00	1044.68	1044.68	783.51	261.17	0.00
Nationwide NALC Health Benefit Plan - High Self	321	326.61	336.41	241.58	94.83	3.99	707.66	728.89	523.42	205.47	8.65
Nationwide NALC Health Benefit Plan - High Self & Family	322	735.21	760.94	562.25	198.69	9.95	1592.96	1648.70	1218.21	430.49	21.55

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide NALC Health Benefit Plan - High Self Plus One	323	722.43	744.10	517.46	226.64	8.33	1565.27	1612.22	1121.16	491.06	18.05
Nationwide NALC Health Benefit Plan - Value Self	KM1	179.37	179.37	134.53	44.84	0.00	388.64	388.64	291.48	97.16	0.00
Nationwide NALC Health Benefit Plan - Value Self & Family	KM2	412.69	416.82	312.62	104.20	1.03	894.16	903.11	677.33	225.78	2.24
Nationwide NALC Health Benefit Plan - Value Self Plus One	KM3	395.70	395.70	296.78	98.92	0.00	857.35	857.35	643.01	214.34	0.00
Nationwide Panama Canal Area Benefit Plan - High Self	431	290.09	304.60	228.45	76.15	3.63	628.53	659.97	494.98	164.99	7.86

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide Panama Canal Area Benefit Plan - High Self & Family	432	605.54	635.81	476.86	158.95	7.57	1312.00	1377.59	1033.19	344.40	16.40
Nationwide Panama Canal Area Benefit Plan - High Self Plus One	433	578.99	607.94	455.96	151.98	7.23	1254.48	1317.20	987.90	329.30	15.68
Nationwide Rural Carrier Benefit Plan - High Self	381	358.00	368.30	241.58	126.72	4.49	775.67	797.98	523.42	274.56	9.73
Nationwide Rural Carrier Benefit Plan - High Self & Family	382	734.00	781.71	562.25	219.46	31.93	1590.33	1693.71	1218.21	475.50	69.19
Nationwide Rural Carrier Benefit Plan - High Self Plus One	383	709.00	744.21	517.46	226.75	21.87	1536.17	1612.46	1121.16	491.30	47.39

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide SAMBA Health Benefit Plan - High Self	441	416.19	403.70	241.58	162.12	-18.30	901.75	874.68	523.42	351.26	-39.65
Nationwide SAMBA Health Benefit Plan - High Self & Family	442	998.84	968.87	562.25	406.62	-45.75	2164.15	2099.22	1218.21	881.01	-99.12
Nationwide SAMBA Health Benefit Plan - High Self Plus One	443	915.61	888.14	517.46	370.68	-40.81	1983.82	1924.30	1121.16	803.14	-88.42
Nationwide SAMBA Health Benefit Plan - Standard Self	444	314.08	323.50	241.58	81.92	3.40	680.51	700.92	523.42	177.50	7.37
Nationwide SAMBA Health Benefit Plan - Standard Self & Family	445	716.56	738.06	553.55	184.51	5.37	1552.55	1599.13	1199.35	399.78	11.64

Plan - Option	Enrollment Code	2020 Total Biweekly Premium	2021 Biweekly Premium Rates - Total Premium	2021 Biweekly Premium Rates - Government Pays	2021 Biweekly Premium Rates - Employee Pays	2021 Biweekly Premium Rates - Change in Employee Payment	2020 Total Monthly Premium	2021 Monthly Premium Rates - Total Premium	2021 Monthly Premium Rates - Government Pays	2021 Monthly Premium Rates - Employee Pays	2021 Monthly Premium Rates - Change in Employee Payment
Nationwide SAMBA Health Benefit Plan - Standard Self Plus One	446	676.00	696.28	517.46	178.82	6.94	1464.67	1508.61	1121.16	387.45	15.04