

## Postal Premium Rates for the Federal Employees Health Benefits Program

Fee-for-Service Plans (FFS)		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Plan - Option - Enrollment Code									
Alliance Health Plan									
High Self	1R1	141.14	158.08	115.52	42.56	3.64	109.23	48.85	9.93
High Family	1R2	299.22	335.13	263.75	71.38	3.33	235.14	99.99	31.94
APWU Health Plan									
High Self	471	133.37	146.70	115.52	31.18	0.03	109.23	37.47	6.32
High Family	472	292.69	321.95	263.75	58.20	-3.32	235.14	86.81	25.29
Blue Cross and Blue Shield Service Benefit Plan									
Standard Self	104	120.85	138.98	115.52	23.46	4.83	109.23	29.75	11.12
Standard Family	105	276.73	318.24	263.75	54.49	8.93	235.14	83.10	37.54
Basic Self	111	New code	126.46	112.23	14.23	N/A	109.23	17.23	N/A
Basic Family	112	New code	299.15	263.75	35.40	N/A	235.14	64.01	N/A
GEHA Benefit Plan									
High Self	311	137.01	157.56	115.52	42.04	7.25	109.23	48.33	13.54
High Family	312	298.18	342.91	263.75	79.16	12.15	235.14	107.77	40.76
Standard Self	314	110.00	110.00	97.63	12.37	0.00	97.63	12.37	0.00
Standard Family	315	250.00	250.00	221.88	28.12	0.00	221.88	28.12	0.00
Mail Handlers Benefit Plan									
High Self	451	133.58	152.94	115.52	37.42	6.06	109.23	43.71	12.35
High Family	452	281.76	322.61	263.75	58.86	8.27	235.14	87.47	36.88
Standard Self	454	87.70	102.61	91.07	11.54	1.67	91.07	11.54	1.67
Standard Family	455	190.36	222.72	197.66	25.06	3.64	197.66	25.06	3.64
NALC Health Benefit Plan									
High Self	321	135.60	143.73	115.52	28.21	-5.17	109.23	34.50	1.12
High Family	322	289.74	307.13	263.75	43.38	-15.19	235.14	71.99	13.42

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Plan - Option - Enrollment Code									
Postmasters Benefit Plan (PBP)									
High Self 361	261.28	261.28	115.52	145.76	-13.30	109.23	152.05	-7.01	
High Family 362	563.73	563.73	263.75	299.98	-32.58	235.14	328.59	-3.97	
Standard Self 364	144.48	148.81	115.52	33.29	-8.97	109.23	39.58	-2.68	
Standard Family 365	312.53	321.91	263.75	58.16	-23.20	235.14	86.77	5.41	
Association Benefit Plan									
High Self 421	127.54	145.13	115.52	29.61	4.29	109.23	35.90	10.58	
High Family 422	293.78	334.33	263.75	70.58	7.97	235.14	99.19	36.58	
Foreign Service Benefit Plan									
High Self 401	121.35	135.30	115.52	19.78	0.65	109.23	26.07	6.94	
High Family 402	294.70	328.60	263.75	64.85	1.32	235.14	93.46	29.93	
Panama Canal Area Benefit Plan									
High Self 431	124.28	135.47	115.52	19.95	-2.11	109.23	26.24	4.18	
High Family 432	269.53	293.78	260.73	33.05	-5.31	235.14	58.64	20.28	
Rural Carrier Benefit Plan									
High Self 381	137.40	158.02	115.52	42.50	7.32	109.23	48.79	13.61	
High Family 382	279.87	321.86	263.75	58.11	9.41	235.14	86.72	38.02	
SAMBA Health Benefit Plan									
High Self 441	143.33	164.83	115.52	49.31	8.20	109.23	55.60	14.49	
High Family 442	337.54	388.17	263.75	124.42	18.05	235.14	153.03	46.66	
Secret Service - SEEHA Health Benefit Plan									
High Self Y71	110.86	123.34	109.46	13.88	1.41	109.23	14.11	1.64	
High Family Y72	262.74	292.32	259.43	32.89	1.32	235.14	57.18	25.61	

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				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
AL	PrimeHealth of Alabama, Inc.								
	High Self AA1	102.63	126.25	112.05	14.20	2.65	109.23	17.02	5.47
	High Family AA2	262.95	323.46	263.75	59.71	27.93	235.14	88.32	56.54
AL	The Oath - A Health Plan for Alabama, Inc.								
	High Self DF1	127.39	132.11	115.52	16.59	-8.58	109.23	22.88	-2.29
	High Family DF2	326.12	338.19	263.75	74.44	-20.51	235.14	103.05	8.10
AZ	Aetna U. S. Healthcare, Inc.								
	High Self WQ1	86.91	103.22	91.61	11.61	1.83	91.61	11.61	1.83
	High Family WQ2	244.61	290.49	257.81	32.68	5.16	235.14	55.35	27.83
AZ	Health Net of Arizona, Inc.								
	High Self A71	96.01	116.28	103.20	13.08	2.28	103.20	13.08	2.28
	High Family A72	259.05	313.76	263.75	50.01	20.87	235.14	78.62	49.48
AZ	PacifiCare Health Plans								
	High Self A31	88.93	115.99	102.94	13.05	3.05	102.94	13.05	3.05
	High Family A32	248.99	325.07	263.75	61.32	33.31	235.14	89.93	61.92
CA	Aetna U. S. Healthcare, Inc.								
	High Self 2X1	85.24	95.99	85.19	10.80	1.21	85.19	10.80	1.21
	High Family 2X2	198.96	224.22	199.00	25.22	2.84	199.00	25.22	2.84
CA	Blue Cross- HMO								
	High Self M51	94.08	105.27	93.43	11.84	1.26	93.43	11.84	1.26
	High Family M52	240.02	268.58	238.36	30.22	3.22	235.14	33.44	6.44
CA	Blue Shield of CA Access+								
	High Self SJ1	90.16	112.07	99.46	12.61	2.47	99.46	12.61	2.47
	High Family SJ2	223.66	278.01	246.73	31.28	6.12	235.14	42.87	17.71
CA	CIGNA HealthCare of California								
	High Self 9T1	97.35	116.64	103.52	13.12	2.17	103.52	13.12	2.17
	High Family 9T2	214.18	256.61	227.74	28.87	4.77	227.74	28.87	4.77

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				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
CA	Health Net									
	High Self	LB1	93.01	115.04	102.10	12.94	2.48	102.10	12.94	2.48
	High Family	LB2	220.17	272.33	241.69	30.64	5.87	235.14	37.19	12.42
CA	Kaiser Permanente									
	High Self	591	90.30	106.31	94.35	11.96	1.80	94.35	11.96	1.80
	High Family	592	215.57	253.78	225.23	28.55	4.30	225.23	28.55	4.30
CA	Kaiser Permanente									
	High Self	621	94.39	111.97	99.37	12.60	1.98	99.37	12.60	1.98
	High Family	622	218.16	258.77	229.66	29.11	4.57	229.66	29.11	4.57
CA	PacifiCare Health Plans									
	High Self	CY1	80.26	93.38	82.87	10.51	1.48	82.87	10.51	1.48
	High Family	CY2	209.30	243.50	216.11	27.39	3.84	216.11	27.39	3.84
CA	UHP HEALTHCARE									
	High Self	C41	75.22	79.74	70.77	8.97	0.51	70.77	8.97	0.51
	High Family	C42	160.28	169.90	150.79	19.11	1.08	150.79	19.11	1.08
CA	Universal Care									
	High Self	6Q1	76.47	84.00	74.55	9.45	0.85	74.55	9.45	0.85
	High Family	6Q2	201.94	221.83	196.87	24.96	2.24	196.87	24.96	2.24
CA	Western Health Advantage									
	High Self	5Z1	89.76	108.88	96.63	12.25	2.15	96.63	12.25	2.15
	High Family	5Z2	215.42	261.31	231.91	29.40	5.17	231.91	29.40	5.17
CO	Kaiser Permanente									
	High Self	651	86.81	116.69	103.56	13.13	3.36	103.56	13.13	3.36
	High Family	652	221.36	297.55	263.75	33.80	8.90	235.14	62.41	37.51
CO	PacifiCare of Colorado									
	High Self	D61	102.41	130.06	115.43	14.63	3.11	109.23	20.83	9.31
	High Family	D62	264.98	340.19	263.75	76.44	42.63	235.14	105.05	71.24
	Standard Self	D64	77.29	77.30	68.60	8.70	0.00	68.60	8.70	0.00
	Standard Family	D65	200.21	200.19	177.67	22.52	0.00	177.67	22.52	0.00

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Location - Plan - Option - Enrollment Code									
CO	Rocky Mountain HMO								
	High Self XJ1	136.82	158.43	115.52	42.91	8.31	109.23	49.20	14.60
	High Family XJ2	320.00	370.54	263.75	106.79	17.96	235.14	135.40	46.57
	Standard Self XJ4	New code	142.59	115.52	27.07	N/A	109.23	33.36	N/A
	Standard Family XJ5	New code	333.49	263.75	69.74	N/A	235.14	98.35	N/A
CT	ConnectiCare								
	High Self TE1	98.31	112.14	99.52	12.62	1.56	99.52	12.62	1.56
	High Family TE2	257.45	293.70	260.66	33.04	4.08	235.14	58.56	29.60
CT	Health Net, Inc.								
	High Self DP1	137.69	148.62	115.52	33.10	-2.37	109.23	39.39	3.92
	High Family DP2	384.76	415.31	263.75	151.56	-2.03	235.14	180.17	26.58
CT	Health New England								
	High Self DJ1	122.27	138.11	115.52	22.59	2.54	109.23	28.88	8.83
	High Family DJ2	304.72	344.49	263.75	80.74	7.19	235.14	109.35	35.80
DC	Aetna U. S. Healthcare, Inc.								
	High Self JN1	114.25	131.73	115.52	16.21	3.36	109.23	22.50	9.65
	High Family JN2	264.25	304.69	263.75	40.94	7.86	235.14	69.55	36.47
	Standard Self JN4	83.16	95.89	85.10	10.79	1.43	85.10	10.79	1.43
	Standard Family JN5	194.60	224.38	199.14	25.24	3.35	199.14	25.24	3.35
DC	CareFirst BlueChoice								
	High Self 2G1	119.01	127.57	113.22	14.35	-2.44	109.23	18.34	1.55
	High Family 2G2	273.72	286.99	254.70	32.29	-10.26	235.14	51.85	9.30
DC	Kaiser Permanente								
	High Self E31	105.76	107.05	95.01	12.04	0.14	95.01	12.04	0.14
	High Family E32	261.22	264.42	234.67	29.75	-0.30	234.67	29.75	-0.30
DC	MD-IPA								
	High Self JP1	108.91	120.55	106.99	13.56	1.31	106.99	13.56	1.31
	High Family JP2	261.41	289.36	256.81	32.55	2.31	235.14	54.22	23.98

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Location - Plan - Option - Enrollment Code										
FL	Av-Med Health Plan									
	High Self	EM1	115.29	122.89	109.06	13.83	0.76	109.06	13.83	0.76
	High Family	EM2	317.13	337.92	263.75	74.17	-11.79	235.14	102.78	16.82
FL	Capital Health Plan									
	High Self	EA1	93.85	113.85	101.04	12.81	2.25	101.04	12.81	2.25
	High Family	EA2	250.55	303.96	263.75	40.21	12.02	235.14	68.82	40.63
FL	Foundation Health									
	High Self	5E1	74.97	80.06	71.05	9.01	0.58	71.05	9.01	0.58
	High Family	5E2	206.19	220.17	195.40	24.77	1.57	195.40	24.77	1.57
FL	HIP Health Plan of FL									
	High Self	3N1	108.01	108.56	96.35	12.21	0.06	96.35	12.21	0.06
	High Family	3N2	298.60	302.88	263.75	39.13	-28.30	235.14	67.74	0.31
FL	Humana Medical Plan									
	High Self	EE1	101.46	106.50	94.52	11.98	0.57	94.52	11.98	0.57
	High Family	EE2	253.66	266.25	236.30	29.95	1.41	235.14	31.11	2.57
FL	Total Health Choice									
	High Self	4A1	90.31	94.24	83.64	10.60	0.44	83.64	10.60	0.44
	High Family	4A2	224.89	234.67	208.27	26.40	1.10	208.27	26.40	1.10
GA	Aetna U. S. Healthcare, Inc.									
	High Self	2U1	96.13	111.91	99.32	12.59	1.78	99.32	12.59	1.78
	High Family	2U2	252.52	293.95	260.88	33.07	4.66	235.14	58.81	30.40
GA	Kaiser Permanente									
	High Self	F81	96.76	105.68	93.79	11.89	1.00	93.79	11.89	1.00
	High Family	F82	245.64	268.29	238.11	30.18	2.55	235.14	33.15	5.52
GU	PacifiCare Asia Pacific									
	High Self	JK1	109.08	134.62	115.52	19.10	6.83	109.23	25.39	13.12
	High Family	JK2	286.60	353.69	263.75	89.94	34.51	235.14	118.55	63.12
	Standard Self	JK4	71.80	110.39	97.97	12.42	4.34	97.97	12.42	4.34
	Standard Family	JK5	189.58	291.51	258.72	32.79	11.46	235.14	56.37	35.04

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Location - Plan - Option - Enrollment Code										
HI	HMSA									
	High Self	871	98.69	107.57	95.47	12.10	1.00	95.47	12.10	1.00
	High Family	872	219.67	239.44	212.50	26.94	2.23	212.50	26.94	2.23
HI	Kaiser Permanente									
	High Self	631	119.45	122.21	108.46	13.75	-3.48	108.46	13.75	-3.48
	High Family	632	256.81	262.75	233.19	29.56	0.67	233.19	29.56	0.67
	Standard Self	634	90.85	93.28	82.79	10.49	0.27	82.79	10.49	0.27
	Standard Family	635	195.34	200.55	177.99	22.56	0.58	177.99	22.56	0.58
ID	Group Health Cooperative									
	High Self	VR1	119.48	119.27	105.85	13.42	-3.84	105.85	13.42	-3.84
	High Family	VR2	307.47	306.62	263.75	42.87	-33.43	235.14	71.48	-4.82
IL	Group Health Plan									
	High Self	MM1	127.58	149.12	115.52	33.60	8.24	109.23	39.89	14.53
	High Family	MM2	276.86	322.09	263.75	58.34	12.65	235.14	86.95	41.26
IL	Health Alliance HMO									
	High Self	FX1	121.80	138.25	115.52	22.73	3.15	109.23	29.02	9.44
	High Family	FX2	284.30	322.68	263.75	58.93	5.80	235.14	87.54	34.41
IL	Humana Health Plan Inc.									
	High Self	751	111.90	109.06	96.79	12.27	-0.32	96.79	12.27	-0.32
	High Family	752	268.36	261.56	232.13	29.43	-7.76	232.13	29.43	-7.76
IL	John Deere Health Plan									
	High Self	YH1	113.76	126.82	112.55	14.27	1.47	109.23	17.59	4.79
	High Family	YH2	307.15	326.76	263.75	63.01	-12.97	235.14	91.62	15.64
IL	Mercy Health Plans/Premier									
	High Self	7M1	103.64	134.08	115.52	18.56	6.90	109.23	24.85	13.19
	High Family	7M2	241.06	311.85	263.75	48.10	20.98	235.14	76.71	49.59
IL	OSF HealthPlans									
	High Self	9F1	96.83	113.62	100.84	12.78	1.89	100.84	12.78	1.89
	High Family	9F2	254.71	298.80	263.75	35.05	6.40	235.14	63.66	35.01

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Location - Plan - Option - Enrollment Code									
IL	PersonalCare's HMO								
	High Self GE1	78.43	90.39	80.22	10.17	1.35	80.22	10.17	1.35
	High Family GE2	201.64	232.43	206.28	26.15	3.47	206.28	26.15	3.47
IL	UNICARE HMO								
	High Self 171	83.03	84.05	74.59	9.46	0.12	74.59	9.46	0.12
	High Family 172	215.52	262.07	232.59	29.48	5.23	232.59	29.48	5.23
IL	Union Health Service								
	High Self 761	89.74	97.08	86.16	10.92	0.82	86.16	10.92	0.82
	High Family 762	222.56	240.78	213.69	27.09	2.05	213.69	27.09	2.05
IN	Advantage Health Plan, Inc.								
	High Self 6Y1	106.11	122.57	108.78	13.79	1.85	108.78	13.79	1.85
	High Family 6Y2	249.15	287.79	255.41	32.38	4.35	235.14	52.65	24.62
IN	Aetna U. S. Healthcare, Inc.								
	High Self 7L1	99.22	115.11	102.16	12.95	1.79	102.16	12.95	1.79
	High Family 7L2	245.12	284.37	252.38	31.99	4.41	235.14	49.23	21.65
IN	Aetna U. S. Healthcare, Inc.								
	High Self RD1	112.56	141.42	115.52	25.90	13.24	109.23	32.19	19.53
	High Family RD2	284.70	357.69	263.75	93.94	40.41	235.14	122.55	69.02
IN	Arnett HMO								
	High Self G21	121.20	125.25	111.16	14.09	-4.89	109.23	16.02	-2.96
	High Family G22	315.14	325.67	263.75	61.92	-22.05	235.14	90.53	6.56
IN	Health Alliance HMO								
	High Self FX1	121.80	138.25	115.52	22.73	3.15	109.23	29.02	9.44
	High Family FX2	284.30	322.68	263.75	58.93	5.80	235.14	87.54	34.41
IN	Humana Health Plan								
	High Self D21	115.09	124.82	110.78	14.04	1.09	109.23	15.59	2.64
	High Family D22	287.73	312.08	263.75	48.33	-8.23	235.14	76.94	20.38



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Location - Plan - Option - Enrollment Code									
IN	Humana Health Plan Inc.								
	High Self 751	111.90	109.06	96.79	12.27	-0.32	96.79	12.27	-0.32
	High Family 752	268.36	261.56	232.13	29.43	-7.76	232.13	29.43	-7.76
IN	M*Plan								
	High Self IN1	120.62	139.52	115.52	24.00	5.60	109.23	30.29	11.89
	High Family IN2	269.25	320.16	263.75	56.41	18.33	235.14	85.02	46.94
IN	Physicians HP of N. Indiana								
	High Self DQ1	123.50	122.34	108.58	13.76	-7.52	108.58	13.76	-7.52
	High Family DQ2	278.04	274.91	243.98	30.93	-15.94	235.14	39.77	-7.10
IN	UNICARE HMO								
	High Self 171	83.03	84.05	74.59	9.46	0.12	74.59	9.46	0.12
	High Family 172	215.52	262.07	232.59	29.48	5.23	232.59	29.48	5.23
IN	Welborn HMO								
	High Self H31	117.73	134.36	115.52	18.84	3.33	109.23	25.13	9.62
	High Family H32	304.32	347.35	263.75	83.60	10.45	235.14	112.21	39.06
IA	Coventry Health Care of Iowa								
	High Self SV1	83.98	116.65	103.53	13.12	3.67	103.53	13.12	3.67
	High Family SV2	226.79	315.02	263.75	51.27	25.76	235.14	79.88	54.37
IA	John Deere Health Plan								
	High Self YH1	113.76	126.82	112.55	14.27	1.47	109.23	17.59	4.79
	High Family YH2	307.15	326.76	263.75	63.01	-12.97	235.14	91.62	15.64
IA	SecureCare of Iowa								
	High Self 3Q1	100.53	100.89	89.54	11.35	0.04	89.54	11.35	0.04
	High Family 3Q2	263.35	264.30	234.57	29.73	-2.45	234.57	29.73	-2.45
KS	Coventry HC Kansas Cty formerly Kaiser								
	High Self HA1	84.83	87.55	77.70	9.85	0.31	77.70	9.85	0.31
	High Family HA2	218.86	225.87	200.46	25.41	0.79	200.46	25.41	0.79

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
KS	Coventry Health Care of Kansas									
	High Self	7W1	98.95	121.21	107.57	13.64	2.51	107.57	13.64	2.51
	High Family	7W2	252.31	309.09	263.75	45.34	16.96	235.14	73.95	45.57
KS	Humana Health Plan, Inc.									
	High Self	MS1	113.43	113.69	100.90	12.79	0.03	100.90	12.79	0.03
	High Family	MS2	272.13	272.75	242.07	30.68	-10.28	235.14	37.61	-3.35
	Standard Self	MS4	87.92	86.65	76.90	9.75	-0.14	76.90	9.75	-0.14
	Standard Family	MS5	210.91	207.85	184.47	23.38	-0.35	184.47	23.38	-0.35
KS	Preferred Plus of Kansas									
	High Self	VA1	113.71	138.01	115.52	22.49	9.70	109.23	28.78	15.99
	High Family	VA2	302.45	367.09	263.75	103.34	32.06	235.14	131.95	60.67
KY	Aetna U. S. Healthcare, Inc.									
	High Self	7L1	99.22	115.11	102.16	12.95	1.79	102.16	12.95	1.79
	High Family	7L2	245.12	284.37	252.38	31.99	4.41	235.14	49.23	21.65
KY	Aetna U. S. Healthcare, Inc.									
	High Self	RD1	112.56	141.42	115.52	25.90	13.24	109.23	32.19	19.53
	High Family	RD2	284.70	357.69	263.75	93.94	40.41	235.14	122.55	69.02
KY	Humana Health Plan									
	High Self	D21	115.09	124.82	110.78	14.04	1.09	109.23	15.59	2.64
	High Family	D22	287.73	312.08	263.75	48.33	-8.23	235.14	76.94	20.38
KY	United Health Care of Ohio, Inc.									
	High Self	3U1	121.45	148.76	115.52	33.24	14.01	109.23	39.53	20.30
	High Family	3U2	279.33	342.15	263.75	78.40	30.24	235.14	107.01	58.85
LA	Amcare Health Plans									
	High Self	ZH1	84.06	91.03	80.79	10.24	0.78	80.79	10.24	0.78
	High Family	ZH2	218.56	238.39	211.57	26.82	2.23	211.57	26.82	2.23
LA	Amcare Health Plans									
	High Self	ZQ1	95.09	110.50	98.07	12.43	1.73	98.07	12.43	1.73
	High Family	ZQ2	247.22	289.39	256.83	32.56	4.75	235.14	54.25	26.44

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
LA	Coventry Healthcare Louisiana former Maxicare LA								
	High Self BJ1 New area	115.50		102.51	12.99	N/A	102.51	12.99	N/A
	High Family BJ2 New area	268.26		238.08	30.18	N/A	235.14	33.12	N/A
LA	Coventry Healthcare Louisiana former Maxicare LA								
	High Self JA1	93.88	134.24	115.52	18.72	8.16	109.23	25.01	14.45
	High Family JA2	218.04	311.77	263.75	48.02	23.49	235.14	76.63	52.10
LA	Vantage Health Plan								
	High Self AQ1 New plan		138.02	115.52	22.50	N/A	109.23	28.79	N/A
	High Family AQ2 New plan		370.28	263.75	106.53	N/A	235.14	135.14	N/A
LA	Vantage Health Plan								
	High Self MV1 New plan		146.30	115.52	30.78	N/A	109.23	37.07	N/A
	High Family MV2 New plan		392.50	263.75	128.75	N/A	235.14	157.36	N/A
MD	Aetna U. S. Healthcare, Inc.								
	High Self JN1	114.25	131.73	115.52	16.21	3.36	109.23	22.50	9.65
	High Family JN2	264.25	304.69	263.75	40.94	7.86	235.14	69.55	36.47
	Standard Self JN4	83.16	95.89	85.10	10.79	1.43	85.10	10.79	1.43
	Standard Family JN5	194.60	224.38	199.14	25.24	3.35	199.14	25.24	3.35
MD	CareFirst BlueChoice								
	High Self 2G1	119.01	127.57	113.22	14.35	-2.44	109.23	18.34	1.55
	High Family 2G2	273.72	286.99	254.70	32.29	-10.26	235.14	51.85	9.30
MD	Kaiser Permanente								
	High Self E31	105.76	107.05	95.01	12.04	0.14	95.01	12.04	0.14
	High Family E32	261.22	264.42	234.67	29.75	-0.30	234.67	29.75	-0.30
MD	MD-IPA								
	High Self JP1	108.91	120.55	106.99	13.56	1.31	106.99	13.56	1.31
	High Family JP2	261.41	289.36	256.81	32.55	2.31	235.14	54.22	23.98
MA	Blue Chip, Coord Hlth Partners								
	High Self DA1	118.77	131.41	115.52	15.89	-0.66	109.23	22.18	5.63
	High Family DA2	304.12	336.46	263.75	72.71	-0.24	235.14	101.32	28.37

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
MA	Fallon Community Health Plan								
	High Self JV1	105.24	138.70	115.52	23.18	11.34	109.23	29.47	17.63
	High Family JV2	270.87	302.99	263.75	39.24	-0.46	235.14	67.85	28.15
MA	Health New England								
	High Self DJ1	122.27	138.11	115.52	22.59	2.54	109.23	28.88	8.83
	High Family DJ2	304.72	344.49	263.75	80.74	7.19	235.14	109.35	35.80
MI	Bluecare Network of MI								
	High Self G71	148.51	213.55	115.52	98.03	51.74	109.23	104.32	58.03
	High Family G72	375.34	540.03	263.75	276.28	132.11	235.14	304.89	160.72
MI	Bluecare Network of MI								
	High Self K51	109.56	120.70	107.12	13.58	1.25	107.12	13.58	1.25
	High Family K52	305.96	337.46	263.75	73.71	-1.08	235.14	102.32	27.53
MI	Bluecare Network of MI								
	High Self KF1	116.06	151.67	115.52	36.15	22.31	109.23	42.44	28.60
	High Family KF2	319.20	417.59	263.75	153.84	65.81	235.14	182.45	94.42
MI	Bluecare Network of MI								
	High Self KN1	114.78	129.42	114.86	14.56	1.65	109.23	20.19	7.28
	High Family KN2	320.57	361.76	263.75	98.01	8.61	235.14	126.62	37.22
MI	Bluecare Network of MI								
	High Self KR1	120.73	130.68	115.52	15.16	-3.35	109.23	21.45	2.94
	High Family KR2	348.29	377.35	263.75	113.60	-3.52	235.14	142.21	25.09
MI	Bluecare Network of MI								
	High Self LN1	135.74	159.59	115.52	44.07	10.55	109.23	50.36	16.84
	High Family LN2	326.72	384.26	263.75	120.51	24.96	235.14	149.12	53.57
MI	Bluecare Network of MI								
	High Self LX1	78.80	89.09	79.07	10.02	1.16	79.07	10.02	1.16
	High Family LX2	259.01	266.49	236.51	29.98	0.84	235.14	31.35	2.21

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
MI	Grand Valley Health Plan								
	High Self RL1	104.10	116.96	103.80	13.16	1.45	103.80	13.16	1.45
	High Family RL2	262.39	328.80	263.75	65.05	33.83	235.14	93.66	62.44
MI	Health Alliance								
	High Self 521	95.62	123.73	109.81	13.92	3.16	109.23	14.50	3.74
	High Family 522	253.41	327.83	263.75	64.08	35.57	235.14	92.69	64.18
MI	HealthPlus MI								
	High Self X51	108.91	124.26	110.28	13.98	1.73	109.23	15.03	2.78
	High Family X52	266.98	304.64	263.75	40.89	5.08	235.14	69.50	33.69
MI	M-Care								
	High Self EG1	95.40	101.48	90.06	11.42	0.69	90.06	11.42	0.69
	High Family EG2	252.80	268.91	238.66	30.25	1.81	235.14	33.77	5.33
MI	OmniCare								
	High Self KA1	90.78	102.65	91.10	11.55	1.34	91.10	11.55	1.34
	High Family KA2	227.88	257.66	228.67	28.99	3.35	228.67	28.99	3.35
MI	The Wellness Plan								
	High Self K31	93.41	91.04	80.80	10.24	-0.27	80.80	10.24	-0.27
	High Family K32	255.73	247.63	219.77	27.86	-0.91	219.77	27.86	-0.91
MI	Total Health Care								
	High Self N21	88.56	105.64	93.76	11.88	1.92	93.76	11.88	1.92
	High Family N22	224.13	265.83	235.92	29.91	4.70	235.14	30.69	5.48
MN	HealthPartners Classic								
	High Self 531	130.10	143.73	115.52	28.21	0.33	109.23	34.50	6.62
	High Family 532	312.25	344.92	263.75	81.17	0.09	235.14	109.78	28.70
	Standard Self 534	109.24	138.34	115.52	22.82	10.53	109.23	29.11	16.82
	Standard Family 535	262.18	332.02	263.75	68.27	37.26	235.14	96.88	65.87
MN	HealthPartners Health Plan								
	High Self HQ1	145.23	165.96	115.52	50.44	7.43	109.23	56.73	13.72
	High Family HQ2	348.54	398.31	263.75	134.56	17.19	235.14	163.17	45.80

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
MS	Aetna U. S. Healthcare, Inc.									
	High Self	UB1	76.93	103.56	91.91	11.65	3.00	91.91	11.65	3.00
	High Family	UB2	234.37	315.54	263.75	51.79	25.42	235.14	80.40	54.03
MO	BlueCHOICE									
	High Self	9G1	111.52	122.67	108.87	13.80	1.25	108.87	13.80	1.25
	High Family	9G2	241.44	265.58	235.70	29.88	2.72	235.14	30.44	3.28
MO	Coventry HC Kansas Cty formerly Kaiser									
	High Self	HA1	84.83	87.55	77.70	9.85	0.31	77.70	9.85	0.31
	High Family	HA2	218.86	225.87	200.46	25.41	0.79	200.46	25.41	0.79
MO	Group Health Plan									
	High Self	MM1	127.58	149.12	115.52	33.60	8.24	109.23	39.89	14.53
	High Family	MM2	276.86	322.09	263.75	58.34	12.65	235.14	86.95	41.26
MO	Humana Health Plan, Inc.									
	High Self	MS1	113.43	113.69	100.90	12.79	0.03	100.90	12.79	0.03
	High Family	MS2	272.13	272.75	242.07	30.68	-10.28	235.14	37.61	-3.35
	Standard Self	MS4	87.92	86.65	76.90	9.75	-0.14	76.90	9.75	-0.14
	Standard Family	MS5	210.91	207.85	184.47	23.38	-0.35	184.47	23.38	-0.35
MO	Mercy Health Plans/Premier									
	High Self	7M1	103.64	134.08	115.52	18.56	6.90	109.23	24.85	13.19
	High Family	7M2	241.06	311.85	263.75	48.10	20.98	235.14	76.71	49.59
NV	Aetna U. S. Healthcare, Inc.									
	High Self	8L1	92.52	112.46	99.81	12.65	2.24	99.81	12.65	2.24
	High Family	8L2	242.32	292.18	259.31	32.87	5.61	235.14	57.04	29.78
NV	Health Plan of Nevada									
	High Self	NM1	90.60	97.82	86.82	11.00	0.81	86.82	11.00	0.81
	High Family	NM2	231.95	250.47	222.29	28.18	2.09	222.29	28.18	2.09
NV	PacifiCare Health Plans									
	High Self	K91	90.25	118.09	104.80	13.29	3.14	104.80	13.29	3.14
	High Family	K92	228.66	300.71	263.75	36.96	11.24	235.14	65.57	39.85

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
NJ	Aetna U. S. Healthcare, Inc.								
	High Self P31	136.48	143.88	115.52	28.36	-5.90	109.23	34.65	0.39
	High Family P32	352.02	374.09	263.75	110.34	-10.51	235.14	138.95	18.10
NJ	AmeriHealth HMO								
	High Self FK1	161.48	126.66	112.41	14.25	-45.01	109.23	17.43	-41.83
	High Family FK2	358.35	301.93	263.75	38.18	-89.00	235.14	66.79	-60.39
NJ	GHI Health Plan								
	High Self 801	117.19	144.14	115.52	28.62	13.65	109.23	34.91	19.94
	High Family 802	292.96	360.34	263.75	96.59	34.80	235.14	125.20	63.41
NJ	PHS Health Plans (QualMed Plans for Hlth)								
	High Self 271	140.20	150.77	115.52	35.25	-2.73	109.23	41.54	3.56
	High Family 272	325.94	354.35	263.75	90.60	-4.17	235.14	119.21	24.44
NM	Cimarron Health Plan								
	High Self PX1	79.77	113.30	100.55	12.75	3.78	100.55	12.75	3.78
	High Family PX2	210.51	297.95	263.75	34.20	10.52	235.14	62.81	39.13
NM	Lovelace Health Plan								
	High Self Q11	109.95	112.34	99.70	12.64	0.27	99.70	12.64	0.27
	High Family Q12	285.86	292.09	259.23	32.86	-21.83	235.14	56.95	2.26
NM	Presbyterian Health Plan								
	High Self P21	97.54	108.45	96.25	12.20	1.23	96.25	12.20	1.23
	High Family P22	254.38	282.83	251.01	31.82	3.20	235.14	47.69	19.07
NY	Aetna U. S. Healthcare, Inc.								
	High Self JC1	106.31	112.09	99.48	12.61	0.65	99.48	12.61	0.65
	High Family JC2	266.07	281.88	250.17	31.71	-3.19	235.14	46.74	11.84
NY	Aetna U. S. Healthcare, Inc.								
	High Self TG1	103.72	100.65	89.33	11.32	-0.35	89.33	11.32	-0.35
	High Family TG2	260.15	253.88	225.32	28.56	-0.71	225.32	28.56	-0.71

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
Location - Plan - Option - Enrollment Code				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
NY	Blue Choice									
	High Self	MK1	109.35	131.91	115.52	16.39	4.09	109.23	22.68	10.38
	High Family	MK2	273.68	330.53	263.75	66.78	24.27	235.14	95.39	52.88
NY	C.D.P.H.P.									
	High Self	PW1	104.53	118.91	105.53	13.38	1.62	105.53	13.38	1.62
	High Family	PW2	266.60	304.40	263.75	40.65	5.22	235.14	69.26	33.83
NY	C.D.P.H.P.									
	High Self	QB1	116.38	123.68	109.77	13.91	-0.25	109.23	14.45	0.29
	High Family	QB2	298.99	317.55	263.75	53.80	-14.02	235.14	82.41	14.59
NY	C.D.P.H.P.									
	High Self	SG1	104.02	117.81	104.56	13.25	1.55	104.56	13.25	1.55
	High Family	SG2	266.42	301.77	263.75	38.02	2.77	235.14	66.63	31.38
NY	GHI Health Plan									
	High Self	801	117.19	144.14	115.52	28.62	13.65	109.23	34.91	19.94
	High Family	802	292.96	360.34	263.75	96.59	34.80	235.14	125.20	63.41
NY	GHI HMO Select									
	High Self	6V1	151.17	128.19	113.77	14.42	-34.53	109.23	18.96	-29.99
	High Family	6V2	332.22	322.32	263.75	58.57	-42.48	235.14	87.18	-13.87
NY	GHI HMO Select									
	High Self	X41	104.00	114.23	101.38	12.85	1.15	101.38	12.85	1.15
	High Family	X42	257.21	294.49	261.36	33.13	4.19	235.14	59.35	30.41
NY	HIP of Greater New York									
	High Self	511	93.27	108.93	96.68	12.25	1.76	96.68	12.25	1.76
	High Family	512	279.81	326.79	263.75	63.04	14.40	235.14	91.65	43.01
NY	HMO Blue									
	High Self	AH1	120.98	123.75	109.83	13.92	-4.84	109.23	14.52	-4.24
	High Family	AH2	307.29	316.95	263.75	53.20	-22.92	235.14	81.81	5.69



## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
NY	HMO-CNY									
	High Self	EB1	110.83	131.70	115.52	16.18	3.71	109.23	22.47	10.00
	High Family	EB2	293.83	349.27	263.75	85.52	22.86	235.14	114.13	51.47
NY	Independent Health Assoc									
	High Self	QA1	76.24	93.96	83.39	10.57	1.99	83.39	10.57	1.99
	High Family	QA2	214.03	261.94	232.47	29.47	5.39	232.47	29.47	5.39
NY	MVP Health Plan									
	High Self	GA1	101.87	114.71	101.81	12.90	1.44	101.81	12.90	1.44
	High Family	GA2	262.65	296.28	262.95	33.33	1.85	235.14	61.14	29.66
NY	MVP Health Plan									
	High Self	M91	101.42	118.39	105.07	13.32	1.91	105.07	13.32	1.91
	High Family	M92	261.52	305.73	263.75	41.98	11.63	235.14	70.59	40.24
NY	MVP Health Plan									
	High Self	MX1	113.84	129.66	115.07	14.59	1.78	109.23	20.43	7.62
	High Family	MX2	293.55	334.88	263.75	71.13	8.75	235.14	99.74	37.36
NY	Physicians Health Services of New York, Inc.									
	High Self	PD1	121.46	168.88	115.52	53.36	34.12	109.23	59.65	40.41
	High Family	PD2	313.98	436.54	263.75	172.79	89.98	235.14	201.40	118.59
NY	Preferred Care									
	High Self	GV1	101.72	118.82	105.45	13.37	1.93	105.45	13.37	1.93
	High Family	GV2	258.03	317.34	263.75	53.59	24.56	235.14	82.20	53.17
NY	Univera Healthcare - CNY									
	High Self	QE1	108.51	130.32	115.52	14.80	2.59	109.23	21.09	8.88
	High Family	QE2	287.79	345.51	263.75	81.76	25.14	235.14	110.37	53.75
NY	Univera Healthcare - CNY									
	High Self	SH1	106.88	130.32	115.52	14.80	2.78	109.23	21.09	9.07
	High Family	SH2	283.45	345.51	263.75	81.76	29.48	235.14	110.37	58.09

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
NY	Univera Healthcare - WNY								
	High Self Q81	81.63	102.71	91.16	11.55	2.37	91.16	11.55	2.37
	High Family Q82	231.30	291.28	258.51	32.77	6.75	235.14	56.14	30.12
NY	Vytra Health Plans								
	High Self J61	125.93	148.36	115.52	32.84	9.13	109.23	39.13	15.42
	High Family J62	330.00	388.73	263.75	124.98	26.15	235.14	153.59	54.76
NC	PARTNERS NHP of NC								
	High Self EQ1	116.21	138.44	115.52	22.92	8.93	109.23	29.21	15.22
	High Family EQ2	261.49	311.51	263.75	47.76	17.44	235.14	76.37	46.05
ND	Heart of America HMO								
	High Self RU1	105.67	106.17	94.23	11.94	0.05	94.23	11.94	0.05
	High Family RU2	254.36	272.85	242.15	30.70	2.08	235.14	37.71	9.09
OH	Aetna U. S. Healthcare, Inc.								
	High Self 7D1	117.26	135.57	115.52	20.05	5.01	109.23	26.34	11.30
	High Family 7D2	289.80	335.04	263.75	71.29	12.66	235.14	99.90	41.27
OH	Aetna U. S. Healthcare, Inc.								
	High Self RD1	112.56	141.42	115.52	25.90	13.24	109.23	32.19	19.53
	High Family RD2	284.70	357.69	263.75	93.94	40.41	235.14	122.55	69.02
OH	AultCare HMO								
	High Self 3A1	100.51	95.23	84.52	10.71	-0.60	84.52	10.71	-0.60
	High Family 3A2	261.32	238.54	211.70	26.84	-3.31	211.70	26.84	-3.31
OH	Health Maintenance Plan(HMP)								
	High Self R51	114.81	134.33	115.52	18.81	5.89	109.23	25.10	12.18
	High Family R52	259.45	316.52	263.75	52.77	23.58	235.14	81.38	52.19
OH	Health Plan Upper OH Valley								
	High Self U41	102.24	117.33	104.13	13.20	1.70	104.13	13.20	1.70
	High Family U42	281.16	322.66	263.75	58.91	8.92	235.14	87.52	37.53

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
OH	HMO Health Ohio								
	High Self L41	102.21	128.80	114.31	14.49	2.99	109.23	19.57	8.07
	High Family L42	261.45	329.45	263.75	65.70	35.42	235.14	94.31	64.03
OH	Kaiser Permanente								
	High Self 641	100.21	117.77	104.52	13.25	1.98	104.52	13.25	1.98
	High Family 642	245.93	289.01	256.50	32.51	4.84	235.14	53.87	26.20
OH	Paramount Health Care								
	High Self U21	111.33	129.75	115.15	14.60	2.08	109.23	20.52	8.00
	High Family U22	295.18	344.03	263.75	80.28	16.27	235.14	108.89	44.88
OH	SummaCare Health Plan								
	High Self 5W1	89.66	100.57	89.26	11.31	1.22	89.26	11.31	1.22
	High Family 5W2	246.55	276.57	245.46	31.11	3.37	235.14	41.43	13.69
OH	SuperMed HMO								
	High Self 5M1	97.49	144.93	115.52	29.41	18.44	109.23	35.70	24.73
	High Family 5M2	249.36	370.72	263.75	106.97	78.92	235.14	135.58	107.53
OH	United Health Care of Ohio, Inc.								
	High Self 3U1	121.45	148.76	115.52	33.24	14.01	109.23	39.53	20.30
	High Family 3U2	279.33	342.15	263.75	78.40	30.24	235.14	107.01	58.85
OK	Amcare Health Plans								
	High Self ZX1	88.85	103.16	91.55	11.61	1.61	91.55	11.61	1.61
	High Family ZX2	230.98	270.15	239.76	30.39	4.40	235.14	35.01	9.02
OK	Healthcare Oklahoma								
	High Self 6W1	78.49	94.63	83.98	10.65	1.82	83.98	10.65	1.82
	High Family 6W2	203.94	247.84	219.96	27.88	4.94	219.96	27.88	4.94
OK	PacifiCare Health Plans								
	High Self 2N1	88.87	102.43	90.91	11.52	1.52	90.91	11.52	1.52
	High Family 2N2	232.18	267.82	237.69	30.13	4.01	235.14	32.68	6.56

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
OR	Kaiser Permanente									
	High Self	571	122.05	134.10	115.52	18.58	-1.25	109.23	24.87	5.04
	High Family	572	280.10	307.75	263.75	44.00	-4.93	235.14	72.61	23.68
	Standard Self	574	107.13	120.00	106.50	13.50	1.45	106.50	13.50	1.45
	Standard Family	575	245.87	275.40	244.42	30.98	3.32	235.14	40.26	12.60
OR	PacifiCare Health Plans									
	High Self	7Z1	126.72	166.91	115.52	51.39	26.89	109.23	57.68	33.18
	High Family	7Z2	280.77	369.81	263.75	106.06	56.46	235.14	134.67	85.07
PN	Panama Canal Area									
	High Self	431	124.28	135.47	115.52	19.95	-2.11	109.23	26.24	4.18
	High Family	432	269.53	293.78	260.73	33.05	-5.31	235.14	58.64	20.28
PA	Aetna U. S. Healthcare, Inc.									
	High Self	P31	136.48	143.88	115.52	28.36	-5.90	109.23	34.65	0.39
	High Family	P32	352.02	374.09	263.75	110.34	-10.51	235.14	138.95	18.10
PA	HealthAmerica Pennsylvania									
	High Self	261	92.94	115.38	102.40	12.98	2.52	102.40	12.98	2.52
	High Family	262	241.66	299.96	263.75	36.21	9.02	235.14	64.82	37.63
PA	HealthAmerica Pennsylvania									
	High Self	SW1	99.27	124.14	110.17	13.97	2.80	109.23	14.91	3.74
	High Family	SW2	258.08	322.78	263.75	59.03	30.00	235.14	87.64	58.61
PA	HealthGuard									
	High Self	NQ1	92.31	99.57	88.37	11.20	0.82	88.37	11.20	0.82
	High Family	NQ2	240.73	258.90	229.77	29.13	2.05	229.77	29.13	2.05
PA	Keystone Health Plan Central									
	High Self	S41	115.94	145.19	115.52	29.67	15.95	109.23	35.96	22.24
	High Family	S42	280.60	351.30	263.75	87.55	38.12	235.14	116.16	66.73
PA	Keystone Health Plan East									
	High Self	ED1	107.01	128.60	114.13	14.47	2.43	109.23	19.37	7.33
	High Family	ED2	282.00	338.90	263.75	75.15	24.32	235.14	103.76	52.93

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
PA	KeystoneBlue								
	High Self EF1	110.84	145.49	115.52	29.97	17.50	109.23	36.26	23.79
	High Family EF2	328.82	431.62	263.75	167.87	70.22	235.14	196.48	98.83
PA	PHS Health Plans (QualMed Plans for Hlth)								
	High Self 271	140.20	150.77	115.52	35.25	-2.73	109.23	41.54	3.56
	High Family 272	325.94	354.35	263.75	90.60	-4.17	235.14	119.21	24.44
PA	PHS Health Plans (QualMed Plans for Hlth)								
	High Self 2K1	116.28	129.17	114.64	14.53	0.47	109.23	19.94	5.88
	High Family 2K2	282.32	317.03	263.75	53.28	2.13	235.14	81.89	30.74
PA	UPMC Health Plan								
	High Self 8W1	81.32	93.52	83.00	10.52	1.37	83.00	10.52	1.37
	High Family 8W2	207.44	238.56	211.72	26.84	3.50	211.72	26.84	3.50
PR	Triple-S								
	High Self 891	91.15	91.15	80.90	10.25	0.00	80.90	10.25	0.00
	High Family 892	195.76	195.76	173.74	22.02	0.00	173.74	22.02	0.00
RI	Blue Chip, Coord Hlth Partners								
	High Self DA1	118.77	131.41	115.52	15.89	-0.66	109.23	22.18	5.63
	High Family DA2	304.12	336.46	263.75	72.71	-0.24	235.14	101.32	28.37
SC	PARTNERS NHP of NC								
	High Self EQ1	116.21	138.44	115.52	22.92	8.93	109.23	29.21	15.22
	High Family EQ2	261.49	311.51	263.75	47.76	17.44	235.14	76.37	46.05
SD	Avera Health Plan								
	High Self AV1	New plan	105.20	93.37	11.83	N/A	93.37	11.83	N/A
	High Family AV2	New plan	241.44	214.28	27.16	N/A	214.28	27.16	N/A
SD	Sioux Valley Health Plan								
	High Self AU1	New plan	154.02	115.52	38.50	38.50	109.23	44.79	44.79
	High Family AU2	New plan	329.62	263.75	65.87	65.87	235.14	94.48	94.48

## Postal Premium Rates for the Federal Employees Health Benefits Program

HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates		
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
TN	Aetna U. S. Healthcare, Inc.								
	High Self 6J1	104.47	125.35	111.25	14.10	2.35	109.23	16.12	4.37
	High Family 6J2	291.13	349.32	263.75	85.57	25.61	235.14	114.18	54.22
TN	Aetna U. S. Healthcare, Inc.								
	High Self UB1	76.93	103.56	91.91	11.65	3.00	91.91	11.65	3.00
	High Family UB2	234.37	315.54	263.75	51.79	25.42	235.14	80.40	54.03
TN	HealthSpring								
	High Self 6K1	New plan	116.38	103.29	13.09	N/A	103.29	13.09	N/A
	High Family 6K2	New plan	324.30	263.75	60.55	N/A	235.14	89.16	N/A
TX	Amcare Health Plans								
	High Self 2V1	91.22	102.89	91.31	11.58	1.32	91.31	11.58	1.32
	High Family 2V2	237.16	269.46	239.15	30.31	3.63	235.14	34.32	7.64
TX	Amcare Health Plans								
	High Self ZG1	84.06	101.76	90.31	11.45	1.99	90.31	11.45	1.99
	High Family ZG2	218.56	266.52	236.54	29.98	5.39	235.14	31.38	6.79
TX	FIRSTCARE								
	High Self 6U1	117.09	136.01	115.52	20.49	5.62	109.23	26.78	11.91
	High Family 6U2	251.52	292.18	259.31	32.87	4.57	235.14	57.04	28.74
TX	FIRSTCARE								
	High Self CK1	153.89	151.17	115.52	35.65	-16.02	109.23	41.94	-9.73
	High Family CK2	330.55	324.72	263.75	60.97	-38.41	235.14	89.58	-9.80
TX	HMO Blue Texas								
	High Self YM1	100.87	119.59	106.14	13.45	2.10	106.14	13.45	2.10
	High Family YM2	246.92	292.74	259.81	32.93	5.15	235.14	57.60	29.82
TX	HMO Blue Texas								
	High Self YX1	116.78	133.48	115.52	17.96	3.40	109.23	24.25	9.69
	High Family YX2	283.23	323.73	263.75	59.98	7.92	235.14	88.59	36.53

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HMO Plans		2001 Total Biweekly Premium	2002 Total Biweekly Premium	2002 Biweekly Postal A premium rates			2002 Biweekly Postal B premium rates			
				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment	
Location - Plan - Option - Enrollment Code										
TX	Humana Health Plan of Texas									
	High Self	UR1	94.71	102.99	91.40	11.59	0.94	91.40	11.59	0.94
	High Family	UR2	243.44	264.74	234.96	29.78	2.39	234.96	29.78	2.39
TX	Mercy Health Plans/Premier									
	High Self	HM1	112.96	127.09	112.79	14.30	1.59	109.23	17.86	5.15
	High Family	HM2	282.42	317.73	263.75	53.98	2.73	235.14	82.59	31.34
TX	PacifiCare Health Plans									
	High Self	GF1	87.79	99.61	88.40	11.21	1.33	88.40	11.21	1.33
	High Family	GF2	229.31	260.42	231.12	29.30	3.50	231.12	29.30	3.50
TX	Texas Health Choice, L. C.									
	High Self	UK1	94.90	100.07	88.81	11.26	0.58	88.81	11.26	0.58
	High Family	UK2	242.92	256.16	227.34	28.82	1.49	227.34	28.82	1.49
UT	Altius Health Plans									
	High Self	9K1	132.17	146.67	115.52	31.15	1.20	109.23	37.44	7.49
	High Family	9K2	290.78	322.68	263.75	58.93	-0.68	235.14	87.54	27.93
VT	MVP Health Plan									
	High Self	VW1	129.15	187.10	115.52	71.58	44.65	109.23	77.87	50.94
	High Family	VW2	333.09	483.26	263.75	219.51	117.59	235.14	248.12	146.20
VA	Aetna U. S. Healthcare, Inc.									
	High Self	JN1	114.25	131.73	115.52	16.21	3.36	109.23	22.50	9.65
	High Family	JN2	264.25	304.69	263.75	40.94	7.86	235.14	69.55	36.47
	Standard Self	JN4	83.16	95.89	85.10	10.79	1.43	85.10	10.79	1.43
	Standard Family	JN5	194.60	224.38	199.14	25.24	3.35	199.14	25.24	3.35
VA	CareFirst BlueChoice									
	High Self	2G1	119.01	127.57	113.22	14.35	-2.44	109.23	18.34	1.55
	High Family	2G2	273.72	286.99	254.70	32.29	-10.26	235.14	51.85	9.30
VA	HealthKeepers									
	High Self	X81	104.44	113.12	100.39	12.73	0.98	100.39	12.73	0.98
	High Family	X82	265.21	287.26	254.94	32.32	-1.72	235.14	52.12	18.08

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				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
VA	Kaiser Permanente								
	High Self E31	105.76	107.05	95.01	12.04	0.14	95.01	12.04	0.14
	High Family E32	261.22	264.42	234.67	29.75	-0.30	234.67	29.75	-0.30
VA	MD-IPA								
	High Self JP1	108.91	120.55	106.99	13.56	1.31	106.99	13.56	1.31
	High Family JP2	261.41	289.36	256.81	32.55	2.31	235.14	54.22	23.98
VA	OPTIMA Health Plan								
	High Self 9R1	122.18	137.24	115.52	21.72	1.76	109.23	28.01	8.05
	High Family 9R2	289.10	324.75	263.75	61.00	3.07	235.14	89.61	31.68
VA	PARTNERS NHP of NC								
	High Self EQ1	116.21	138.44	115.52	22.92	8.93	109.23	29.21	15.22
	High Family EQ2	261.49	311.51	263.75	47.76	17.44	235.14	76.37	46.05
VA	Piedmont Community Healthcare								
	High Self 2C1	111.54	134.59	115.52	19.07	6.52	109.23	25.36	12.81
	High Family 2C2	259.57	308.19	263.75	44.44	15.24	235.14	73.05	43.85
WA	Aetna U. S. Healthcare, Inc.								
	High Self 8J1	88.62	110.73	98.27	12.46	2.49	98.27	12.46	2.49
	High Family 8J2	229.63	287.91	255.52	32.39	6.56	235.14	52.77	26.94
WA	Group Health Cooperative								
	High Self 541	115.33	128.95	114.44	14.51	1.40	109.23	19.72	6.61
	High Family 542	260.22	290.97	258.24	32.73	3.46	235.14	55.83	26.56
WA	Group Health Cooperative								
	High Self VR1	119.48	119.27	105.85	13.42	-3.84	105.85	13.42	-3.84
	High Family VR2	307.47	306.62	263.75	42.87	-33.43	235.14	71.48	-4.82
WA	Kaiser Permanente								
	High Self 571	122.05	134.10	115.52	18.58	-1.25	109.23	24.87	5.04
	High Family 572	280.10	307.75	263.75	44.00	-4.93	235.14	72.61	23.68
	Standard Self 574	107.13	120.00	106.50	13.50	1.45	106.50	13.50	1.45
	Standard Family 575	245.87	275.40	244.42	30.98	3.32	235.14	40.26	12.60



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				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
Location - Plan - Option - Enrollment Code									
WA	Kitsap Physicians Service								
	High Self VT1	165.12	178.33	115.52	62.81	-0.09	109.23	69.10	6.20
	High Family VT2	353.18	381.44	263.75	117.69	-4.32	235.14	146.30	24.29
	Standard Self VT4	124.11	134.05	115.52	18.53	-3.36	109.23	24.82	2.93
	Standard Family VT5	271.21	292.91	259.96	32.95	-7.09	235.14	57.77	17.73
WA	PacifiCare Health Plans								
	High Self 7Z1	126.72	166.91	115.52	51.39	26.89	109.23	57.68	33.18
	High Family 7Z2	280.77	369.81	263.75	106.06	56.46	235.14	134.67	85.07
WA	PacifiCare Health Plans								
	High Self WB1	94.21	130.87	115.52	15.35	4.75	109.23	21.64	11.04
	High Family WB2	246.01	343.09	263.75	79.34	51.66	235.14	107.95	80.27
WV	Health Plan Upper OH Valley								
	High Self U41	102.24	117.33	104.13	13.20	1.70	104.13	13.20	1.70
	High Family U42	281.16	322.66	263.75	58.91	8.92	235.14	87.52	37.53
WI	Dean Health Plan								
	High Self WD1	110.32	118.35	105.04	13.31	0.90	105.04	13.31	0.90
	High Family WD2	297.89	319.56	263.75	55.81	-10.91	235.14	84.42	17.70
WI	Group Health Coop								
	High Self WJ1	99.50	116.17	103.10	13.07	1.88	103.10	13.07	1.88
	High Family WJ2	265.58	311.79	263.75	48.04	13.63	235.14	76.65	42.24
WI	Group Hlth Coop/Eau Claire								
	High Self WT1	135.22	175.52	115.52	60.00	27.00	109.23	66.29	33.29
	High Family WT2	348.94	452.91	263.75	189.16	71.39	235.14	217.77	100.00
WI	HealthPartners Classic								
	High Self 531	130.10	143.73	115.52	28.21	0.33	109.23	34.50	6.62
	High Family 532	312.25	344.92	263.75	81.17	0.09	235.14	109.78	28.70
	Standard Self 534	109.24	138.34	115.52	22.82	10.53	109.23	29.11	16.82
	Standard Family 535	262.18	332.02	263.75	68.27	37.26	235.14	96.88	65.87

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Location - Plan - Option - Enrollment Code				USPS Pays	Postal A Empl. Pays	Change in employee payment	USPS Pays	Postal B Empl. Pays	Change in employee payment
WI	HealthPartners Health Plan								
	High Self HQ1	145.23	165.96	115.52	50.44	7.43	109.23	56.73	13.72
	High Family HQ2	348.54	398.31	263.75	134.56	17.19	235.14	163.17	45.80
WI	Unity Health Plans								
	High Self W41	109.01	137.33	115.52	21.81	9.55	109.23	28.10	15.84
	High Family W42	288.88	363.94	263.75	100.19	42.48	235.14	128.80	71.09
WY	WINhealth Partners								
	High Self PV1	New plan	115.18	102.22	12.96	N/A	102.22	12.96	N/A
	High Family PV2	New plan	311.86	263.75	48.11	N/A	235.14	76.72	N/A