

Tribal Premium Rates for the Federal Employees Health Benefits Program

Fee-for-Service Plans (FFS)	2019 Total Monthly Premium	2020 Monthly premium rates			
Plan - Option - Enrollment Code		Total Premium	Tribal Employer Pays	Employee Pays	Change in employee payment

Nationwide APWU Health Plan

CDHP Self	474	597.68	597.68	448.26	149.42	0.00
CDHP Self & Family	475	1417.09	1417.09	1062.82	354.27	0.00
CDHP Self Plus One	476	1299.00	1299.00	974.25	324.75	0.00
High Self	471	726.22	726.22	510.84	215.38	-12.12
High Self & Family	472	1742.91	1742.91	1184.02	558.89	-45.83
High Self Plus One	473	1525.03	1525.03	1092.26	432.77	-25.67

Nationwide Blue Cross and Blue Shield Service Benefit Plan Basic Option

Basic Self	111	638.95	658.19	493.64	164.55	4.81
Basic Self & Family	112	1522.21	1598.33	1184.02	414.31	30.29
Basic Self Plus One	113	1436.15	1479.25	1092.26	386.99	17.43

Nationwide Blue Cross and Blue Shield Service Benefit Plan FEP Blue Focus

FEP Blue Focus Self	131	460.59	460.59	345.44	115.15	0.00
FEP Blue Focus Self & Family	132	1089.18	1089.18	816.89	272.29	0.00
FEP Blue Focus Self Plus One	133	990.21	990.21	742.66	247.55	0.00

Nationwide Blue Cross and Blue Shield Service Benefit Plan Standard Option

Standard Self	104	741.89	764.14	510.84	253.30	10.13
Standard Self & Family	105	1719.32	1805.29	1184.02	621.27	40.14
Standard Self Plus One	106	1622.42	1671.09	1092.26	578.83	23.00

Nationwide GEHA Benefit Plan

High Self	311	728.33	739.25	510.84	228.41	-1.20
High Self & Family	312	1816.25	1843.53	1184.02	659.51	-18.55
High Self Plus One	313	1602.32	1626.37	1092.26	534.11	-1.62
Standard Self	314	509.45	524.72	393.54	131.18	3.82
Standard Self & Family	315	1283.66	1347.84	1010.88	336.96	16.05
Standard Self Plus One	316	1095.34	1128.21	846.16	282.05	8.22

Nationwide GEHA HDHP

HDHP Self	341	508.78	513.85	385.39	128.46	1.27
HDHP Self & Family	342	1262.50	1300.35	975.26	325.09	9.47
HDHP Self Plus One	343	1093.86	1104.81	828.61	276.20	2.74

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Nationwide GEHA Indemnity Benefit Plan						
Elevate Plus Self	251	New Plan	629.83	472.37	157.46	New Plan
Elevate Plus Self & Family	252	New Plan	1561.97	1171.48	390.49	New Plan
Elevate Plus Self Plus One	253	New Plan	1461.18	1092.26	368.92	New Plan
Elevate Self	254	New Plan	410.13	307.60	102.53	New Plan
Elevate Self & Family	255	New Plan	1148.40	861.30	287.10	New Plan
Elevate Self Plus One	256	New Plan	943.32	707.49	235.83	New Plan
Nationwide MHBP Consumer Option						
HDHP Self	481	562.03	573.28	429.96	143.32	2.81
HDHP Self & Family	482	1305.94	1332.07	999.05	333.02	6.54
HDHP Self Plus One	483	1243.78	1268.65	951.49	317.16	6.22
Nationwide MHBP Standard Option						
Standard Self	454	576.64	570.85	428.14	142.71	-1.45
Standard Self & Family	455	1340.04	1326.65	994.99	331.66	-3.35
Standard Self Plus One	456	1327.28	1314.02	985.52	328.50	-3.32
Nationwide MHBP Value Plan						
Value Self	414	477.17	453.31	339.98	113.33	-5.96
Value Self & Family	415	1153.19	1095.53	821.65	273.88	-14.42
Value Self Plus One	416	1130.61	1074.08	805.56	268.52	-14.13
Nationwide NALC Health Benefit Plan						
CDHP Self	324	473.53	473.53	355.15	118.38	0.00
CDHP Self & Family	325	1067.67	1089.03	816.77	272.26	5.34
CDHP Self Plus One	326	1034.35	1044.68	783.51	261.17	2.58
High Self	321	682.09	707.66	510.84	196.82	13.45
High Self & Family	322	1531.68	1592.96	1184.02	408.94	15.45
High Self Plus One	323	1501.44	1565.27	1092.26	473.01	38.16
Nationwide NALC Health Benefit Plan						
Value Self	KM1	388.64	388.64	291.48	97.16	0.00
Value Self & Family	KM2	876.63	894.16	670.62	223.54	4.38
Value Self Plus One	KM3	848.86	857.35	643.01	214.34	2.13

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Nationwide SAMBA Health Benefit Plan

High Self	441	912.69	901.75	510.84	390.91	-23.06
High Self & Family	442	2190.44	2164.15	1184.02	980.13	-72.12
High Self Plus One	443	2007.89	1983.82	1092.26	891.56	-49.74
Standard Self	444	686.90	680.51	510.38	170.13	-18.05
Standard Self & Family	445	1579.93	1552.55	1164.41	388.14	-53.60
Standard Self Plus One	446	1511.23	1464.67	1092.26	372.41	-72.23