

**Department of Defense--Federal Employees Health Benefits Program
Demonstration Project**

| Fee-for-Service Plans (FFS) | | 2000 Total Monthly DoD-FEHB Premium | 2001 DoD-FEHB Monthly Premium | | | Change in DoD-FEHB enrollee payment |
|------------------------------------|------------------------------|--|-------------------------------|------------------|--------|--|
| Plan - Option - Enrollment Code | Total DoD-FEHB Premium | | Gov't Pays | Enrollee Pays | | |
| Alliance Health Plan | | | | | | |
| High Self | 1R1 | 378.63 | 397.50 | 187.61 | 209.89 | 2.06 |
| High Family | 1R2 | 802.66 | 842.79 | 424.28 | 418.51 | -2.88 |
| APWU Health Plan | | | | | | |
| High Self | 471 | 300.45 | 495.76 | 187.61 | 308.15 | 178.50 |
| High Family | 472 | 659.34 | 1,087.93 | 424.28 | 663.65 | 385.58 |
| Blue Cross and Blue Shield | | | | | | |
| High Self | 101 | 314.43 | 339.58 | 187.61 | 151.97 | 8.34 |
| High Family | 102 | 672.36 | 726.14 | 424.28 | 301.86 | 10.77 |
| Standard Self | 104 | 235.89 | 261.84 | 187.61 | 74.23 | 9.14 |
| Standard Family | 105 | 525.96 | 599.58 | 424.28 | 175.30 | 30.61 |
| GEHA Benefit Plan | | | | | | |
| High Self | 311 | 269.86 | 296.86 | 187.61 | 109.25 | 10.19 |
| High Family | 312 | 582.05 | 646.06 | 424.28 | 221.78 | 21.00 |
| Standard Self | 314 | New Option | 238.33 | 178.75 | 59.58 | N/A |
| Standard Family | 315 | New Option | 541.67 | 406.25 | 135.42 | N/A |
| Mail Handlers | | | | | | |
| High Self | 451 | 266.78 | 290.77 | 187.61 | 103.16 | 7.18 |
| High Family | 452 | 615.59 | 671.00 | 424.28 | 246.72 | 12.40 |
| Standard Self | 454 | 241.43 | 263.14 | 187.61 | 75.53 | 4.90 |
| Standard Family | 455 | 557.12 | 607.25 | 424.28 | 182.97 | 7.12 |
| NALC | | | | | | |
| High Self | 321 | 299.61 | 323.18 | 187.61 | 135.57 | 6.76 |
| High Family | 322 | 640.25 | 690.56 | 424.28 | 266.28 | 7.30 |
| Postmasters | | | | | | |
| High Self | 361 | 457.23 | 594.38 | 187.61 | 406.77 | 120.34 |
| High Family | 362 | 986.53 | 1,282.49 | 424.28 | 858.21 | 252.95 |
| Standard Self | 364 | 344.87 | 406.94 | 187.61 | 219.33 | 45.26 |
| Standard Family | 365 | 746.01 | 880.30 | 424.28 | 456.02 | 91.28 |

**Department of Defense--Federal Employees Health Benefits Program
Demonstration Project**

| HMO Plans | | | 2000 Total Monthly DoD-FEHB Premium | 2001 DoD-FEHB Monthly Premium | | | Change in DoD-FEHB enrollee payment |
|---|--------------------------------|------------------------------|--|-------------------------------|------------------|--------|--|
| Location - Plan - Option - Enrollment Code | | Total DoD-FEHB Premium | | Gov't Pays | Enrollee Pays | | |
| CA | Aetna U.S. Healthcare | | | | | | |
| | High Self | 2X1 | 203.23 | 286.78 | 187.61 | 99.17 | 48.36 |
| | High Family | 2X2 | 406.47 | 566.80 | 424.28 | 142.52 | 40.90 |
| CA | Blue Cross- HMO | | | | | | |
| | High Self | M51 | 223.19 | 232.57 | 174.43 | 58.14 | 2.34 |
| | High Family | M52 | 569.14 | 593.06 | 424.28 | 168.78 | -19.09 |
| CA | Blue Shield of CA Access+ | | | | | | |
| | High Self | SJ1 | 270.27 | 297.29 | 187.61 | 109.68 | 10.21 |
| | High Family | SJ2 | 578.22 | 636.05 | 424.28 | 211.77 | 14.82 |
| CA | CIGNA HealthCare of California | | | | | | |
| | High Self | 9T1 | 326.73 | 326.73 | 187.61 | 139.12 | -16.81 |
| | High Family | 9T2 | 653.47 | 653.47 | 424.28 | 229.19 | -43.01 |
| CA | Health Net | | | | | | |
| | High Self | LB1 | 212.62 | 328.88 | 187.61 | 141.27 | 88.12 |
| | High Family | LB2 | 453.12 | 625.08 | 424.28 | 200.80 | 87.52 |
| CA | Kaiser Permanente | | | | | | |
| | High Self | 621 | 272.09 | 273.72 | 187.61 | 86.11 | -15.18 |
| | High Family | 622 | 544.18 | 545.33 | 409.00 | 136.33 | -26.58 |
| CA | Maxicare Southern California | | | | | | |
| | High Self | CM1 | 173.94 | 198.32 | 148.74 | 49.58 | 6.10 |
| | High Family | CM2 | 365.13 | 416.46 | 312.35 | 104.11 | 12.83 |
| CA | PacifiCare Health Plans | | | | | | |
| | High Self | CY1 | 253.28 | 281.67 | 187.61 | 94.06 | 11.58 |
| | High Family | CY2 | 658.47 | 658.47 | 424.28 | 234.19 | -43.01 |
| DE | Aetna U.S. Healthcare | | | | | | |
| | High Self | SU1 | 450.67 | 549.32 | 187.61 | 361.71 | 81.84 |
| | High Family | SU2 | 901.33 | 1,098.63 | 424.28 | 674.35 | 154.29 |
| | Standard Self | SU4 | New Option | 482.78 | 187.61 | 295.17 | N/A |
| | Standard Family | SU5 | New Option | 971.95 | 424.28 | 547.67 | N/A |
| FL | Av-Med Health Plan | | | | | | |
| | High Self | JF1 | New Demo Area | 337.91 | 187.61 | 150.30 | N/A |
| | High Family | JF2 | New Demo Area | 787.35 | 424.28 | 363.07 | N/A |
| IN | Aetna U.S. Healthcare | | | | | | |
| | High Self | 7L1 | New Area | 359.06 | 187.61 | 171.45 | N/A |
| | High Family | 7L2 | New Area | 718.16 | 424.28 | 293.88 | N/A |

**Department of Defense--Federal Employees Health Benefits Program
Demonstration Project**

| HMO Plans | | | 2000 Total Monthly DoD-FEHB Premium | 2001 DoD-FEHB Monthly Premium | | | Change in DoD-FEHB enrollee payment |
|---|------------------------------|-----|--|-------------------------------|------------|------------------|--|
| Location - Plan - Option - Enrollment Code | | | | Total DoD-FEHB Premium | Gov't Pays | Enrollee Pays | |
| IN | Humana Health Plan | | | | | | |
| | High Self | D21 | 251.18 | 271.90 | 187.61 | 84.29 | 3.91 |
| | High Family | D22 | 602.81 | 653.94 | 424.28 | 229.66 | 8.12 |
| IN | M*Plan | | | | | | |
| | High Self | IN1 | 306.65 | 370.98 | 187.61 | 183.37 | 47.52 |
| | High Family | IN2 | 643.59 | 756.17 | 424.28 | 331.89 | 69.57 |
| IA | Coventry Health Care of Iowa | | | | | | |
| | High Self | SV1 | New Demo Area | 323.51 | 187.61 | 135.90 | N/A |
| | High Family | SV2 | New Demo Area | 647.03 | 424.28 | 222.75 | N/A |
| IA | John Deere Health Plan | | | | | | |
| | High Self | YH1 | New Demo Area | 341.25 | 187.61 | 153.64 | N/A |
| | High Family | YH2 | New Demo Area | 682.50 | 424.28 | 258.22 | N/A |
| KS | Kaiser Permanente | | | | | | |
| | High Self | HA1 | New Demo Area | 265.24 | 187.61 | 77.63 | N/A |
| | High Family | HA2 | New Demo Area | 684.34 | 424.28 | 260.06 | N/A |
| KY | Aetna U.S. Healthcare | | | | | | |
| | High Self | 7L1 | New Area | 359.06 | 187.61 | 171.45 | N/A |
| | High Family | 7L2 | New Area | 718.16 | 424.28 | 293.88 | N/A |
| KY | Humana Health Plan | | | | | | |
| | High Self | D21 | 251.18 | 271.90 | 187.61 | 84.29 | 3.91 |
| | High Family | D22 | 602.81 | 653.94 | 424.28 | 229.66 | 8.12 |
| LA | Aetna U.S. Healthcare | | | | | | |
| | High Self | NG1 | 213.55 | 253.67 | 187.61 | 66.06 | 12.67 |
| | High Family | NG2 | 427.12 | 507.15 | 380.36 | 126.79 | 20.01 |
| LA | Blue Cross and Blue Shield | | | | | | |
| | Standard Self | 104 | 235.89 | 261.84 | 187.61 | 74.23 | 9.14 |
| | Standard Family | 105 | 525.96 | 599.58 | 424.28 | 175.30 | 30.61 |
| LA | Maxicare Louisiana | | | | | | |
| | High Self | JA1 | 196.73 | 221.85 | 166.39 | 55.46 | 6.28 |
| | High Family | JA2 | 411.58 | 465.90 | 349.43 | 116.47 | 13.58 |
| MD | Free State Health Plan | | | | | | |
| | High Self | LD1 | 432.01 | 370.13 | 187.61 | 182.52 | -78.69 |
| | High Family | LD2 | 864.05 | 740.26 | 424.28 | 315.98 | -166.80 |
| MD | MD-IPA | | | | | | |
| | High Self | JP1 | 233.46 | 269.62 | 187.61 | 82.01 | 19.35 |
| | High Family | JP2 | 465.83 | 539.24 | 404.43 | 134.81 | 18.35 |

**Department of Defense--Federal Employees Health Benefits Program
Demonstration Project**

| HMO Plans | | | 2000 Total Monthly DoD-FEHB Premium | 2001 DoD-FEHB Monthly Premium | | | Change in DoD-FEHB enrollee payment |
|---|--------------------------------|-----|--|-------------------------------|------------|------------------|--|
| Location - Plan - Option - Enrollment Code | | | | Total DoD-FEHB Premium | Gov't Pays | Enrollee Pays | |
| MN | HealthPartners Classic | | | | | | |
| | High Self | 531 | New Demo Area | 280.13 | 187.61 | 92.52 | N/A |
| | High Family | 532 | New Demo Area | 560.28 | 420.21 | 140.07 | N/A |
| | Standard Self | 534 | New Demo Area | 249.69 | 187.27 | 62.42 | N/A |
| | Standard Family | 535 | New Demo Area | 499.35 | 374.51 | 124.84 | N/A |
| MN | HealthPartners Health Plan | | | | | | |
| | High Self | HQ1 | New Demo Area | 301.86 | 187.61 | 114.25 | N/A |
| | High Family | HQ2 | New Demo Area | 603.72 | 424.28 | 179.44 | N/A |
| MO | BlueCHOICE | | | | | | |
| | High Self | 9G1 | New Demo Area | 313.73 | 187.61 | 126.12 | N/A |
| | High Family | 9G2 | New Demo Area | 624.52 | 424.28 | 200.24 | N/A |
| MO | Health Partners of the Midwest | | | | | | |
| | High Self | RN1 | New Demo Area | 327.19 | 187.61 | 139.58 | N/A |
| | High Family | RN2 | New Demo Area | 693.12 | 424.28 | 268.84 | N/A |
| MO | Humana Kansas City, Inc. | | | | | | |
| | High Self | MS1 | New Demo Area | 279.65 | 187.61 | 92.04 | N/A |
| | High Family | MS2 | New Demo Area | 649.13 | 424.28 | 224.85 | N/A |
| | Standard Self | MS4 | New Demo Area | 218.75 | 164.06 | 54.69 | N/A |
| | Standard Family | MS5 | New Demo Area | 502.95 | 377.21 | 125.74 | N/A |
| MO | Mercy Health Plans/Premier | | | | | | |
| | High Self | 7M1 | New Demo Area | 292.93 | 187.61 | 105.32 | N/A |
| | High Family | 7M2 | New Demo Area | 585.87 | 424.28 | 161.59 | N/A |
| MO | Prudential HealthCare HMO | | | | | | |
| | High Self | VZ1 | New Demo Area | 341.36 | 187.61 | 153.75 | N/A |
| | High Family | VZ2 | New Demo Area | 682.72 | 424.28 | 258.44 | N/A |
| NC | PARTNERS NHP of NC | | | | | | |
| | High Self | EQ1 | 219.79 | 360.53 | 187.61 | 172.92 | 117.97 |
| | High Family | EQ2 | 439.53 | 721.07 | 424.28 | 296.79 | 186.91 |
| NC | UHC of North Carolina | | | | | | |
| | High Self | XM1 | 328.42 | 371.80 | 187.61 | 184.19 | 26.57 |
| | High Family | XM2 | 741.24 | 743.60 | 424.28 | 319.32 | -40.65 |
| PR | Triple-S | | | | | | |
| | High Self | 891 | 214.00 | 228.41 | 171.31 | 57.10 | 3.60 |
| | High Family | 892 | 506.61 | 540.76 | 405.57 | 135.19 | 8.54 |
| TX | APWU Health Plan | | | | | | |
| | High Self | 471 | 300.45 | 495.76 | 187.61 | 308.15 | 178.50 |
| | High Family | 472 | 659.34 | 1,087.93 | 424.28 | 663.65 | 385.58 |

**Department of Defense--Federal Employees Health Benefits Program
Demonstration Project**

| HMO Plans | | | 2000 Total Monthly DoD-FEHB Premium | 2001 DoD-FEHB Monthly Premium | | | Change in DoD-FEHB enrollee payment |
|---|----------------------------|------------------------------|--|-------------------------------|------------------|--------|--|
| Location - Plan - Option - Enrollment Code | | Total DoD-FEHB Premium | | Gov't Pays | Enrollee Pays | | |
| TX | HMO Blue Texas | | | | | | |
| | High Self | YX1 | 173.03 | 310.16 | 187.61 | 122.55 | 79.29 |
| | High Family | YX2 | 346.08 | 620.32 | 424.28 | 196.04 | 109.52 |
| TX | PacifiCare Health Plans | | | | | | |
| | High Self | GF1 | 251.88 | 281.67 | 187.61 | 94.06 | 12.98 |
| | High Family | GF2 | 654.85 | 654.85 | 424.28 | 230.57 | -43.01 |
| TX | Texas Health Choice, L. C. | | | | | | |
| | High Self | UK1 | 273.07 | 281.78 | 187.61 | 94.17 | -8.10 |
| | High Family | UK2 | 546.13 | 563.53 | 422.65 | 140.88 | -23.98 |