Document Number: PFBF25-150
Chapter: Blue Cross and Blue Shield Service Benefit Plan

150

2025 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus 2025 Rate Information for the Blue Cross and Blue Shield Service Benefit Plan Page 150

2025 Rate Information for the Blue Cross and Blue Shield Service Benefit Plan

To compare your PSHB health plan options please go to https://health-benefits.opm.gov/PSHB/.

To review premium rates for all PSHB health plan options, please go to https://www.opm.gov/healthcare-insurance/pshb/premiums/.

FEP Blue Focus Option, Self Only, Enrollment Code 35A:

Premium Rate

Biweekly government share: \$177.53

Biweekly your share: \$59.17

Monthly government share: \$384.64

Monthly your share: \$128.21

FEP Blue Focus Option, Self Plus One, Enrollment Code 35C:

Premium Rate

Biweekly government share: \$381.65

Biweekly your share: \$127.21

Monthly government share: \$826.90

Monthly your share: \$275.63

FEP Blue Focus Option, Self and Family, Enrollment Code 35B:

Premium Rate

Biweekly government share: \$419.78

Biweekly your share: \$139.92

Monthly government share: \$909.51

Monthly your share: \$303.17

Go to page <u>147</u>.