

**Domestic/Civil Union Partners**  
**Imputed Income Rate Before After-Tax Premium**  
**Effective 1/1/2017 to 12/31/2017**

Plan	Biweekly	Plan	Biweekly	Plan	Biweekly	Plan	Biweekly
<b>NJ DIRECT15 #150</b>		<b>NJ DIRECT 1525 #051</b>		<b>NJ DIRECT 2030 #052</b>		<b>NJ DIRECT 2035 #056</b>	
DP	\$ 321.02	DP	\$ 312.03	DP	\$ 293.41	DP	\$ 252.33
DF	\$ 321.02	DF	\$ 312.03	DF	\$ 293.41	DF	\$ 252.33
<b>Aetna Freedom15 #180</b>		<b>Aetna Freedom 1525 #063</b>		<b>Aetna Freedom2030 #064</b>		<b>Aetna Freedom2035 #066</b>	
DP	\$ 321.02	DP	\$ 312.03	DP	\$ 293.41	DP	\$ 252.33
DF	\$ 321.02	DF	\$ 312.03	DF	\$ 293.41	DF	\$ 252.33
<b>Aetna HMO #005</b>		<b>Aetna Liberty Plan #067</b>		<b>Prescription Drug Program #206</b>		<b>Prescription Drug Program #207</b>	
DP	\$ 310.68	DP	\$ 240.77	DP	\$ 81.25	DP	\$ 73.13
DF	\$ 310.68	DF	\$ 240.77	DF	\$ 81.25	DF	\$ 73.13
<b>Horizon HMO #011</b>		<b>Horizon OMNIA Health Plan #057</b>					
DP	\$ 307.57	DP	\$ 240.77				
DF	\$ 307.57	DF	\$ 240.77				
<b>Prescription Drug Program #203</b>		<b>Prescription Drug Program #205</b>					
DP	\$ 88.02	DP	\$ 79.83				
DF	\$ 88.02	DF	\$ 79.83				
<b>NJ DIRECT HD4000 #090</b>		<b>NJ DIRECT HD1500 #091</b>					
DP	\$ 217.13	DP	\$ 322.03				
DF	\$ 217.13	DF	\$ 322.03				
<b>Aetna Value HD4000 #092</b>		<b>Aetna Value HD1500 #093</b>					
DP	\$ 217.13	DP	\$ 322.03				
DF	\$ 217.13	DF	\$ 322.03				