
2024 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus
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To compare your FEHB health plan options please go to www.opm.gov/fehbcompare.

To review premium rates for all FEHB health plan options please go to www.opm.gov/FEHBpremiums or www.opm.gov/Tribalpremium.

Premiums for Tribal employees are shown under the Monthly Premium Rate column. The amount shown under employee contribution is the maximum you will pay. Your Tribal employer may choose to contribute a higher portion of your premium. Please contact your Tribal Benefits Officer for exact rates.

FEP Blue Focus Option, Self Only, Enrollment Code 131:

Premium Rate

Biweekly government share: \$165.92

Biweekly your share: \$55.30

Monthly government share: \$359.48

Monthly your share: \$119.83

FEP Blue Focus Option, Self Plus One, Enrollment Code 133:

Premium Rate

Biweekly government share: \$356.66

Biweekly your share: \$118.88

Monthly government share: \$772.76

Monthly your share: \$257.58

FEP Blue Focus Option, Self and Family, Enrollment Code 132:

Premium Rate

Biweekly government share: \$392.30

Biweekly your share: \$130.76

Monthly government share: \$849.98
Monthly your share: \$283.32

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