2027 FEHB Plan Rates

Standard Option		
Enrollment Code	**Bi-Weekly**	**Monthly**
Self-Only (YJ4)	$101.02	$218.88
Self Plus One (YJ6)	$222.23	$481.51
Self and Family (YJ5)	$242.44	$525.29

Basic Option		
Enrollment Code	**Bi-Weekly**	**Monthly**
Self-Only (YJ1)	$67.15	$145.50
Self Plus One (YJ3)	$147.74	$320.10
Self and Family (YJ2)	$161.16	$349.19

These rates do not apply to all enrollees. If you are in a special enrollment category, please refer to the FEHBP Program website or contact the agency or Tribal Employer which maintains your health benefits enrollment.