

2026 Blue Cross and Blue Shield Service Benefit Plan - FEP Blue Focus
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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: \$225.47

Biweekly your share: \$75.15

Monthly government share: \$488.51

Monthly your share: \$162.83

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

Premium Rate

Biweekly government share: \$484.70

Biweekly your share: \$161.56

Monthly government share: \$1,050.17

Monthly your share: \$350.06

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

Premium Rate

Biweekly government share: \$533.12

Biweekly your share: \$177.70

Monthly government share: \$1,155.08

Monthly your share: \$385.03