

New Jersey Individual Health Coverage Program
Annual Enrollment Report - Part 2 of Exhibit L

Carrier:	
Respondent:	
Phone:	Fax:
Email:	

Year Reported:

	Standard Plans											Basic & Essential Plans				Total Plans		
	Plan A/50			Plan B			Plan C			Plan D			HMO Plans	Indemnity, PPO/EPO with rider	Indemnity, PPO/EPO w/o rider		HMO with rider	HMO w/o rider
	Indemnity	PPO	POS	Indemnity	PPO	POS	Indemnity	PPO	POS	Indemnity	PPO	POS						
A. Report of Inforce Contracts by Zip Code																		
Territory A (070-073)	-			-			-			-			-			-		
Territory B (074-076)	-			-			-			-			-			-		
Territory C (077-079)	-			-			-			-			-			-		
Territory D (088-089)	-			-			-			-			-			-		
Territory E (081, 085-086)	-			-			-			-			-			-		
Territory F (080, 082-084, 087)	-			-			-			-			-			-		
Total	-			-			-			-			-			-		

B. Report of Insured Males																		
Age 0-24	-			-			-			-			-			-		
Age 25-29	-			-			-			-			-			-		
Age 30-34	-			-			-			-			-			-		
Age 35-39	-			-			-			-			-			-		
Age 40-44	-			-			-			-			-			-		
Age 45-49	-			-			-			-			-			-		
Age 50-54	-			-			-			-			-			-		
Age 55-59	-			-			-			-			-			-		
Age 60-64	-			-			-			-			-			-		
Age 65-69	-			-			-			-			-			-		
Age 70 & Over	-			-			-			-			-			-		
Total	-			-			-			-			-			-		

C. Report of Insured Females																		
Age 0-24	-			-			-			-			-			-		
Age 25-29	-			-			-			-			-			-		
Age 30-34	-			-			-			-			-			-		
Age 35-39	-			-			-			-			-			-		
Age 40-44	-			-			-			-			-			-		
Age 45-49	-			-			-			-			-			-		
Age 50-54	-			-			-			-			-			-		
Age 55-59	-			-			-			-			-			-		
Age 60-64	-			-			-			-			-			-		
Age 65-69	-			-			-			-			-			-		
Age 70 & Over	-			-			-			-			-			-		
Total	-			-			-			-			-			-		

D. Report of Plans as Amended by Riders																		
Number of Plans																		