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**TO:** State Health Benefits Program Participating Local Government Employers  
**FROM:** New Jersey State Health Benefits Program  
**SUBJECT: SHBP Special Open Enrollment — Local Government Employers**

The State Health Benefits Commission, at its December 11, 2008 meeting, voted to approve the coordination of benefits (COB) between NJ DIRECT10 and NJ DIRECT15. Previous to this decision, there was no COB between the two plans. The Commission also approved a change to NJ DIRECT10 that allows the copayments a member makes to in-network providers to count toward the in-network out-of-pocket maximum. Previously only coinsurance counted toward the in-network out-of-pocket maximum.

The Commission approved a Special Open Enrollment to allow members to change medical plans. The Special Open Enrollment period will begin on **February 1, 2009 and end on February 28, 2009**. All plan changes made during this open enrollment will be effective on May 1, 2009.

**Please Note:** This Special Open Enrollment will only allow members to change medical plans. Members will not be permitted to add dependents or make any changes to dental or prescription drug coverage.

For changes made during this Special Open Enrollment, completed employer-certified *Health Benefits Applications* should be forwarded to the Health Benefits Bureau as soon as they are received from employees. The last day that certified applications may arrive at the Health Benefits Bureau is March 6, 2009.

### MEDICAL PLANS

The SHBP currently offers Local Government employees a choice of one of four medical plans.

- **NJ DIRECT10** — a Preferred Provider Organization administered by Horizon Blue Cross Blue Shield of New Jersey that offers a selection of both in-network coverage with a \$10 copayment and out-of-network coverage subject to deductibles and coinsurance; or
- **NJ DIRECT15** — a Preferred Provider Organization administered by Horizon Blue Cross Blue Shield of New Jersey that offers a selection of both in-network coverage with a \$15 copayment and out-of-network coverage subject to deductibles and coinsurance; or

- **Aetna HMO** or **CIGNA HealthCare HMO** — standard Health Maintenance Organization (HMO) plans that offer in-network coverage through a primary care physician for a \$10 copayment.

A side-by-side comparison of medical plan benefits is available in the *Plan Comparison Summary for Local Government Employees*, available for viewing or printing at the SHBP Web site: [www.state.nj.us/treasury/pensions/shbp.htm](http://www.state.nj.us/treasury/pensions/shbp.htm)

**HEALTH BENEFITS APPLICATIONS** — The *Health Benefits Application* is available for printing from the SHBP Web site at: [www.state.nj.us/treasury/pensions/shbp.htm](http://www.state.nj.us/treasury/pensions/shbp.htm)

**PLAN HANDBOOKS, AND HEALTH PLAN COMPARISON SUMMARY CHARTS** — *Plan Member Handbooks* (NJ DIRECT, Aetna HMO, CIGNA HealthCare HMO), and the SEHBP *Plan Comparison Summary* chart are available as online publications on the SEHBP Web site at: [www.state.nj.us/treasury/pensions/sehbp.htm](http://www.state.nj.us/treasury/pensions/sehbp.htm) Please encourage your employees to access these materials online. Bulk supplies of printed copies are no longer available.