

New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation

**Health Service Corporation Information Statement**  
**Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**INSTRUCTIONS:** Pursuant to N.J.S.A. 17:48E-3h, this Health Service Corporation (HSC) Information Statement is required to be filed annually with, and in a form and manner prescribed by, the Department of Banking and Insurance. For the reports for year-end 2016 and year-end 2017, a health service corporation shall on or before April 30, 2018, file an original and two copies of this HSC Information Statement, providing fully completed information for all sections and requests below as of year-end 2016. For all subsequent years, a health service corporation shall annually on or before April 30<sup>th</sup> file an original and 2 copies of its fully completed HSC Information Statement with the Department providing fully completed information for all sections and requests below as of the end of the preceding calendar year. Please be advised that the Department anticipates that portions of the information requested herein will also be reported in the HSC's Annual Financial Statement. However, to be fully complete, this Information Statement requires submission of the actual information and data requested, and cross-references to the Annual Financial Statement will not be sufficient.

The HSC Information Statements shall be sent to the New Jersey Department of Banking and Insurance, 20 W. State Street, Trenton, NJ 08625, Attn: Assistant Commissioner - Office of Solvency Regulation.

The HSC Information Statement and the information provided herein shall be certified as true and correct by a senior officer of the filing health service corporation. This Information Statement will be evaluated by the Department for its annual report to the Governor and the Legislature on compliance with P.L. 2017, c. 100 beginning on or before June 30, 2019, as required by N.J.S.A. 17:48E-3i.

**I) General Information**

<b>Report as of Year-End:</b>	2019
<b>Name of Health Service Corporation (HSC):</b>	Horizon Healthcare Services, Inc. dba Horizon Blue Cross Blue Shield of New Jersey
<b>Principle Address:</b>	3 Penn Plz E Ste PP-15D, Newark, NJ US 07105-2248
<b>Primary Location of Books and Records:</b>	3 Penn Plz E Ste PP-15D, Newark, NJ US 07105-2248
<b>Contact Person for Filing:</b>	Catherine Merlino, Controller Tel: 973-466-5954, Fax: 973-466-4632 <a href="mailto:catherine_merlino@horizonblue.com">catherine_merlino@horizonblue.com</a>
<b>Location/Date of Formation:</b>	New Jersey/December 7, 1932

**A) Subsidiaries & Affiliates - List all Subsidiaries and Affiliates of the HSC and a brief description of their activities and identifying services that are provided to the HSC (insert rows as needed):**

<b>Name of Subsidiary/Affiliate<sup>1</sup></b>	<b>Description of Activities &amp; HSC Services Provided</b>
Horizon Casualty Services, Inc. (HCS)	A managed care workers' compensation company which offers integrated care and administrative services to insurers employers, and third-party administrators.
Horizon Healthcare Dental, Inc. (HHD)	A New Jersey dental plan organization offering dental products.
Horizon Healthcare of New Jersey, Inc. (HHNJ)	A health maintenance organization ("HMO") operating in New Jersey offering commercial HMO, Dual Special Needs Plans ("DSNP"), and contracted with the NJ Division of Medical Assistance and Human Services to provide managed Medicaid services.
Horizon Insurance Company, Inc. (HIC)	A health insurer operating in New Jersey offering senior and ancillary products, including Medicare Advantage plans, Medicare supplemental plans and managed vision plans.

<sup>1</sup> The list of subsidiaries and affiliates reflect operating companies within the group.

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**B) Management & Governance:**

**1) Briefly describe the management and governance structure of the HSC below:**

Horizon BCBSNJ is a health service corporation organized and operating under the Health Service Corporation Act. N.J.S.A. 17:48E-1 et seq. As of December 31, 2019, the Board of Directors was a 15 member board (5 appointed and 10 elected) and are noted in Exhibit I-B-2. The Board of Directors acts as the ultimate decision-making body of Horizon BCBSNJ and advises and oversees management, who are responsible for the day-to-day operations and management of Horizon BCBSNJ. In fulfilling these roles, each director must act in what he or she reasonably believes to be in the best interests of Horizon BCBSNJ and must exercise his or her business judgment. In 2019, Kevin P. Conlin was the Chief Executive Officer & President of Horizon BCBSNJ. He also acted as Chairman of the Board of Directors.

**2) Attach as Exhibit IB2 a chart of all officers, directors, senior management and trustees, their titles, and a brief description of their responsibilities.**

**II) Mission:**

**A) Describe the HSC’s mission and how it fulfills the statutory mission pursuant to N.J.S.A. 17:48E-3a.**

Under N.J.S.A. 17:48E-3a, a health service corporation shall not be established as a corporation organized for pecuniary profit. It should operate for the benefit of its subscribers. Specifically, a health service corporation’s mission shall be to: (1) provide affordable and accessible health insurance to its subscribers; and (2) promote the integration of the health care system to meet the needs of its subscribers.

Horizon BCBSNJ’s mission statement is as follows:

“We empower our members to achieve their best health by leading with strength, integrity, and innovation to generate substantial improvements in health care quality, affordability, and member experience.”

**B) Provide a chart with the group’s New Jersey Medical Loss Ratio Results for the Individual and Small Employer markets pursuant to N.J.A.C. 11:20-6.3, -7.4 and -7.5 and N.J.A.C. 11:21-7A.4, -7A.5 , and -9.3, respectively, for most recent policy year as follows: Premiums; Claims; Loss Ratio; and NJ Refund Liability (net any Federal Liability):**

Market	Premiums	Claims	Loss Ratio	NJ Refund Liability (net any Federal Liability)
Individual	\$1,210,345,694	\$941,547,198	78%	\$TBD
Small Employer	\$1,438,902,259	\$1,115,434,727	78%	\$TBD

Note:

The above information is preliminary and is subject to change upon the filing of the actual reports in August 2020.

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Per N.J.A.C. 11:20-7.4 and N.J.A.C. 11:21-7A, the Individual and Small Group loss ratio filing requires a 6 month run-out of claims data which is not reflected. Additionally, this submission does not account for any final risk adjustment impact for the 2019 year or other regulator adjustment. A complete submission will be available on the New Jersey Department of Banking and Insurance's ("DOBI") website at <http://www.nj.us/dobi/> on or after August 1 of each year.

**III) Activities:**

**A) Describe in detail the most significant business activities of the HSC and all material subsidiaries and affiliates.**

**2019 Business Activities and Key Accomplishments**

In 2019, Horizon BCBSNJ continued to provide its members with access to affordable, high quality health coverage in all market segments. Horizon BCBSNJ provided health insurance coverage to roughly 3.46 million members through commercial and governmental health plans. See below chart for details on our enrollment by customer type and funding method. Additionally, Horizon BCBSNJ successfully launched a variety of value-based and community programs to positively impact the lives of the members and communities it serves.

<b>Customer Type:</b>	<b>Number of Members</b>
Large Group	1,497,716
State Health Benefits Program	526,328
Federal Employee Program	124,262
Small Group	207,965
Individual	159,086
Medicaid	830,365
Medicare	114,771
<b>Total members</b>	<b>3,460,493</b>
<b>Funding Method:</b>	
Fully-insured	1,784,234
Self-insured	1,676,259
<b>Total members</b>	<b>3,460,493</b>

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**Commercial Markets**

Horizon BCBSNJ provided a wide array of commercial health insurance products to its enrollees in 2019 with leading market shares in both the individual and group markets. Horizon BCBSNJ was one of three carriers on the Health Insurance Marketplace and played a significant role in the individual market. It also provided quality health insurance solutions to many employers, ranging from small to large private employers, local municipalities, the State of New Jersey, federal employees, and many others.

At the end of 2019, Horizon BCBSNJ had in excess of 2.51 million insured and self-funded commercial health plan members.

**Individual Market**

The Individual market consists of New Jersey residents who do not have health insurance benefits through their employer or otherwise not enrolled in Medicare, Medicaid, or other governmental health plans. Individual health plans in New Jersey are available through the federally-facilitated Health Insurance Marketplace (healthcare.gov), or directly from the carriers.

Plans in the individual market are offered pursuant to the requirements applicable to all carriers under the New Jersey Individual Health Coverage Program (“IHC”). Horizon BCBSNJ offered two EPO plan design options on and off the marketplace, the Horizon EPO Advantage broad network plans and the Horizon OMNIA<sub>SM</sub> tiered network plans. Additionally, an HMO option was sold off the marketplace through an affiliate, Horizon Healthcare of New Jersey, Inc.

At the end of 2019, 285,947 consumers in New Jersey had health insurance through the Individual market. Horizon BCBSNJ’s total Individual membership at the end of 2019 stood at 160,712, representing a 56.20% market share per the DOBI website made available at [https://www.nj.gov/dobi/division\\_insurance/ihcseh/enroll/19q4/ihccarrier.pdf](https://www.nj.gov/dobi/division_insurance/ihcseh/enroll/19q4/ihccarrier.pdf).

Of Horizon BCBSNJ’s members, approximately 92% of the covered lives in the individual market purchased an OMNIA<sub>SM</sub> Health Plan in 2019. For Horizon’s individual market, on a statutory accounting basis (“STAT”), it incurred \$975,004,644 in claims and earned 1,152,579,545 in premiums.

**Small Employer Market**

The Small Employer market consists of companies with up to 50 employees who provide an employer-sponsored health plan. Plans in this market segment comply with the NJ Small Employer Health Coverage Program (“SEH”) rules.

In 2019, Horizon BCBSNJ offered a range of ACA compliant plans on and off the federally-facilitated Small Employer Health Options Program (“FF-SHOP”). Plan designs included closed panel HMO and EPO plans such as the Horizon HMO, Horizon Advantage EPO and Horizon OMNIA<sub>SM</sub> plans as well as plans with out-of-network coverage such as the Horizon Direct Access. Horizon BCBSNJ also allowed for the renewal of “grandmothered” transitional policy plans issued prior to the ACA market reform rules pursuant to the federal transitional policy rules.

As of the end of 2019, roughly 45,957 small employers offered insurance to their employees, covering a total of 308,984 employees and their eligible dependents in New Jersey’s small employer market. Per the DOBI website, Horizon BCBSNJ’s total small employer membership at the end of 2019 stood at 207,270. Of Horizon BCBSNJ’s members, roughly 54% had purchased an OMNIA<sub>SM</sub> Health Plan. Horizon BCBSNJ’s estimated market share was 68.52% pursuant to the carrier enrollment data made available on the DOBI website at [https://www.nj.gov/dobi/division\\_insurance/ihcseh/enroll/19q4/sehplansbycarrier.pdf](https://www.nj.gov/dobi/division_insurance/ihcseh/enroll/19q4/sehplansbycarrier.pdf).

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For Horizon's small employer market, on a STAT basis, Horizon incurred \$1,119,630,968 in claims and earned \$1,348,047,465 in premiums.

**Large Employer Market**

A majority of the commercial health plans are through employers with 51+ employees. Large employer customers can range from local employers to multistate national accounts, and includes labor unions, municipals, and the federal employee health plans.

These markets can be insured or self-insured. Horizon issued insured large employer plans covering 470,521 lives, and administered self-funded large employer plans covering 1,141,931 lives. There is greater variability in the plan designs, benefit structures and actuarial values as compared to the IHC and SEH plans. Further, pricing in the large employer market is more variable due to experience rating. As of the end of 2019, Horizon BCBSNJ offered HMO, EPO, including OMNIA, PPO, and Direct Access health plans in these market segments.

For insured large employer plans, Horizon incurred \$2,993,068,442 in claims and earned \$3,406,558,642 in premiums. For self-funded large employer plans, on a STAT basis, Horizon incurred \$5,787,273,034 in employer-funded claims and earned \$277,022,265 in administration fees/charges.

**State Health Benefits Program and the School Employees' Health Benefits Program**

The State Health Benefits Program ("SHBP") and School Employees' Health Benefits Program ("SEHBP") together represent one of the largest public sector group health plans in the country. All New Jersey State active employees, employees of state colleges and universities, and retirees, are covered by the SHBP. Additionally, local government groups, such as municipalities and counties, may elect to participate in the SHBP to provide coverage for their active employees, retirees, and eligible dependents. Employees of local boards of education and community colleges may elect to participate in the SEHBP for their active employees, retirees, and eligible dependents.

Our commitment to our members led to Horizon BCBSNJ being named the exclusive medical carrier for the state of New Jersey's State Health Benefits Program (SHBP) and the School Employees' Health Benefits Program (SEHBP). Following a competitive bidding process, Horizon BCBSNJ emerged as the state's top choice to provide network, claims, navigation and advocacy services for active and retired public employees under age 65 who are covered by the SHBP and SEHBP. Horizon BCBSNJ has held this honor since 1996, and it reinforces Horizon BCBSNJ's position as the premier health insurer in New Jersey.

As of the end of 2019, Horizon BCBSNJ's total membership in the SHBP and SEHBP market at year-end 2019 was 526,328. On a STAT basis, Horizon incurred \$3,742,364,775 in self-funded claims for the SHBP/SEHBP and earned \$79,486,485 in administration fees/charges.

**Federal and State Governmental Health Programs (Medicare, Medicaid, etc.)**

The Government Programs division of Horizon BCBSNJ manages all lines of government business; serving members across both Medicare and Medicaid lines of business, with special attention to Aged, Blind & Disabled (ABD), Managed Long-Term Services & Supports ("MLTSS"), Dual-Eligible, and other specialized populations.

Government Programs supports the Horizon BCBSNJ enterprise by bringing all government lines of business under one

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universal platform that provides an integrated marketing and sales focus that not only best serves the needs of its Medicaid and Medicare members, but also allows for the establishment of one single united brand presence in the marketplace.

**Medicaid Markets**

The Medicaid business, operated by Horizon Healthcare of New Jersey, Inc., a New Jersey HMO doing business as Horizon NJ Health, is New Jersey's largest managed Medicaid health care organization serving 830,365 beneficiaries (as of 12/31/19) through the State's NJ FamilyCare program. Additionally, Horizon NJ Health manages the company's MLTSS program. On a STAT basis, Horizon NJ Health incurred \$4,664,294,826 in claims for the Medicaid Managed Care and MLTSS population and earned \$5,154,311,081 in premium/fees for service.

Horizon NJ Health has developed targeted member-centered services, innovative programs and community outreach to serve the diverse needs of its members. Horizon NJ Health holds an accreditation status from the National Committee for Quality Assurance (NCQA).

One of the primary missions of Horizon NJ Health is to reduce the persistent gaps in health care access and quality that disproportionately affects Americans from diverse racial and ethnic backgrounds. Many who experience disparate care live in neighborhoods lacking high-quality health services and providers. To address these persistent gaps, members of Horizon NJ Health's staff interact extensively with community members on a daily basis, offering health education to adults and children, providing health screenings, and taking steps to assure that community members receive all health benefits that are available to them.

**Medicare Markets**

The Government Programs division markets and sells a competitive and wide-ranging line of senior market products that serves New Jersey beneficiaries that are Medicare eligible for reasons of age or disability. Horizon BCBSNJ's Medicare plans include Medicare Advantage, Medicare Part D, Medicare Supplemental and Dual Special Needs (DSNP) plans. For total Medicare market, Horizon together with its affiliates insured 114,771 lives, earned premiums totaling \$863,593,883, and incurred claims totaling \$706,008,378.

**Key Accomplishments in 2019**

Horizon BCBSNJ's commitment to its members, and its goal to achieve the *Triple Aim* in health care comprised the core aspects of our 2019 accomplishment.

**WE EMPOWER**

**Building Healthier Communities**

The first step in helping our members become healthy is recognizing the conditions that affect their health. At Horizon BCBSNJ, we are addressing barriers in communities—social determinants of health—that impact access to health care resources and affect health outcomes. Housing, affordable healthy food and access to reliable transportation are just some of the factors that make it

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challenging for people to get the care they need.

Our Community Health model brings together the payer, health care professional and community resources to significantly reduce cost, increase access to care and improve the patient's health. This model also features a non-clinical support team to intervene on critical elements which currently fall outside of traditional health care. A specialized team works with members through high-touch and face-to-face encounters that:

- Link members to community resources to address barriers to care.
- Help members navigate the health care system by promoting preventive care and care for chronic conditions.
- Educate members on their health plan's benefits, with a focus on appropriate care.
- Help members set goals that empower them to take charge of their health.

### **Care for the Mind and Body**

It is no secret that how we feel affects how we heal. Mind and body health are dependent upon each other. We recognize the importance of treating the health of our members as a whole, and we seek to address our members' unique needs with more integrated care.

This past year, we began transitioning the administrative and clinical management of the Horizon Behavioral Health<sup>SM</sup> program – behavioral health services and benefits – from Beacon Health Options (formerly *ValueOptions*) to our internal team of professionals. By managing these services and benefits internally, we are in a stronger position to work directly with providers and health systems to improve the integration of physical and behavioral health care for our members.

Our Government Programs lines of business (Medicare Advantage, Medicaid and HMO D-SNP) transitioned on December 29, 2019. Our Commercial lines of business transitioned on March 29, 2020.

### **Supportive Care**

Through our Supportive Care Program<sup>SM</sup>, we helped members who were experiencing a serious medical illness or undergoing treatment. This free and voluntary pilot program connected these members to palliative care services that improve the quality of life for both them and their families. Supportive care nurses worked with members, their families and their doctors to help them identify personal care goals, navigate the health care system, understand their benefits and collaborate to address their specific needs. While this pilot program is no longer active, many of the lessons learned have been incorporated into our care management programs that help our members deal with their medical conditions every day

### **Our Digital Transformation**

Horizon BCBSNJ remains focused on creating and delivering an improved, member-centric digital experience. In 2019, we were pleased to receive national validation that we're on the right track with one of our most significant member-facing tools – the Horizon Blue app – receiving a FutureEdge 50 award, which recognizes organizations that use new technologies to push boundaries within their industry.

We continue to improve and expand the app's capabilities, with links to wearables, such as smartwatches, and connections to a patient's electronic health records.

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By using the Horizon Blue app, members can now:

- Chat live with nurses 24/7 to get medical advice
- Chat with a Horizon BCBSNJ service representative to address benefit or claim questions
- Pay their premiums and set up auto pay (Individual and Medicare members)
- View their benefits and claims and find in-network doctors and hospitals nearby using Apple or Google maps
- Access a digital copy of their Horizon BCBSNJ member ID cards and digital Explanation of Benefits (EOBs)
- Access their Health Savings Accounts, Health Reimbursement Accounts and Flexible Spending Accounts

More than 171,000 members downloaded the Horizon Blue app in 2019, bringing the total amount of Horizon BCBSNJ members now using the app to more than 200,000 since its launch. To download the app, members can simply text *GetApp* to 422-272, or search for *Horizon Blue* in the Apple or Google app stores.

**Improved Access to Information**

In 2019, we made it easier for our members to find their health plan information, determinations and communications through the Horizon Blue app and the secure member web portal, HorizonBlue.com. Members who are registered with our secure member web portal, and who agree to receive electronic communications, now receive their EOB statements electronically. They can access and print EOB statements from the app and web portal weeks before they would have received them in the mail, and can easily find and view an EOB for up to 18 months after it was issued.

**WE LEAD**

**Changing Health Care, Changing Lives**

One of the most important ways Horizon BCBSNJ empowers our members to achieve their best health is by collaborating with doctors, hospitals and other health care professionals across the state to help them deliver value-based, patient-centered care. Members receiving care from doctors and other health care professionals who participate in one of our patient-centered, value-based care programs are less likely to be admitted to the hospital, and more likely to have essential health screenings and a lower overall cost of care. This is especially true for members who have chronic conditions that require ongoing medical attention and intervention.

We saw the positive results of our efforts to drive down costs and improve outcomes through our patient-centered programs, including Patient-Centered Medical Homes, Accountable Care Organizations and Episodes of Care (EOC). More than 9,200 value-based providers serve more than 1.6 million members currently enrolled in one or more of these programs. In 2018, approximately \$100.8 million in value-based payments were made to providers.

Year over year, results show that members who are treated by doctors, hospitals and other health care professionals that participate in one of Horizon BCBSNJ's patient-centered programs are more likely to get preventive care that is coordinated. Results also show that clinical quality in patient-centered pediatric care is excellent, with significant improvements in immunization rates for more than 100,000 children and adolescents whose doctors participate in Horizon BCBSNJ's pediatric patient-centered program.

Overall, the 2018 results (as compared with 2017 results) indicated:

- 6% higher rate of breast cancer screenings

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- 4% higher rate for cervical cancer screenings
- 11% increase in adolescent immunizations
- 9% increase in weight counseling and monitoring visits
- 21% increase in child well visits

Our nationally recognized EOC programs continue to expand, and are proving to help lower costs. We also launched programs with two large hospital systems serving as conductors in 2019. The annual gross savings projected for 2019 is nearly \$34 million.

#### **Secret Shopper Study Pays Off**

We saw significant claims savings, plus improvements in several quality measures when we collaborated with the Robert Wood Johnson Foundation on a “secret shopper” study. The study sent actors, portraying patients, into primary care practices to test the practices’ customer service, performance, adherence to evidence-based standards, and documentation and compliance.

Visits with the undercover patients were reviewed, along with the doctors’ notes from the patients’ medical records, by a team of researchers. The findings were shared with the doctors, along with suggestions intended to help each doctor improve care.

Overall, doctor behavior improved following the feedback, according to the study.

#### **WE INNOVATE**

##### **Lowering Prescription Costs**

We took aim at high prescription drug prices with the launch of a pharmacy pricing transparency tool. In partnership with our pharmacy benefits manager and a vendor partner, Horizon BCBSNJ launched an innovative software platform where doctors can quickly get patients the right medication at the best price. This innovative tool delivers up-to-date medication and alternative cost information in real time to doctors via patients’ electronic health records.

In addition to lowering out-of-pocket costs for our members, this solution also helps doctors spend more time caring for their patients by making prescribing more efficient and less time consuming. Since its launch, use among doctors has grown steadily. Doctors recognize the convenience of using the platform and understand the value of helping their patients reduce out-of-pocket costs. Each day this platform processes over 3,000 Horizon BCBSNJ member medications, and has processed Horizon BCBSNJ member medications originating from over 18,000 providers to date.

##### **Choices That Deliver**

Horizon BCBSNJ continues to be the state's leader in offering affordable care that addresses the needs of New Jersey's residents. As part of the 2020 open enrollment period, Horizon BCBSNJ held an estimated 56 percent market share despite the challenges of this highly competitive and regulated environment. The Company offered seven competitively priced plans for 2019 on the federal Marketplace, led by four OMNIA Health Plans (Bronze HSA, Silver, Silver HSA and Gold) and three broad-network Horizon Advantage plans.

Our OMNIA Health Plans, launched in 2016, were created in response to consumer demand for coverage that would provide access to quality care at a lower cost. These tiered-network plans feature premiums with an average discount of more than 10 percent, when compared to equivalent broad-network products, and give our members the opportunity to save even more on their

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out-of-pocket costs (copayments, coinsurance and deductibles) when they receive care from OMNIA Tier 1-designated doctors, hospitals and other health care professionals.

In 2019, the OMNIA Health Plans continued to be our premier product line, with more than 447,000 members enrolled in one of these innovative products, which collectively score higher in member satisfaction than the equivalent broad-network plans. New features and benefits will be included with our OMNIA Health Plans for our local group and national customers later this year.

In 2018, we also improved our portfolio of non-medical ancillary product solutions. Now offered under the branded name Horizon EXPAND, our supplemental products and services go beyond medical coverage to give our customers the products, tools and resources they need to provide a broad and attractive range of benefit offerings.

**Options for Those Who Need Them**

Through our Government Programs division, we are focused on our Medicaid and Medicare members. In 2019, we continued to offer innovative plan options to better serve residents in all 21 New Jersey counties who are most in need of health care, including our senior population.

Our Government Programs division serves the state's Medicaid community through our Horizon NJ Health subsidiary. In 2019, Horizon NJ Health celebrated its 26th anniversary. What started in one county 26 years ago has grown into the largest Medicaid managed care organization in the state, serving more than 830,000 members and providing coverage to those most in need, including low-income families, individuals with disabilities and people in need of long-term care services. Horizon NJ Health also serves the State's most vulnerable residents through our Managed Long Term Services & Supports (MLTSS) program. MLTSS members have Care Managers who strive to enable them to live in their homes and communities as long as possible by providing services such as home-delivered meals, assisted-living, patient care assistance, medical daycare services, home modifications, vehicle modifications and non-medical transport.

**Bridging Culture and Care**

Providing care and information that is culturally relevant can help improve outcomes and access. Through a collaboration with Sanitas Medical Centers, Horizon BCBSNJ offers face-to-face assistance, in Spanish and English, to help people get, understand and use their health insurance as well as access the health care they need.

Sanitas Medical Centers are located in primarily Hispanic and ethnically diverse neighborhoods, and are easily accessible via public transportation, giving members a new option for buying health insurance and accessing high-quality, affordable health care. The centers offer our members same-week appointments, same-day lab tests and diagnostic imaging, and walk-in appointments for urgent care.

**WE CARE**

**The Horizon Foundation for New Jersey**

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The Horizon Foundation made 71 grants in 2019, totaling more than \$2.5 million, and has now made 1,564 grants since its inception in 2004, totaling more than \$59.1 million.

### **Knocking Out Opioid Abuse**

In 2019, The Horizon Foundation for New Jersey, together with The Partnership for a Drug-Free New Jersey (PDFNJ), continued its support of Knock Out Opioid Abuse (KOOA), an initiative that addresses the opioid epidemic through community outreach, prescriber and parent education, and a statewide awareness campaign.

The multi-year KOOA initiative has sponsored a series of town halls throughout the state to reduce stigma and raise community awareness of the epidemic. The feedback on these town halls has been overwhelmingly positive. According to the evaluation conducted by Rutgers University regarding the program's impact, hundreds of town hall participants are more informed, and are more likely to share lessons learned, talk with children and young adults about the risks of opioid addiction, and safely dispose of opioid medications stored at home.

The first KOOA town hall, held in March 2019 at the Newark Museum of Art, served as a summit that looked at the state and federal responses to the epidemic. However, one of the most memorable KOOA events was held at Rutgers University and focused on student athletes. After several speakers shared impassioned stories of their addiction and recovery or of family members struggling with addiction, Rutgers student-athletes pledged to do their part to knock out opioid abuse.

### **Engaging the Audience**

Believing that open communication is essential in the fight against the opioid epidemic, The Horizon Foundation for New Jersey continued its support of *Anytown*, a touring musical developed by the George Street Playhouse. *Anytown* explores the opioid impact on students and families in a way that is easily understood by its intended audience of students in grades seven through 12.

### **Empowering the Provider Community**

To help educate health professionals authorized to prescribe in New Jersey, Horizon BCBSNJ and the PDFNJ launched a one-hour education webinar entitled *Do No Harm: Exploring Strategies for Safer Prescribing of Opioids*, which provides information vital to promoting safer prescribing practices to keep patients safe from opioid misuse and addiction. According to the PDFNJ, since its launch in May, more than 200 health care professionals, caring for an estimated 220,000 patients, have completed the course (based on self-reported information from participating medical professionals).

### **Continued Collaboration**

The Horizon Foundation for New Jersey also continued its support of *Healthy U*, an initiative that helps prevent childhood obesity in New Jersey by encouraging physical activity, nutrition education and family involvement, in addition to more than 20 other programs.

Helping organizations like the New Jersey YMCA State Alliance put children and families first is a priority. By educating children on healthy living habits, Horizon BCBSNJ and its partners work to reduce the incidence of chronic illnesses such as heart disease and diabetes. These conditions have a tremendous impact on a person's quality of life and contribute to rising health care costs. By focusing on prevention, Horizon BCBSNJ is working to turn the tide on the obesity epidemic.

The Horizon Foundation's grants also served many other vulnerable populations in 2019. To reach more children in need, funding was doubled for dental care and education programs through our Kids' Oral Health Program. And, to serve New Jersey's largest minority group, a new grant supported the Hispanic Family Center of Southern New Jersey's community health navigation

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program, *Pathways to Health*.

**Horizon Cares**

Horizon BCBSNJ employees are committed to their communities. Through participation in our Horizon *Cares* program, 587 employees volunteered more than 6,300 hours to non-profit organizations throughout the state in 2019, with 18 employee volunteers nominated and recognized by their peers for their efforts through a new Outstanding Volunteer Recognition program.

Horizon BCBSNJ is the statewide sponsor of the American Cancer Society. Through our involvement, employees participated in Making Strides Against Breast Cancer walks, the George Washington Bridge Challenge, the Relay for Life, a day of remembrance and celebration, and more.

Horizon BCBSNJ and its employees also supported select nonprofit organizations in New Jersey, such as the Greater Newark Conservancy and the Community FoodBank of New Jersey through our Days of Caring program. And, Horizon BCBSNJ employees took advantage of the Matching Gifts Program, with the Company matching a record \$582,000 in gifts to eligible non-profit organizations in 2019.

**IV) Assets, Liabilities, Revenue, Expenses:**

**A) Provide a separate and distinct summary of the financial information from the HSC's most recent Annual Statement filing on the following:**

**1) Assets; see below**

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**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	2,261,183,973	0	2,261,183,973	2,110,999,483
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	5,328,997	0	5,328,997	3,206,103
2.2 Common stocks.....	1,696,521,864	25,169,568	1,671,352,296	1,532,444,918
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$ ..... encumbrances).....	0	0	0	0
5. Cash (\$ .....(260,029,869) , Schedule E-Part 1), cash equivalents (\$ .....21,760,728 , Schedule E-Part 2) and short-term investments (\$ .....6,779,935 , Schedule DA).....	(231,489,205)	0	(231,489,205)	(235,512,961)
6. Contract loans (including \$ ..... premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	783,973	0	783,973	75,104,031
9. Receivables for securities.....	246,632	0	246,632	2,200,285
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	3,732,576,233	25,169,568	3,707,406,665	3,488,441,858
13. Title plants less \$ ..... charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	17,548,046	0	17,548,046	18,042,706
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	257,873,512	4,357,008	253,516,504	281,558,197
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	150,342,090	0	150,342,090	241,753
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	76,879,397	0	76,879,397	7,430,925
17. Amounts receivable relating to uninsured plans.....	454,533,528	27,569,367	426,964,161	431,207,751
18.1 Current federal and foreign income tax recoverable and interest thereon.....	143,732,570	0	143,732,570	300,498,613
18.2 Net deferred tax asset.....	131,591,297	0	131,591,297	273,845,186
19. Guaranty funds receivable or on deposit.....	30,613,328	0	30,613,328	30,330,048
20. Electronic data processing equipment and software.....	39,235,174	0	39,235,174	45,536,664
21. Furniture and equipment, including health care delivery assets (\$ ..... ).....	463,424,272	463,424,272	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	215,067,194	0	215,067,194	262,777,698
24. Health care (\$ .....138,327,891 ) and other amounts receivable.....	379,645,849	767,982	378,877,867	306,844,675
25. Aggregate write-ins for other-than-invested assets.....	509,232,401	396,140,123	113,092,278	81,039,048
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	6,602,294,892	917,428,320	5,684,866,572	5,527,795,121
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. Total (Lines 26 and 27).....	6,602,294,892	917,428,320	5,684,866,572	5,527,795,121
<b>DETAILS OF WRITE-INS</b>				
1101. ....	0	0	0	0
1102. ....	0	0	0	0
1103. ....	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Expenses.....	393,340,399	393,340,399	0	0
2502. Non-Bankable checks.....	2,799,724	2,799,724	0	0
2503. State Income Tax Recoverable.....	9,171	0	9,171	8,471
2598. Summary of remaining write-ins for Line 25 from overflow page.....	113,083,107	0	113,083,107	81,039,577
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	509,232,401	396,140,123	113,092,278	81,039,048

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2) Liabilities; see below

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ ..... reinsurance ceded)	1,009,441,755	0	1,009,441,755	933,496,444
2. Accrued medical incentive pool and bonus amounts	0	0	0	0
3. Unpaid claims adjustment expenses	8,316,897	0	8,316,897	7,713,525
4. Aggregate health policy reserves, including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act	217,222,187	0	217,222,187	173,172,314
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserves	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	87,601,453	0	87,601,453	85,190,182
9. General expenses due or accrued	1,064,301,124	0	1,064,301,124	771,946,996
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized capital gains (losses))	0	0	0	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others	0	0	0	121,649
13. Remittances and items not allocated	0	0	0	0
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current)	80,454,251	0	80,454,251	249,702,755
15. Amounts due to parent, subsidiaries and affiliates	73,500,219	0	73,500,219	57,776,467
16. Derivatives	0	0	0	0
17. Payable for securities	1,754,780	0	1,754,780	1,032,250
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers, \$ ..... unauthorized reinsurers and \$ ..... certified reinsurers)	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ ..... ) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	7,520,000	0	7,520,000	7,232,000
23. Aggregate write-ins for other liabilities (including \$ ..... current)	402,073,528	0	402,073,528	255,149,177
24. Total liabilities (Lines 1 to 23)	2,952,186,194	0	2,952,186,194	2,542,533,759
25. Aggregate write-ins for special surplus funds	XXX	XXX	198,410,758	0
26. Common capital stock	XXX	XXX	0	0
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	0	0
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	2,534,269,620	2,985,261,367
31. Unassigned funds (surplus)	XXX	XXX	0	0
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... )	XXX	XXX	0	0
32.2 ..... shares preferred (value included in Line 27 \$ ..... )	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	2,732,680,378	2,985,261,367
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	5,684,866,572	5,527,795,126
<b>DETAILS OF WRITE-INS</b>				
2301. Deposits from other organizations	156,282,113	0	156,282,113	147,931,269
2302. Liability for post-retirement benefits	104,249,539	0	104,249,539	103,921,908
2303. Risk Adjustment Payable	141,541,876	0	141,541,876	3,296,000
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	402,073,528	0	402,073,528	255,149,177
2501. 2020 Insurer Fee	XXX	XXX	198,410,758	0
2502. ....	XXX	XXX	0	0
2503. ....	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	198,410,758	0
3001. Special contingent surplus-Individual contracts	XXX	XXX	706,696,361	836,173,240
3002. Special contingent surplus-other	XXX	XXX	1,827,571,259	2,149,088,127
3003. ....	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	2,534,269,620	2,985,261,367

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**3) Revenues;**

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	14,898,941	15,567,601
2. Net premium income (including \$ .....0 non-health premium income).....	XXX	11,611,553,406	12,597,770,766
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	(64,002,373)	(141,293,660)
4. Fee-for-service (net of \$ ..... medical expenses).....	XXX	0	0
5. Risk revenue.....	XXX	0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0
8. Total revenues (Lines 2 to 7).....	XXX	11,547,551,033	12,456,477,106
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits .....	0	4,316,420,285	4,006,632,186
10. Other professional services .....	0	169,113,179	179,806,472
11. Outside referrals .....	0	188,535,752	233,056,473
12. Emergency room and out-of-area .....	0	30,580,615	45,474,223
13. Prescription drugs .....	0	699,506,306	951,059,402
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0
16. Subtotal (Lines 9 to 15).....	0	5,404,156,137	5,416,028,756
<b>Less:</b>			
17. Net reinsurance recoveries .....	0	(4,701,561,616)	(5,347,182,043)
18. Total hospital and medical (Lines 16 minus 17) .....	0	10,105,717,753	10,763,210,799
19. Non-health claims (net).....	0	0	0
20. Claims adjustment expenses, including \$ .....231,326,208 cost containment expenses.....	0	344,960,254	286,400,721
21. General administrative expenses.....	0	1,330,523,114	1,499,377,079
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only).....	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	11,781,201,121	12,548,988,599
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	(233,650,088)	(92,511,493)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	0	80,198,037	83,749,614
26. Net realized capital gains (losses) less capital gains tax of \$ .....	0	9,252,275	35,481,288
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	89,450,312	119,230,902
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ ..... )] .....	0	0	0
29. Aggregate write-ins for other income or expenses .....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	(144,199,776)	26,719,409
31. Federal and foreign income taxes incurred .....	XXX	(145,422,689)	(309,390,297)
32. Net income (loss) (Lines 30 minus 31).....	XXX	1,222,913	336,109,706
<b>DETAILS OF WRITE-INS</b>			
0601. ....	XXX	0	0
0602. ....	XXX	0	0
0603. ....	XXX	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	XXX	0	0
0701. ....	XXX	0	0
0702. ....	XXX	0	0
0703. ....	XXX	0	0
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above).....	XXX	0	0
1401. ....	0	0	0
1402. ....	0	0	0
1403. ....	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....	0	0	0
2901. ....	0	0	0
2902. ....	0	0	0
2903. ....	0	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....	0	0	0

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4) Expenses; See above

**V) Compensation Data<sup>2</sup>:**

A) Provide the total compensation paid during the reporting year to each of the HSC's current and former officers, directors, trustees, and the five other highest compensated employees who are not an officer, director or trustee by completing the following table (add rows as needed):

Name & Title	TOTAL COMPENSATION
<b>Officers</b>	
Kevin P. Conlin, Chairman, President and Chief Executive Officer	\$4,491,088
Christopher M. Lepre, Executive Vice President, Commercial Business	\$2,539,859
Mark L. Barnard, Executive Vice President, Government Programs and Operations	\$2,175,067
Douglas Simpson, , Senior Vice President and Chief Financial Officer	\$2,081,659
Allen J. Karp, Executive Vice President, Health Care Transformation and Management	\$2,065,187
Linda A. Willett, Senior Vice President, General Counsel and Secretary	\$1,905,213
Margaret M. Coons, Senior Vice President, Human Resources	\$1,487,324
Douglas E. Blackwell, Senior Vice President and Chief Information Officer	\$1,301,171
William D. Georges, Senior Vice President and Chief Strategy Officer	\$1,115,685
<b>Five Next Highly Compensated Employees</b>	
Robert Franzoi, Vice President, Health Care Management	\$1,215,088
Vijay Venkatesan, Vice President, Chief Analytics Officer	\$1,098,128
Vincent Alonge, Vice President, Enterprise Operations	\$996,475
Joseph Albano, Vice President, Commercial & Specialty Markets	\$970,052
David J. Rosenberg, Vice President, Corporate Finance and Chief Accounting Officer	\$961,031

<sup>2</sup>Horizon BCBSNJ submits the compensation paid to Officers and Directors, and the five other highest compensated employees who were employed, appointed, or elected in 2019.

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<b>Directors</b>	
John J. Ballantyne	\$77,000
Michele A. Brown	\$77,000
Todd C. Brown	\$163,000
Leonard S. Coleman, Jr.	\$130,000
Kevin P. Conlin	\$0
Laurence M. Downes	\$124,000
Leonard G. Feld	\$103,000
Aristides W. Georgantas	\$137,000
Michelle A. Gourdine	\$103,000
Brian M. Kinkead	\$110,000
Joseph M. Kyrillos	\$90,000
Carlos A. Medina	\$110,000
Joseph M. Muniz	\$77,000
Joanne Pace	\$143,000
Joseph J. Roberts	\$90,000

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**CERTIFICATION**

I hereby certify on behalf of Horizon Healthcare Services, Inc. dba Horizon Blue Cross Blue Shield of New Jersey that the information submitted in this report pursuant to N.J.S.A. 17:48E-3h is true and correct, and can be relied upon by the Department for the purposes of making its report required by N.J.S.A. 17:48E-3i.

**Douglas Simpson** Digitally signed by Douglas Simpson  
Date: 2020.05.07 11:24:23 -04'00'

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Name: Douglas R. Simpson  
Title: Senior Vice President and Chief Financial Officer

**Horizon BCBNJ Officers** *(As of Year-End 2019)*

<b>Name</b>	<b>Title</b>	<b>Brief Description of their Responsibilities</b>
Kevin P. Conlin	Chairman, President & Chief Executive Officer	Responsible for the overall performance of the corporation.
Mark L. Barnard	Executive Vice President, Government Programs and Operations	Responsible for developing, implementing, and supporting Enterprise-wide Service initiatives; Responsible for governmental health plans operated by the Company or its affiliates, including Medicare Advantage, Managed Medicaid, Dual Special Needs Plans, Managed Long Term Services and Support Programs, and Medicare Supplemental Plans.
Allen J. Karp	Executive Vice President, Healthcare Transformation and Management	Responsible for value-based programs, health affairs, clinical operations, network contracting, pharmacy, behavioral health, provider relations, and analytics.
Christopher M. Lepre	Executive Vice President, Commercial Business	Responsible for medical, pharmacy, dental, vision, life and disability, and stop loss sales and account management across many markets, including consumer, commercial and national accounts, Taft-Hartley Labor, the Federal Employee Program (FEP) and the State Health Benefits Program (SHBP).
Douglas E. Blackwell	Senior Vice President & Chief Information Officer	Responsible for all aspects of Information Technology which includes the planning, development, and delivery of all applications and infrastructure, as well as system and technology operations.
Margaret M. Coons	Senior Vice President, Human Resources	Responsible for human resources strategy and planning, talent acquisition, organizational development, compensation and benefits, employee relations, leadership development, and training.
William D. Georges	Senior Vice President and Chief Strategy Officer	Responsible for developing and overseeing the Company's corporate strategy, expanding its business development and leading the Strategic Initiatives Group.
Douglas Simpson	Senior Vice President & Chief Financial Officer	Responsible for managing the financial risks of the corporation and financial reporting.
Linda A. Willett	Senior Vice President, General Counsel & Secretary	Responsible for the legal affairs of the corporation, provides legal advice on company matters, serves as the Secretary of the Board of Directors, and oversees government affairs, public affairs, and enterprise communication.

**EXHIBIT I.B.2 (continued)****Horizon BCBSNJ Board of Directors (As of Year-End 2019)**

<b>Name</b>	<b>Affiliation</b>
John J. Ballantyne	Chairman, New Jersey Sports and Exhibition Authority
Michele A. Brown	Former Chief Executive Officer, Choose New Jersey
Todd C. Brown	Vice Chairman (Retired), ShoreBank Corporation
Leonard S. Coleman, Jr.	Former President of the National League of Professional Baseball Clubs
Kevin P. Conlin	Chairman, President & Chief Executive Officer, Horizon BCBSNJ
Laurence M. Downes	Chairman and Chief Executive Officer, New Jersey Resources
Leonard G. Feld	President, Leonard G. Feld, MD, LLC; President (Retired), Pediatric Specialists of America
Aristides W. Georgantas	Retired Executive Vice President of the Chase Manhattan Bank
Michelle A. Gourdine	Senior Vice President of Population Health and Primary Care at University of Maryland Medical System
Brian M. Kinkead	Vice Chairman (Retired), Global Healthcare Group, Bank of America Merrill Lynch
Joseph M. Kyrillos	Former New Jersey State Senator; Principal, SK Partners
Carlos A. Medina	Chairman, Statewide Hispanic Chamber of Commerce; President, Robinson Aerial Surveys, Inc.
Joseph M. Muniz	Board Secretary, Hudson County Schools of Technology; Chairman, North Hudson Community Action Corporation
Joanne Pace	Retired Chief Operating Officer and Managing Director of Morgan Stanley Investment Management
Joseph J. Roberts	Former Assembly Speaker, State of New Jersey