



## State of New Jersey

Department of the Treasury

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### **Open Enrollment is Underway For 2013 State Health Benefit Plans**

*Participants Have New Coverage Options to Consider*

**Trenton** – With the open enrollment period for the State Health Benefits Program (SHBP) and School Employees' Health Benefits Program (SEHBP) now underway, subscribers can make changes to their health-plan coverage, premium contributions and out-of-pocket costs for Plan Year 2013. The period began on Oct. 1, 2012, and will run through Nov. 9, 2012.

In the coming year, most subscribers will be able to choose from among four new Preferred Provider Organization (PPO) Plans that are being offered by Aetna. This brings the number of PPO options to eight for most subscribers.

There are also three new Health Maintenance Organization Plans being offered by Horizon Blue Cross Blue Shield of New Jersey. Participants will continue to be able to select from among four High Deductible Health Plan Options.

**In addition, members of Cigna plans will have to select new coverage because these plans are being eliminated.**

Plan information for all of the new SHBP/SEHBP medical plans — including plan rates and new *Summary of Benefits and Coverage* charts — is now

available for online viewing or printing at:

[www.state.nj.us/treasury/pensions/health-benefits.shtml](http://www.state.nj.us/treasury/pensions/health-benefits.shtml)

In addition, a step-by-step *Guide to Making Your Health Benefit Choices During Open Enrollment* can be found at:

<http://www.state.nj.us/treasury/pensions/pdf/hb/how-to-enroll-2012.pdf>

As part of Pension and Health Benefits Reform Law that the State adopted in 2011, most employees must now contribute a percentage of the premium cost based on the medical and prescription plan they select.

The increase in contribution rates is subject to a four year phase-in. “Year Two” contribution rates apply for the period July 1, 2012, through June 30, 2013, for State employees. “Year Three” contribution rates for State employees will apply for the period July 1, 2013, through June 30, 2014. Local government and education employees may have other phase-in schedules depending on the expiration of collective negotiated agreements.

Employees who are considering a change of medical plan based on cost should review the contribution amounts for both “Year Two” and “Year Three.”

The SHBP/SEHBP’s Percentage of Contribution Calculators have been updated for Plan Year 2013 rates and are also available online through links at: [www.state.nj.us/treasury/pensions/health-benefits.shtml](http://www.state.nj.us/treasury/pensions/health-benefits.shtml). Medical and dental plan rate charts are also available for online viewing or printing.

Subscribers with questions about coverage options should first consult their benefits administrator or human resources representative. They may also call the Division of Pensions and Benefits’ Client Services line at 609-292-7524.

The medical plan choices for 2013 are:

**Preferred Provider Organizations** — Enrolled members and dependents may see any physician, nationwide. When using an in-network provider, most services require a copayment. Out-of-network benefits are payable subject to a deductible and coinsurance.

- *PPO plans include:* Aetna Freedom10\*; Aetna Freedom15; Aetna Freedom1525; Aetna Freedom2030; NJ DIRECT10\*; NJ DIRECT15; NJ DIRECT1525; NJ DIRECT2030.

**Health Maintenance Organizations (HMOs)** — Enrolled members and dependents must choose a Primary Care Physician to coordinate all care.

Referrals must be obtained in order to visit a specialist. There are no benefits for using an out-of-network provider.

- *HMO plans include:* Aetna HMO; Aetna HMO 1525; Aetna HMO 2030; Horizon HMO\*; Horizon HMO 1525\*; Horizon HMO 2030\*.

**High Deductible Health Plans (HDHPs)** — Enrolled members and dependents may see any physician, nationwide, but are responsible for eligible medical expenses until a deductible is met. A Health Savings Account (HSA) is available to all HDHP subscribers.

- *HDHP choices include:* Aetna Value HD4000\*; NJ DIRECT HD4000\*; Aetna Value HD1500; NJ DIRECT HD1500.

**Cigna Medical Plan Termination** — Effective with the 2013 plan year, the **Cigna medical plans** — Cigna HealthCare HMO; Cigna 1525; Cigna 2030; Cigna HD1500; and Cigna HD4000 — **will no longer be offered** through the SHBP/SEHBP.

- **Active Employees and retirees enrolled in Cigna medical plans MUST select a new medical plan for 2013**, by submitting a *Health Benefits Application* to their human resources representative during Open Enrollment. Retirees should submit the application directly to the Division of Pensions and Benefits.
- Employees and retirees enrolled in Cigna who fail to select a new medical plan **will not have medical coverage effective Jan. 1, 2013 (Dec. 29, 2012 for State biweekly employees)**.
- **Note:** The Cigna Dental DPO remains available to employees eligible for the SHBP Employee Dental Plans.

Employers and employees should note that in addition to the separate State, Local Government, and Local Education applications of past years, there are now separate applications for the **PPO/HMO** medical plans and the **High Deductible Health Plans** (along with an *Health Savings Account Contribution Form* for **HDHP enrollees**). As in past years, **dental plan** enrollees should use the separate *Employee Dental Plans Application*.

We encourage all participants to review the Open Enrollment information and the new plan offerings carefully. Making an informed and appropriate selection of your health benefits coverage is important for yourself and your dependents.

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\*Horizon HMO service area is limited to New Jersey, Delaware, and parts of Pennsylvania and New York; Aetna Freedom10 and NJ DIRECT10 are not available to State Employees; NJ DIRECT HD4000 and Aetna Value HD4000 are not available to Local Education Employees.