



**LOCAL GOVERNMENT RETIRED GROUP
MEDICAL PLAN DESIGN - PLAN YEAR 2018
AETNA AND HORIZON PLANS - MEDICAL COST SHARING**

Explore Your Benefits

	Aetna Freedom10*	Aetna Freedom15*	Aetna Freedom1525**	Aetna Freedom2030**	Aetna HMO*	Aetna HMO1525*	Aetna HMO2030**	Aetna Value HD4000**
	NJ DIRECT10*	NJ DIRECT15*	NJ DIRECT1525	NJ DIRECT2030	Horizon HMO ¹	Horizon HMO1525 ¹	Horizon HMO2030 ¹	NJ DIRECT HD4000**
Medical Cost Sharing								
Primary Care Copayment	\$10	\$15	\$15	\$20	\$10	\$15	\$20	
Specialist Care Copayment	\$10	\$15	\$25	\$30 / adult \$20 / child***	\$10	\$25	\$30 / adult \$20 / child***	
Emergency Room Copayment	\$75	\$100	\$100	\$125	\$85	\$100	\$125	
In-Network Deductible (Individual/Family)								\$4,000 / \$8,000
In-Network Coinsurance ²	10%	10%	10%	10%				20% after deductible
In-Network Coinsurance Maximum (Individual/Family)		\$400 / \$1,000	\$400 / \$1,000	\$800 / \$2,000				\$1,000 / \$2,000
In-Network Out-of-Pocket Maximum (Individual/Family)	\$400 / \$1,000	\$5,999 / \$11,998	\$5,999 / \$11,998	\$5,999 / \$11,998	\$5,999 / \$11,998	\$5,999 / \$11,998	\$5,999 / \$11,998	\$5,000 / \$10,000
Out-of-Network Deductible (Individual/Family)	\$100 / \$250	\$100 / \$250	\$100 / \$250	\$200 / \$500				See In-Network Deductible ³
Out-of-Network Coinsurance ⁴	20%	30%	30%	30%				40%
Out-of-Network Out-of-Pocket Maximum (Individual/Family)	\$2,000 / \$5,000	\$2,000 / \$5,000	\$2,000 / \$5,000	\$5,000 / \$12,500				\$6,000 / \$12,000
Out-of-Network Inpatient Hospital Deductible	\$200 / stay	\$200 / stay	\$200 / stay	\$500 / stay				

* Medicare-eligible retirees and/or Medicare-eligible spouses of retirees will be enrolled in Medicare Advantage if this plan is selected.

** Medicare-eligible retirees and/or retirees with Medicare-eligible spouses cannot enroll in Aetna Freedom1525, Aetna Freedom2030, Aetna HMO2030, or any High Deductible Health Plan.

*** Age 26 and under

¹ Service areas for Horizon HMO plans are limited to New Jersey, New Castle County in Delaware, and bordering counties of Pennsylvania and New York.

² On select services.

³ Out-of-Network Deductible is combined with In-Network Deductible.

⁴ After Deductible.

NOTE: Medicare enrollees can review the Medicare Advantage plan designs at Aetna's website: www.aetnastatenj.com and Horizon's website: www.horizonblue.com/shbp



**LOCAL GOVERNMENT RETIRED GROUP
 MEDICAL PLAN DESIGN - PLAN YEAR 2018
 AETNA AND HORIZON PLANS - PRESCRIPTION DRUG COPAYMENTS**

Explore Your Benefits

	Aetna Freedom10	Aetna Freedom15	Aetna Freedom1525	Aetna Freedom2030	Aetna HMO	Aetna HMO1525	Aetna HMO2030	Aetna Value HD4000
	NJ DIRECT10	NJ DIRECT15	NJ DIRECT1525	NJ DIRECT2030	Horizon HMO ¹	Horizon HMO1525 ¹	Horizon HMO2030 ¹	NJ DIRECT HD4000
Prescription Drug Copayments								
Retail: Generic Copayments	\$10	\$10	\$7	\$3	\$6	\$7	\$3	Subject to deductible and coinsurance
Retail: Preferred Brand Copayments	\$22	\$22	\$16	\$18	\$12	\$16	\$18	
Retail: Non-Preferred Brand Copayments	\$44	\$44	\$35	\$46	\$24	\$35	\$46	
Retail: Brand w/ Generic Equivalent	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	
Mail: Generic Copayments	\$5	\$5	\$5	\$5	\$5	\$5	\$5	
Mail: Preferred Brand Copayments	\$28	\$28	\$40	\$36	\$18	\$40	\$36	
Mail: Non-Preferred Brand Copayments	\$55	\$55	\$88	\$92	\$30	\$88	\$92	
Mail: Brand w/ Generic Equivalent	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	member pays difference ³	
Prescription Drug annual Out-of-Pocket Maximum ²	\$1,351	\$1,351	\$1,351	\$1,351	\$1,351	\$1,351	\$1,351	

¹ Service areas for Horizon HMO plans are limited to New Jersey, New Castle County in Delaware, and bordering counties of Pennsylvania and New York.
² Maximum out-of-pocket on prescription drugs per person per calendar year.
³ Non-Medicare eligible retirees pay the applicable generic copayment as listed above, plus the cost difference between the brand drug and the generic drug.