Frequently Asked Questions Open Enrollment 2021--PART I

*So, the new plan is still a \$10 co-pay for chiro, acu, and PT? Just the 10 and 15 are changing?

The New Jersey Educators Health Plan copayment for Chiropractic, Acupuncture and Physical Therapy services is listed as \$15 per visit.

*How do we know if our current doctors will accept the new plan? Is NJEHBP under Horizon Blue Cross Blue Shield as well?

The NJEHP is a Horizon Plan, so it is in the **same** network as the NJ DIRECT plans...so when looking up your doctor in the Horizon Doc Finder, use the **NJ Direct** as the "plan".

*What is the difference between the NJ Direct Zero and this new plan? Am I saving any money? I see the co pay is going to be \$10 not \$0

Yes, you will be saving more money with the new plan. While there is a copay increase of \$10 to this plan, the cost of the plan is lower, AND it is based ONLY on salary (not both plan AND salary)

*If I am a waiver already, do I need to fill out a waiver form as well?

No need to complete a waiver form unless you previously had a medical plan with Pemberton, and wish to Waive Medical as of 1/1/21. Along with your waiver enroll, you will need to send a copy of proof of your coverage as of 1/1/21.

*The calculator link is missing to find out my per pay amounts

Yes, I am sorry. I went to paste the link and the state does not yet have the calculator prepared on their site. It was my intent to delete that line...sorry for the confusion there! Here is another link you can use to get your closest estimate. It was provided to me after I sent out the original email.

https://www.horizonblue.com/shbp/open-enrollment/2021-premium-contribution-calculator

*Is the NJEHP replacing the Direct Zero? It seems almost the same when I looked at everything, but Direct Zero is no longer there for me to compare it to? I didn't see any price comparison either.

It is not replacing any particular plan...but there are similarities. It is a NEW plan designed for lower cost and the employee contribution is not based on the cost of the plan AT ALL...you know what your Zero plan is...so you will be able to see the differences. There is not a cost comparison to the Zero plan. Since NJEHP is only the % of your salary...so no cost is even necessary. I just included on the Excel sheet so that you would see that it costs less than the other plans.

*How would the new insurance affect my child who is out of state?

It will not at all on the new plan. . . all are PPO plans and the coverage would be the same network as the 10 or the 15. The NJ Zero plan did not have as rich of a plan for out of state (emergent only if not in network, or you would pay....but the NJEHP is more rich than the Zero when it comes to out of state.)

* Is there a trial period for the new plan; can we switch back if we find we don't like the new plan? Even if the switch would be the following year?

Of course. You will have an opportunity each October to select available plans and switch to be effective as of January 1st of the following year.

*For retirees, do the plans offered cover you if you don't live in New Jersey? For example, if we move to another state will the coverages they offer retirees cover us there?

For Non-Medicare retirees, they would automatically be moved to the NJ Educator's Health Plan effective Jan 1, 2021. For Medicare retirees, there will be no changes to the plan. For selfpay retirees, they will have the option of either moving to the NJ Educator's Health Plan or staying in their current plan election. Yes, the NJEHP is in all states for coverage.

* I have Direct Zero are you able to tell me what I contribute now and opposed to if I switched to the NJ plan? It only compared with Direct 10.

Your pay stub tells you your EBC amount. The new NJEHP plan is a separate computation. . .you will find your salary on the contribution schedule flyer at the correct level and multiply your current salary by that percentage. Then divide by 20 pays and that will by your new amount. (24 pays for 11-12 month employees)

*If Direct 10 or Direct 15 are chosen for insurance, is there a cap? Is there going to be an increase in costs to employee if we stay with NJ10/15?

The percentages of the Chapter 78 will stay in effect. This year, once again the rates decreased some, so you won't see an increase this year, so you would need to re-evaluate each year to confirm. The calculator on the state website has not yet been updated with the new rates.

Coverage plan questions

* Out of Network: what does the deductible/single family category mean \$350/\$700?

This would mean that the Deductible for an individual would be \$350. The maximum deductible that can be incurred by a 2-Adult, Parent/Child or Family contract would be \$700 out-of-network. At which point, the employee would be responsible for a 30% coinsurance until they reach their out-of-network maximum out of pocket.

* Out of Network: what does the Maximum Provider reimbursement mean for "90% Fair Health" and "200% of Medicare"?

The NJ Direct 10 and 15 plans reimburses at 90% of Fair Health, which is a reimbursement schedule used by several insurance companies. The NJ Educators plan reimburses 200% of the Medicare allowance. In many instances, 200% of Medicare produces a lower payment to providers. This can result in larger balance billing when utilizing out-of-network services. We always recommend, when possible, to seek network from an in-network provider to minimize your out of pocket exposure.

* If we stay with NJ10/15, do we need to complete the Vision, Dental & Prescription forms? Medical and Prescription is totally separate from vision and dental plans. No need to do dental or vision forms unless you need changes to them.

FREQUENTLY ASKED QUESTIONS- Part II

*Right now, I am on the Dental Choice program. What is my other option?

Horizon Traditional Dental

*If I switch, how much more would be taken out of every paycheck?

See the attachment with the dental and vision per pay for both dental plans (and vision as well) You will notice that the Dental Choice plan is much cheaper---not only in your contributions for dependents, but it is ALSO much cheaper in out of pocket expenses. It is just a smaller network of dentists, so it is a better plan for coverage, and there are plenty of dentists if you wish to stay on that plan.

*Will I have access to any dentist's office?

With the Traditional plan, you will have access to any dentist in that network that takes Horizon. Just a reminder that you can look on <u>https://doctorfinder.horizonblue.com/</u> <u>dhf_search</u> to find doctors and dentists with your plan. We are rural so you will want to extend the radius of your search.

*Is our contribution is calculated based on net or gross pay?

It is based on your salary (contract amount).

*How can I determine my per pay amount on the NJEHB plan?

Click the underlined text to view the Chapter 44 Calculator that I sent out Monday, Oct 5th.

*Per the PTEA contract, if we switched from Direct 10 or Direct 15 to Direct 0, we were given an incentive in the form of extra money in June. Do you know with this new plan if that is still a thing since its contract language -- what happens to that?

Yes, any PTEA member choosing the new plan will be eligible for the benefit incentive. The benefit incentive will be offered to employees who choose, or are currently enrolled in, plans at the rate of Direct/Freedom 15 or lower. The new plan is rated below Direct 15.

*The benefits overview page says 10% coinsurance on select services. Is there a link or information on what those select services are?

These services are listed below.

Select Services - Ambulance services, Durable Medical Equipment, Inherited Metabolic Disease Medical Foods, Private Duty Nursing & Specialized Non-Standard Infant Formula

*You mention that the copay with the NJEHP plan will now be \$15 for PT. What about for other types of therapy such as OT, speech, and pulmonary rehab?

These would also be listed at \$15. There may be a prior authorization required, which your doctor should be obtaining on your behalf.

*How much will counseling and ABA therapy cost with the new plan?

We are still waiting for confirmation and a full benefit booklet, but this will most likely be a \$15 copay.

*What is the cost for sleep studies and for same day surgery with the new plan?

Same day surgeries will be covered at 100%. We are still waiting for confirmation and a full benefit booklet from the state to confirm the sleep study coverage, but this will likely be covered at 100%.

*Also, can you please explain what this new 10% co-insurance fee means?

This means that the service will be paid at 90% by Horizon. The member will be liable for 10%. Below are the select services that will apply the 10% coinsurance.

Select Services - Ambulance services, Durable Medical Equipment, Inherited Metabolic Disease Medical Foods, Private Duty Nursing & Specialized Non-Standard Infant Formula

*What are the Dental and Vision Deduction amount for the 20-21 School year?

Click the underlined text to view the <u>Dental and Vision Deduction</u> amount for this school year. If you are a 10-month employee, you will look at the rates in that first column. If you are an 11-12 month employee, you will look in the second column.

*I just printed ("The Summary of Benefits and Coverage") off; where do we get the SBC? Almost all of the answers say "See separate Medicals Plan SBC".

There seemed to be a misunderstanding of the attachments in the initial email. The first attachment is labeled the NJEHB plan, the second attachment is labeled RX. The one attachment refers to the other attachment. That should clarify this concern. If you have specific answers you do not find, please email <u>canderson@pemb.org</u> with your exact questions.