

NJ DIRECT/ NJ DIRECT 2019/NJDIRECT/NJDIRECT 2019

<https://www.state.nj.us/treasury/pensions/documents/hb/oe2020/ha1059.pdf>

WHY?

The new plan was negotiated to get members off the Chapter 78 premium payment schedule, while maintaining the plan design coverage of NJDirect15.

SAVINGS:

The new cost sharing moves from paying a percentage of the premium to a percentage of base pay. The projected savings to members is 1.5% and 3% of pay on premiums once off the Chapter 78 schedule.

NO NETWORK DISRUPTIONS:

The new plan is a PPO so there will be no disruption in network providers, including doctors, hospitals and other providers in the old NJDirect15. The Network is **identical**.

CO-PAYS:

Co-pays for medical remains the same - \$15 (unless you enroll in the Primary Care Pilot, in which case co pays are \$0). The \$15 Urgent Care co-pay remains the same. Rx co-pays increase to \$7 for generics and \$16 for brand name.

OTHER CO-PAYS:

Emergency room co-pays, when not admitted increase to \$150. If you are admitted from the ER, the co-pay is waived.

Employees hired after July 1, 2019 will have a \$100 in-network deductible. However, that deductible will not apply to preventative care (annual physicals or annual gynecological exams), any pediatric exams, for obstetrics, or for the second examination under the Wellness Program. This deductible doesn't apply to current employees.

OUT-OF-NETWORK (OON):

Out-of-network reimbursement rates to providers was based on a 90% of Fair Health rate (rating industry) to 175% of Center for Medicare/Medicaid Services (CMS) rates. Out-of-network costs drive up costs to the plan overall. If you are currently going to out-of-network providers, you are being balance billed for the amount that the State does not pay for OON services. The CMS rate is based on the Medicare (not Medicaid) rate and it may result in a lower reimbursement rate than the Fair Health rate. In that case, if you continue to use OON providers, there may be increases in balanced billing.

If you have to go OON, there are some built-in protections. There is an OON maximum, after which the reimbursement rate is higher. There are protections for OB/GYN and mental health care for current users of OON providers in those areas.

CHANGES TO HMOs?

No, if you want to stay in your HMO or High Deductible plan you can stay, but you will have to remain on the Chapter 78 premium sharing schedule.

OTHER SAVINGS:

The Wellness Incentive — where you go to your doctor and fill out a survey and go for a follow-up visit — is going to increase, i.e., if you signed up for a Wellness, the incentive was \$250 for an individual and \$250 for spouse. Under the new health care plan, the incentive will be \$350 for individual and for spouse. The Union recommends signing up for Wellness to save up to \$750 for healthcare.

TIERED NETWORK — HORIZON OMNIA AND AETNA LIBERTY:

The tiered network plans will have premium shares of 75% of the new NJDIRECT 2019 plan. This means that if all your doctors are Tier 1, you may be able to select the Tiered Network and save 25% more than what the new plan saves.

DIRECT PRIMARY CARE MEDICAL HOME (DPCMH) program:

You can continue in the DPCMH, or you can still sign up for DPCMH and have zero co-pays yet have complete access to the full network at no additional costs.

PPO Plans (PPO eligibility will vary based on labor agreements)

- [NJ DIRECT 15](#)
- [CWA Unity DIRECT](#)
(for employees hired before July 1, 2019)
- [CWA Unity DIRECT 2019](#)
(for employees hired on or after July 1, 2019)
- [NJ DIRECT](#)
(for employees hired before July 1, 2019)
- [NJ DIRECT 2019](#)
(for employees hired on or after July 1, 2019)
- [NJ DIRECT 1525](#)
- [NJ DIRECT 2030](#)
- [NJ DIRECT 2035](#)

HMO Plan

- [Horizon HMO](#)

Tiered Plan

- [OMNIA Health](#)

High Deductible Health Plans

- [NJ DIRECT HD4000](#)
- [NJ DIRECT HD1500](#)