

Christie Administration Extends Open Enrollment Deadline for 2013 Health Plans for State and Local Government Workers Due to Service Disruption From Storm

Thursday, November 1, 2012 Tags: [Hurricane Sandy](#)

Trenton, NJ – The Christie administration has extended the open enrollment deadline for both State and local government participants in the State Health Benefits Program (SHBP) and School Employees' Health Benefits Program (SEHBP) until **November 16, 2012**.

The extension will give the more than 350,000 state, local government and education workers who participate in the two health plans an additional week to review and decide on their coverage choices for 2013. Along with State agencies, more than 1,100 local governments, school districts and other educational employers participate in the two health plans.

The open enrollment period began on Oct. 1, 2012 and was originally scheduled to end on Nov. 9, 2012.

"Participants in the State's health plans have new coverage choices to consider as a result of the pension and benefit reforms that Governor Christie and the Legislature agreed on last year," State Treasurer Andrew Sidamon-Eristoff said. "It is important that they have adequate time to consider their health options and get answers to any questions they may have.

"The disruptions caused by Hurricane Sandy have limited many plan participants' access to websites and telephone services this week. Allowing additional time to complete the enrollment process will help everyone make the best possible choice for their health needs," the Treasurer said.

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 available for online viewing or printing at: 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. 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:

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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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