

**Summary of Major Changes to the Small Employer Health Benefits Program Standard Plans**

Operative Date: October 1, 2004

| Description of Amendment | Reason | Plan A |      | Plans B-E |      | HMO      |     | HMO-POS  |     | Other |
|--------------------------|--------|--------|------|-----------|------|----------|-----|----------|-----|-------|
|                          |        | Policy | Cert | Policy    | Cert | Contract | EOC | Contract | EOC |       |

**CHANGES TO COMPLY WITH LAW**

|  |                        |       |       |                         |                         |                                      |                                      |  |  |                |
|--|------------------------|-------|-------|-------------------------|-------------------------|--------------------------------------|--------------------------------------|--|--|----------------|
| Add coverage for one mammogram per year for females age 40 and over  | P.L. 1999, c. 341      | added | added | added                   | added                   | already covered                      | already covered                      | already covered in network, added to non-network | already covered in network, added to non-network | N/A            |
| Add specific coverage for the treatment of hemophilia  | P.L. 2000, c. 121      | N/A   | N/A   | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Created exception to the exclusion for work related illnesses and injuries for certain employees for whom worker's compensation coverage is optional | P.L. 1999, c. 383      | added | added | added                   | added                   | added                                | added                                | added  | added  | Rx Rider added |
| Provide 60-day notice of a change in rates   | P.L. 2003, c. 27       | added | added | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Provide network payment to network hospital regardless of whether the admitting physician is a network physician                                     | P.L. 2001, c. 367      | N/A   | N/A   | added to POS provisions | added to POS provisions | N/A                                  | N/A                                  | added  | added  | N/A            |
| Amend participation requirements to provide credit for persons covered under another group plan and Medicare   | P.L. 2001, c. 346      | added | N/A   | added                   | N/A                     | added                                | N/A                                  | added  | N/A  | N/A            |
| Add coverage for certain infant formulas   | P.L. 2001, c. 361      | N/A   | N/A   | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Add coverage for colorectal cancer screening; include as a service eligible under the preventive benefit   | P.L. 2001, c. 295      | N/A   | N/A   | added                   | added                   | added service, preventive change N/A | added service, preventive change N/A | added  | added  | N/A            |
| Add coverage for newborn hearing screening   | P.L. 2001, c. 373      | N/A   | N/A   | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Add variable language to address coverage for domestic partners  | P.L. 2003, c. 246      | added | added | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Revise Coordination of Benefits provision  | N.J.A.C. 11:4-28       | added | added | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Revise/add definitions and notice and disclosure provisions consistent with the Health Care Quality Act  | N.J.A.C. 8:38          | added | added | added                   | added                   | added                                | added                                | added  | added  | N/A            |
| Revise penalty for failure to secure pre-approval to be a 50% reduction in benefits  | N.J.A.C. 11:4-42.8(a)3 | added | added | added                   | added                   | N/A                                  | N/A                                  | N/A for network, added to non-network            | N/A for network, added to non-network            | N/A            |



|  |                 |                       |                       |                       |                       |   |   |  |  |                |
|--|-----------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|--|--|----------------|
| At the option of the carrier, preapproval may be required for certain prescription drugs   | Board Initiated | N/A                   | N/A                   | added                 | added                 | added                                   | added                                   | added                                      | added                                      | Rx Rider added |
| Delete \$1,000,000 lifetime maximum in Plan B  | Board Initiated | N/A                   | N/A                   | deleted for Plan B    | deleted for Plan B    | N/A                                     | N/A                                     | N/A  | N/A  | N/A            |
| Replace Coinsurance Cap and Coinsured Charge Limit Provisions with Maximum Out-of-Pocket Provisions  | Board Initiated | replaced              | replaced              | replaced              | replaced              | replaced                                | replaced                                | replaced                                   | replaced                                   | N/A            |
| Add optional deductible and coinsurance provisions to HMO and HMO-POS plans  | Board Initiated | N/A                   | N/A                   | N/A                   | N/A                   | added                                   | added                                   | added                                      | added                                      | N/A            |
| Expand the deductible options to allow amounts from \$250 - \$5,000  | Board Initiated | N/A                   | N/A                   | added                 | added                 | added if using deductible / coinsurance | added if using deductible / coinsurance | added                                      | added                                      | N/A            |
| <b>CHANGES TO BENEFIT SPECIFICATIONS</b>   |                 |                       |                       |                       |                       |   |   |  |  |                |
| Expand the copayment options to include \$40 and \$50  | Board Initiated | added for PPO and POS | added for PPO and POS | added for PPO and POS | added for PPO and POS | added                                   | added                                   | added                                      | added                                      | N/A            |
| Further clarify that the emergency room copayment is in addition to the applicable deductible, coinsurance and copayment.  | Board Initiated | N/A                   | N/A                   | added                 | added                 | added                                   | added                                   | added                                      | added                                      | N/A            |
| At the option of the carrier, the maternity copayment may be \$25 for the initial visit, \$0 copayments thereafter, or the same as the physician visit copayment for the initial visit and \$0 copayment thereafter. | Board Initiated | added for PPO and POS | added for PPO and POS | added for PPO and POS | added for PPO and POS | added                                   | added                                   | added                                      | added                                      | N/A            |
| At the option of the carrier, the emergency room copayment may be \$50, \$75 or \$100  | Board Initiated | N/A                   | N/A                   | added                 | added                 | added                                   | added                                   | added                                      | added                                      | N/A            |
| Add coverage for medically necessary replacements of various covered supplies  | Board Initiated | added                 | added                 | added                 | added                 | added                                   | added                                   | added                                      | added                                      | N/A            |
| Add coverage for certain therapies as might be used to treat a biologically based mental illness   | Board Initiated | N/A                   | N/A                   | added                 | added                 | added                                   | added                                   | added                                      | added                                      | N/A            |
| Replace the 60-day per incident of illness or injury limit for certain therapy services with a 30-visit limit per calendar year  | Board Initiated | N/A                   | N/A                   | N/A                   | N/A                   | replaced                                | replaced                                | replaced                                   | replaced                                   | N/A            |
| Increase the annual preventive care allowance from \$300/\$500 to \$500/\$750  | Board Initiated | N/A                   | N/A                   | increased             | increased             | N/A                                     | N/A                                     | N/A for network, increased for non-network | N/A for network, increased for non-network | N/A            |

