

# SPECIAL OPEN ENROLLMENT

## NJ Educators Health Plan

### Frequently Asked Questions

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The NJ Legislature recently passed NJPL 2020 Chapter 44. This legislation requires that all school districts offer a new medical and prescription plan called the **NJ Educators Health Plan**, effective 1/1/2021. A second plan, also created by this legislation, called the **Garden State Plan**, will be rolled out during the Spring 2021 Open Enrollment period, for an effective date of 7/1/2021. The new legislation applies to all employees that are eligible for benefits through the school district.

#### **New Employees Hired 7/1/2020 or Later**

Per the legislation, anyone hired on 7/1/2020 or later, that does not choose to waive coverage, **will automatically be enrolled** in the NJ Educators Health Plan, effective 1/1/2021. Per the legislation, you may **not** stay in your current plan option with the school district.

#### **Existing Employees Hired Before 7/1/2020**

Employees hired before 7/1/2020 will have the following options-

##### **Option 1 - Stay in your current plan.**

You will need to complete the **Affirmative Election Form** stating you wish to remain in your current plan option. **Please Note! If you do not complete and turn in this form, you will be automatically moved to the NJEHP for 1/1/2021.**

##### **Option 2 – Move to the NJ Educators Health Plan.**

Please complete an enrollment form and elect to move into the NJEHP, effective 1/1/2021.

## **Does my employee contribution change with this new plan?**

The NJEHP option is tied to a new salary based employee contribution schedule. This new contribution schedule applies only to the NJ Educators Health Plan, and only for medical and prescription benefits. It does not apply to any other coverage that may be offered by the school district, such as dental coverage. For other lines of coverage, your employee contribution will remain the same. Please refer to the NJEHP benefit overview for the new contribution schedule.

## **Who will be the carriers for the new plans?**

The medical and prescription carriers will not change. Medical and prescription coverage will remain under the Schools Health Insurance Fund. Aetna will be the medical carrier. Express Scripts will be the prescription carrier.

## **Will the provider networks be different?**

The provider networks will remain the same.

## **Will I receive new ID cards for the NJ Educator's Health Plan?**

You will receive a new medical, which you should begin using on January 1, 2021. Your prescription card will not be changing.

## **Do I have to enroll in both the medical and prescription parts of the NJ Educator's Health Plan?**

The medical and prescription plans are tied together. If you elect the NJEHP for medical coverage, the only prescription plan option is also under the NJEHP. You cannot enroll in the medical coverage only and keep your existing prescription coverage.

## **Will my coverage be the same?**

No. If you enroll in the NJEHP, there will be changes to your current medical and prescription coverages. Please be sure to review the benefit comparison to make sure you understand how your benefits will change. There are also additional features that will apply to the prescription coverage, including Step Therapy, Mandatory Generic, and a Closed Formulary. These features are explained further on the benefit comparison.

## **I was hired before 7/1/2020. If I enroll in the NJEHP for January 1, 2021, and I decide I like my previous plan better, can I go back to my old plan?**

You may elect your prior plan during any open enrollment period. So for example, you may elect to return to your prior plan during the Spring 2021 Open Enrollment period, for an effective date of 7/1/2021. Your employee contributions would also change back to the Chapter 78 schedule and/or the employee contributions outlined in your collective bargaining agreement.

## **Are eye exams covered under the NJEHP?**

Participating Providers - Routine eye exams are covered once per year with a \$15 copay.

Non-Participating Provider – Not covered

## **Does the NJEHP provide vision hardware reimbursement?**

No. There is no hardware reimbursement provided through the NJ Educators Health Plan.

## **Where can I find In-Network providers?**

The medical and prescription carriers will remain the same under the NJEHP. Medical and prescription coverage will remain under the Schools Health Insurance Fund. Aetna will be the medical carrier. Express Scripts will be the prescription carrier.

The NJEHP will have the Aetna Choice POSII Open Access network, which has participating providers throughout the country. To find a participating provider, you would go to the Aetna DocFind. The plan selection would be the Aetna Choice® POS II (Open Access).

## **Do I need a referral to see a specialist?**

No. referrals are not required under the NJ Educators Plan.

## What qualifies as an Urgent Care visit?

An urgent care visit applies when a member seeks services from a participating urgent care center. Urgent care centers are a convenient, cost-effective medical care alternative to emergency rooms. Typically, no appointments are necessary, and the centers can provide appropriate, non-emergency, medical services for ailments such as allergies, asthma, sore throats, infections, and more. A \$15 copay applies for participating urgent care center visits; to find a participating provider please visit [www.aetna.com](http://www.aetna.com).

Emergency Rooms and regular doctor or specialist visits do not qualify as an urgent care visit and will have specific copays associated with their services. Please refer to the NJEHP plan comparison for a breakdown of coverage.

## Will medical necessity still be required for certain services?

Yes, members who need certain services (i.e. chiropractic care, physical therapy, etc.) will be required to provide medical necessity in order for such services to be covered.

Members will also undergo reviews from their participating physician or health care practitioner over time to ensure medical necessity still applies.

## What does medical necessity mean?

Health care services and supplies that we determine a provider exercising prudent clinical judgment, would provide to a patient for the purpose of preventing, evaluating, diagnosing or treating an illness, injury, disease or its symptoms, and that we determine are:

- In accordance with generally accepted standards of medical practice.
- Clinically appropriate, in terms of type, frequency, extent, site and duration, and considered effective for the patient's illness, injury or disease.
- Not primarily for the convenience of the patient, physician, or other health care provider.
- Not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of that patient's illness, injury or disease.
- With respect to substance use disorder, in accordance with an evidence-based and peer reviewed clinical review tool as designated in regulation by the Commissioner of Human Services.

Generally accepted standards of medical practice means:

- Standards that are based on credible scientific evidence published in peer-reviewed medical literature generally recognized by the relevant medical community.
- Otherwise consistent with physician specialty society recommendations the view of physicians or dentists practicing in relevant clinical areas.
- Following the standards set forth in our clinical policies and applying clinical judgment.

With respect to substance use disorder, your provider will determine medical necessity for the first 180 days of treatment.

### **When is the Special Open Enrollment Period?**

The Special Open Enrollment will begin on **Monday, September 28<sup>th</sup>** and ends on **Friday, October 9<sup>th</sup>**. All forms must be turned into the Business Office by no later than Friday, October 9<sup>th</sup>.