

2018 Small Employer Health Plus Plan



A man and a woman are smiling and looking at each other in an office environment. The man is on the right, wearing a light blue button-down shirt, and the woman is on the left, wearing a red and white plaid shirt and glasses. They appear to be in a positive conversation. In the background, there are blurred office elements like computer monitors and a desk.

NEW

Health Plus Plan

Yes, now you can save on Dental, Vision and Life Insurance with Horizon Blue Cross Blue Shield of New Jersey's new Health Plus Plan, a comprehensive, high-quality package all for one competitive rate.

Health Plus Plan Benefits

In addition to health benefits, dental, vision and life coverage can help to attract, protect and retain valued employees.

Horizon Dental

Proper dental care can help with more than clean teeth. It can also help detect serious health risks, like diabetes, heart disease and some cancers. Horizon Dental offers affordable plans to meet your employees' needs and includes:

- ▶ One of the largest dental networks in New Jersey, with more than 7,200 offices to access care
- ▶ Access to some of the deepest discounts in the state, which extend beyond plan maximums
- ▶ Little-to-no out-of-pocket expenses for preventive services

Horizon Vision

Protect your health and dollars with regular eye exams that can detect potential health issues, such as hypertension and diabetes. We can help your employees save on vision exams, eyeglasses and more. Horizon Vision plans offer:

- ▶ Low-cost annual eye exam, including dilation
- ▶ Coverage for eyeglasses and contact lenses
- ▶ Access to a nationwide network through the Horizon/Davis Vision View Network with over 60,000 independent providers and retailers

Life and Accidental Death & Dismemberment

USAble Life's Small Group Plans for Life and Accidental Death & Dismemberment offer employers with two to 50 employees the ability to provide your employees a quality benefits package and maintain your bottom line.

Plan Benefits - Low Option

Horizon Dental Benefits

Benefit	Low Option	
	Under 19	Age 19 & Over
Plan	Horizon Family Grins	
Coinsurance	100/80/50%	100%/Discount /Discount
Annual Maximum	None	None
MOOP	\$350/\$700	None
Deductible		
Single	\$25 Preventive	None
Family	\$100/\$200 Class II & III	None
Preventive & Diagnostic	100%	100%
Minor Restorative	80%	100%
Endodontics/Periodontics/Oral Surgery	80%	Discount
Major Care	50%	Discount
Orthodontia (medically necessary)	50% MOOP applies	N/A
Orthodontia (cosmetic)	50%	25% discount
Lifetime Maximum	\$1,000	N/A
Waiting Periods	None	None
ACA Compliant	Yes	Yes

Horizon Vision Benefits

Benefit	Low Option
Plan	Vista II
Eye Exam (every year)	\$10 copay
Spectacle Lens (every year)	\$25 copay
Eyeglass Frame (every other year)	\$100 allowance or \$150 at Visionworks
Contact lens in lieu of eyeglasses (every year)	\$100 allowance

USAbile Life Insurance

Benefit	Small Group Plan
Work Requirement	Active full-time employees working 25 hours or more per week
Employee Life and AD&D Benefit	\$25,000
Dependent Life Benefits	
Eligible Spouse	\$5,000
Eligible Child(ren) to age 26	\$2,000*

*\$100 from 14 days to 6 months.

Benefits for employees reduce to 65% at age 65 and reduce to 50% of the pre-age 65 amount at age 70. All amounts of coverage are issued on a guaranteed basis.

Plan Rates

Enrolled Group Size	Plan	Single	Two Adults	Parent & Child	Family
2-4	Low Option	\$ 26.60	\$ 44.71	\$ 67.81	\$94.33
5-9	Low Option	\$ 24.20	\$ 37.81	\$ 52.98	\$76.20
10-24	Low Option	\$ 22.30	\$ 34.34	\$ 47.29	\$67.39
25-49	Low Option	\$ 20.99	\$ 31.94	\$ 38.38	\$53.60

Rates are guaranteed for 2 years from the initial effective date of the policy.

Plan Benefits - High Option

Horizon Dental Benefits

Benefit	High Option	
	Under 19	Age 19 & Over
Plan	Horizon Family Grins Plus	
Coinsurance	100/80/50%	100/80/50%
Annual Maximum	None	\$1,000
MOOP	\$350/\$700	None
Deductible		
Single	\$25 Preventive	\$50
Family	\$100/\$200 Class II & III	\$150
Preventive & Diagnostic	100%	100%
Minor Restorative	80%	80%
Endodontics/Periodontics/Oral Surgery	80%	80%
Major Care	50%	50%
Orthodontia (Medically Necessary)	50% MOOP applies	N/A
Orthodontia (cosmetic)	50%	N/A
Lifetime Maximum	\$1,000	N/A
Waiting Periods	None	None
ACA Compliant	Yes	Yes

Horizon Vision Benefits

Benefit	High Option
Plan	Panorama IVB
Eye Exam (every year)	\$10 copay
Spectacle Lens (every year)	\$25 copay
Eyeglass Frame (every other year)	\$130 allowance or \$180 at Visionworks
Contact lens in lieu of eyeglasses (every year)	\$130 allowance

USAbile Life Insurance

Benefit	Small Group Plan
Work Requirement	Active full-time employees working 25 hours or more per week
Employee Life and AD&D Benefit	\$25,000
Dependent Life Benefits	
Eligible Spouse	\$5,000
Eligible Child(ren) to age 26	\$2,000*

*\$100 from 14 days to 6 months.

Benefits for employees reduce to 65% at age 65 and reduce to 50% of the pre-age 65 amount at age 70. All amounts of coverage are issued on a guaranteed basis.

Plan Rates

Enrolled Group Size	Plan	Single	Two Adults	Parent & Child	Family
2-4	High Option	\$ 51.36	\$ 94.23	\$ 100.07	\$ 152.24
5-9	High Option	\$ 46.09	\$ 77.91	\$ 77.99	\$ 124.91
10-24	High Option	\$ 41.97	\$ 70.38	\$ 69.49	\$ 111.15
25-49	High Option	\$ 39.36	\$ 65.61	\$ 57.25	\$ 92.46

Rates are guaranteed for 2 years from the initial effective date of the policy.



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*USable Life is an independent company that operates separately from Horizon BCBSNJ. USable Life does not sell or service Horizon BCBSNJ products and is solely responsible for the life, disability and accident products referenced herein.

Horizon Blue Cross Blue Shield of New Jersey is an independent licensee of the Blue Cross and Blue Shield Association. The Blue Cross® and Blue Shield® names and symbols are registered marks of the Blue Cross and Blue Shield Association. The Horizon® name and symbols are registered marks of Horizon Blue Cross Blue Shield of New Jersey.

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations. Spanish (Español): Para ayuda en español, llame al 1-866-660-6528. Chinese (中文): 如需中文協助, 請致電 1-866-660-6528.

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Horizon Blue Cross Blue Shield of New Jersey

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Notice of Nondiscrimination

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate against nor does it exclude people or treat them differently on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

Horizon BCBSNJ provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and information written in other languages.

Contacting Member Services

Please call Member Services at **1-800-355-BLUE (2583) (TTY/TDD 711) or the phone number on the back of your member ID card**, if you need the free aids and services noted above and for **all other Member Services issues, including:**

- **Claim, benefits or enrollment inquiries**
- **Lost/stolen ID cards**
- **Address changes**
- **Any other inquiry related to your benefits or health plan**

Filing a Section 1557 Grievance

If you believe that Horizon BCBSNJ has failed to provide the free communication aids and services or discriminated on the basis of race, color, gender, national origin, age or disability you can file a discrimination complaint also known as a Section 1557 Grievance. Horizon BCBSNJ's Civil Rights Coordinator can be reached by calling the Member Services number on the back of your member ID card or by writing to the following address:

**Horizon BCBSNJ – Civil Rights Coordinator
PO Box 820
Newark, NJ 07101**

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

**Office for Civil Rights Headquarters
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019 or 1-800-537-7697 (TDD)**

OCR Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.



Horizon Blue Cross Blue Shield of New Jersey

If you need help understanding this Horizon Blue Cross Blue Shield of New Jersey information, you have the right to get help in your language at no cost to you. To talk to an interpreter, please call **1-866-660-6528** during normal business hours.

Spanish (Español): Si necesita ayuda para comprender esta información de Horizon Blue Cross Blue Shield of New Jersey, usted tiene el derecho de obtener ayuda en su idioma sin costo alguno. Para hablar con un intérprete, sírvase llamar al **1-866-660-6528** durante el horario normal de trabajo.

Chinese (中文): 如果您需要幫助來理解這份新澤西州地平線藍十字藍盾 (Horizon Blue Cross Blue Shield of New Jersey) 資料，您有權免費獲得以您的語言提供的協助。欲聯絡翻譯人員，請於上班時間致電 **1-866-660-6528**。

Korean (한국어): 가입자는 Horizon Blue Cross Blue Shield of New Jersey에 관한 정보를 이해하기 위해 주로 사용하는 언어로 무료로 도움을 받을 권리가 있습니다. 통역사의 도움을 받으려면 정상 업무 시간 동안에 **1-866-660-6528**로 전화해 주십시오.

Portuguese (Português): Se precisar de ajuda para entender estas informações da Horizon Blue Cross Blue Shield of New Jersey, você tem o direito de receber gratuitamente assistência no seu idioma. Para falar com um intérprete, ligue para: **1-866-660-6528** no horário normal de trabalho.

Gujarati (ગુજરાતી): જો તમને આ ન્યુ જર્સી માહિતીનાં હોરાઈઝન્સ બ્લૂ ક્રોસ બ્લૂ શીલ્ડને સમજવા મદદની જરૂર હોય તો, તમને તમારી ભાષામાં કોઈ પણ ખર્ચ વગર મદદ મેળવવાનો અધિકાર છે. કોઈ દુભાષિયા સાથે વાત કરવા, કૃપા કરીને સામાન્ય બિઝનેસ ક્લાકો દરમિયાન **1-866-660-6528** પર ફોન કરો.

Polish (Polski): Jeżeli potrzebujesz pomocy, aby zrozumieć informacje planu Horizon Blue Cross Blue Shield of New Jersey, masz prawo poprosić o bezpłatną pomoc w języku ojczystym. Aby skorzystać z pomocy tłumacza, zadzwoń pod numer **1-866-660-6528** podczas normalnych godzin pracy.

Italian (Italiano): Se vi serve aiuto per capire queste informazioni della Horizon Blue Cross Blue Shield of New Jersey, avete diritto ad assistenza gratis nella vostra lingua. Per parlare con un interprete, siete pregati di telefonare al numero **1-866-660-6528** durante le normali ore d'ufficio.

Tagalog (Tagalog): Kung kailangan mo ng tulong sa pag-unawa nitong impormasyon ng Horizon Blue Cross Blue Shield of New Jersey, may karapatan kang humingi ng tulong sa iyong wika nang walang gastos sa iyo. Upang makipag-usap sa isang taga-interpret, mangyaring tumawag sa **1-866-660-6528** sa loob ng karaniwang mga oras ng negosyo.

Russian (Русский язык): Если вам необходима помощь в разъяснении этой информации, предоставленной компанией Horizon Blue Cross Blue Shield of New Jersey, у вас есть право на получение помощи на вашем родном языке бесплатно. Для связи с переводчиком звоните по номеру телефона **1-866-660-6528** в обычные рабочие часы.

Haitian Creole (Kreyòl ayisyen): Si ou bezwen èd pou konprann enfòmasyon sou Horizon Blue Cross Blue Shield of New Jersey, ou gen dwa pou jwenn èd nan lang natifnatal ou gratis. Pou pale avèk yon entèprèt, tanpri rele nimewo **1-866-660-6528** pandan lè nòmal biznis.

Hindi (हिंदी): यदि आपको न्यू जर्सी की इस होराइजन ब्लू क्रॉस ब्लू शील्ड सूचना को समझने में सहायता की जरूरत है, तो आपके पास मुफ्त में अपनी भाषा में सहायता पाने का अधिकार है। किसी दुभाषिण से बात करने के लिए, कृपया सामान्य कार्य समय के दौरान **1-866-660-6528** पर कॉल करें।

Vietnamese (Tiếng Việt): Nếu cần được giúp đỡ để hiểu rõ thông tin này của Horizon Blue Cross Blue Shield of New Jersey, quý vị có quyền được giúp đỡ bằng ngôn ngữ của mình miễn phí. Xin gọi số **1-866-660-6528** trong giờ làm việc để nói chuyện với người thông dịch.

French (Français): Si vous avez besoin d'assistance pour comprendre ces informations au sujet de Horizon Blue Cross Blue Shield of New Jersey, vous avez le droit d'obtenir de l'aide dans votre langue, sans aucun frais. Pour parler avec un interprète, veuillez appeler le **1-866-660-6528** pendant les heures normales de bureau.

Navajo (Diné): Díí New Jersey bíł hahoodzo Horizon Blue Cross Blue Shield, t'áá ninizaad k'ehjí baa hane'íí bik'i diitííh bee shiká' a'doowoł nínízingo éí bee ná'ahoot'i' dóo doo bááqá ílíní da. Ata' halne'é ła' bich'i' hadeesdzih nínízingo t'áá shqoqdí **1-866-660-6528**ji' nida'anishgo oolkiíí bik'ehgo hodíílnih.

Arabic (عربي): إذا كنت بحاجة إلى المساعدة في فهم معلومات Horizon Blue Cross Blue Shield of New Jersey لديك الحق في الحصول على المساعدة بلغتك دون تحميلك أية تكلفة. للتكلم مع مترجم، يرجى الاتصال خلال ساعات العمل العادية بالرقم **1-866-660-6528**.

Urdu (اردو): اگر آپ کو نیوجرسی انفارمیشن کے اس آسمانی نیلے رنگ والے تیز نیلے رنگ والے شیلڈ کو سمجھنے میں مدد کی ضرورت ہے تو، آپ کو اپنی زبان میں بغیر کسی خرچ کے مدد حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، براہ کرم، معمول کے کاروباری اوقات میں **1-866-660-6528** پر کال کریں۔