



Horizon Blue Gross Blue Shield of New Jersey

Making Healthcare Work.





| Benefit   | In-Network  | Out of Network   |  |
|---|---|--|--|
| Plan Year   | October 1 through September 30  |  |  |
| Plan Year Deductible  |   |  |  |
| Individual  | None  | \$400  |  |
| Family  | None  | \$800  |  |
| Coinsurance   | 100%  | 70%  |  |
| Maximum Out of Pocket   |   |  |  |
| Individual  | Not Applicable  | \$2,500  |  |
| Family  | Not Applicable  | \$5,000  |  |
| Maximum Out of Pocket is based on the plan year. The deductible plus coinsurance apply to the Maximum Out of Pocket.  Balances from non-participating providers over reasonable and customary do not apply towards the Maximum Out of Pocket. |   |  |  |
| Lifetime Maximum  | \$2,000,000   | \$1,000,000  |  |
| Precertification Penalty  | \$21  |  |  |
|   | Required  |  |  |
| Primary Care Physician Selection  | (A PCP selection is required to direct and manage your care)                            | n/a  |  |
| Primary and Preventative Care   |   |  |  |
| Primary Care Office Visits  After Hours/Home Visits/Emergency Visits  | 100% after \$10 copay   | 70% after deductible   |  |
| Routine Examinations  | 100% after \$10 copay   | 70% after deductible   |  |
| Routine Child and Well-Baby Care  | 100% after \$10 copay   | Not covered  |  |
| Immunizations   | 100% after \$10 copay<br>100% after \$10 copay  | Not covered Not covered  |  |
|   | 100% after \$10 copay   | Not covered  |  |
| Routine Gynecological Exams   | (one routine exam and pap smear per plan year)  | Not covered  |  |
| Routine Mammograms  | 100% (1 per plan year for women age 40 and over)  | Not covered  |  |
| Prostate Screening  | 100% after \$10 copay (1 prostate screening per plan year for men age 40 and over)      | Not covered  |  |
| Routine Eye Exam  | 100% after \$10 copay   | Not covered  |  |
| Eyeglasses/Contact Lenses   | \$35 per 24-month period with discounts through Davis Vision vendors                    | Not covered  |  |
| Routine Hearing Screening   | Covered when performed as part of a routine exam by PCP (subject to office visit copay) | Not covered  |  |
| Hearing Aids  | Not covered   | Not covered  |  |
| Specialty and Outpatient Care   |   |  |  |
| Specialist Office Visits  | 100% after \$10 copay   | 70% after deductible   |  |
| Prenatal Care   | \$10 copay for the first OB visit   | 70% after deductible   |  |
| Infertility   | 100% after \$10 copay   | 70% after deductible (Covered limited to diagnosis and treatment of the underlying cause of infertility) |  |
| Allergy Testing   | 100% after \$10 copay   | 70% after deductible   |  |
| Allergy Treatment   | 100% after \$10 copay   | 70% after deductible   |  |
| X-rays and Lab Tests  | 100% after \$10 copay   | 70% after deductible   |  |
| Therapy   | 100% after \$10 copay   | 70% after deductible   |  |
| (speech, occupational, physical)  | Combined maximum of 60 vis  | its per plan year per condition  |  |
| Chiropractic Care   | 100% after \$10 copay 20 visit maximu   | 70% after deductible<br>m per plan year  |  |
| Acupuncture   | Not covered 70% after deductible 20 visits per plan year                                |  |  |
| Home Health Care  | 100%  | 70% after deductible<br>(one visit per day, up to 4 hours per visit,<br>up to 120 visits per plan year)  |  |
| Hospice Care (outpatient)   | 100%  | 70% after deductible   |  |
| Durable Medical Equipment   | 100%<br>(requires preapproval)  | 70% after deductible   |  |
| Prosthetic Devices  | 100%<br>(requires preapproval)  | 70% after deductible (initial fitting purchase & replacement due to anatomical change)                   |  |





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County of Monmouth

Horizon BCBSNJ

Direct Access POS Plan



| Benefit   | In-Network  | Out of Network   |
|---|---|--|
| Inpatient Services                                      |   |  |
| Hospital Room and Board and<br>Other Inpatient Services | 100%  | 70% after deductible                                     |
| Skilled Nursing Facility                                | 100%  | 70% after deductible<br>Limited to 60 days per plan year |
| Hospice Facility (inpatient)                            | 100%  | 70% after deductible                                     |
| Organ/Bone Marrow Transplant                            | 100%  | Not covered  |
| Surgery and Anesthesia                                  |   |  |
| Inpatient Surgery                                       | 100%  | 70% after deductible                                     |
| Outpatient Surgery (SurgiCenter)                        | No Copay-outpatient facility \$10 copay-specialist's office   | 70% after deductible                                     |
| Mental and Nervous Conditions                           |   |  |
| Inpatient Treatment                                     | 100%  | 70% after deductible<br>or plan year                     |
| Outpatient Treatment                                    | 100% after \$25 copayment   | 50% after deductible er plan year                        |
| Inpatient Mental Health/Substan                         | ce Abuse Services must be coordinated through Magellan Behavioral Health at 1-800-626-2212.   |  |
| Partial Hospitalization                                 | 1 day of inpatient care may be exchanged for 2 partial hospitalization sessions in lieu of hospitalization.   |  |
| Inpatient Benefit Exchange                              | 1 day of inpatient treatment may be substituted for 4 outpatient visits.  (up to a maximum of 10 inpatient days/40 outpatient visits)   |  |
| Treatment of Alcohol and Drug Abuse                     |   |  |
| Inpatient Detoxification                                | 100%<br>up to 7 days must be 120  | 70% after deductible days between admissions             |
| Inpatient Rehabilitation                                | 100% 70% after deductible<br>30 days per plan year  |  |
| Outpatient Detoxification                               | 100% after \$10 copay   | 50% after deductible                                     |
| Outpatient Rehabilitation                               | 100% after \$10 copay<br>60 visits pe   | 50% after deductible                                     |
| Emergency Care/Urgent Care                              |   |  |
| Emergency Room  | 100% after \$25 facility copayment (waived if admitted)   |  |
| Non-Emergency Use of the Emergency Room                 | Not Covered   | 70% after deductible                                     |
| Ambulance   | 100% if medically necessary   |  |
| Additional Information                                  |   |  |
| Prescription Drugs                                      | Covered under your existing prescription program.   |  |
| Prior Authorization                                     | Some services/procedures require prior authorization. For a complete list, contact our customer service number at 1-800-355-BLUE (2583) or refer to our website at www.HorizonBlue.com.   |  |
| Nurse Line<br>Toll-Free 1-888-624-3096                  | A health information service that includes a toll free 24 hour health information line staffed by registered nurses. Nurses do not diagnose or recommend any treatment. Instead, they provide the member with the necessary health information needed to make informed medical decisions. This helps members determine if their health ailment requires a doctor's visit. |  |

You can save money when you choose to receive care from providers that participate in the Horizon BCBSNJ networks. When you use participating hospitals or other medical facilities or doctors, you only pay your copayment and any applicable in-network coinsurance or deductible. If you have services performed at an out of network facility or by an out of network provider, your out of network benefits will apply. This means that you will be responsible for amounts exceeding the reasonable and customary reimbursement for that particular service and this may result in significant out of pocket costs. You will be responsible to pay for this amount directly to the non-participating hospital, ambulatory surgery center or provider. By using our Horizon-BCBSNJ network providers, you keep your health care costs down.

This summary highlights the major features of your health benefit program. It is not a contract and some limitations and exclusions may apply. Payment of benefits is subject solely to the terms of the contract.

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Welcome to Member Online Services.

# WHAT CAN www.HorizonBlue.com DO FOR YOU?

Horizon Blue Cross Blue Shield of New Jersey offers you an easy, secure and quick way to keep track of your health plan and benefits information online through Member Online Services at <www.HorizonBlue.com>.

With Member Online Services, you can:

- . Check the status of your claims.
- View and print a statement of payment of your claims.
- · View referrals and authorizations.
- · View and print referral confirmations.
- · View current eligibility and benefits.
- · Request an ID card.
- · Print a Coverage Letter.
- Provide information on any other coverage you may have.
- · Change your Primary Care Physician, if required, or your dentist.
- View premium billing information and make premium payments online (if/applicable).

When using or registering for Member Online Services , please keep the following in mind:

- You must have an e-mail address to register for Member Online Services.
- Member Online Services is available Monday through Friday, 8 a.m. to 10 p.m., Eastern Time (ET) and Saturday, 8 a.m. to 4 p.m., ET.
- The operating system that works with Member Online Services is Windows 98 or higher. The program does not currently operate on Macs.
- When accessing Member Online Services, you must use Internet Explorer 5.5 to 7.0. Other Internet browsers such as Firefox or Safari (Mac browser) are not currently supported.

If you have trouble accessing Horizon BCBSNJ's Member Online Services, please e-mail **Member\_Portal@HorizonBlue.com** or call **1-888-777-5075**. Currently, representatives are available Monday through Friday, 7 a.m. to 6 p.m., ET (except holidays).





Horizon Blue Cross Blue Shield of New Jersey

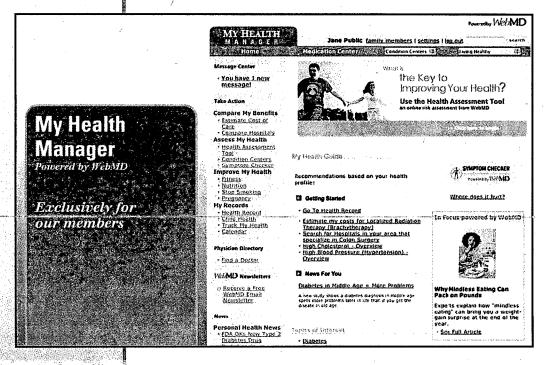
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As a Horizon BCBSNJ member, you also have access to a suite of additional online tools through *My Health Manager*. With *My Health Manager*, powered by *Web*MD®, you can use of a variety of tools (listed below) specifically tailored for your health:

- Hospital Advisor Compares hospitals side-by-side based on quality and cost for a specific diagnosis or procedure.
- Fitness Helps you build a 13-week personalized fitness program, track your fitness activities, obtain suggestions on nutrition, articles on fitness and much more.
- Personal Health Record Stores and organizes your health records confidentially.
- Health Assessment Tool Allows you to gauge your potential health risks by answering a comprehensive self-assessment. Receive a report based on the information you provide to help you determine your current health status and learn about your risks for various conditions.
- Symptom Checker Enables you to evaluate various health symptoms by responding to a quick series of questions.
- My Health Guide Read news, take health-related quizzes and manage your health using resources tailored to your health profile and interests.

To access *My Health Manager*, you must be registered on Member Online Services. Registering for Member Online Services is quick and easy. Simply visit our Web site, **www.HorizonBlue.com** to register.

Member Online Services is another way we are *Making Healthcare Work* for you.





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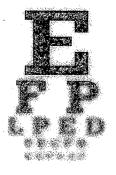
Horizon Blue Cross Blue Shield of New Jersey

## HORIZON WELLNESS DISCOUNTS

As a Horizon Blue Cross Blue Shield of New Jersey member, you're eligible for discounts on health-related products and services. Horizon BCBSNJ has established relationships with a variety of businesses to provide discounts and savings on popular products and services that you and your family can use. To use Horizon Wellness Discounts, present your Horizon BCBSNJ ID card at the select businesses. Or mention that you are a Horizon BCBSNJ member when calling each business.

Here are some services available through Horizon BCBSNJ's discount programs:

Vision Care - Discounts on eye examinations, lenses, eyeglass frames and laser vision correction services through:



### SmartEyes<sup>SM</sup>

EyeMed Vision Care offers savings on eyeglasses, accessories and examinations through the SmartEyes discount program. Locations include Sears Optical, JCPenney Optical, Target Optical and Pearle Vision\*, as well as independent optometrist and ophthalmologist offices. Call 1-866-223-2023 or visit www.HorizonBlue.com/Discounts for the nearest location (use plan number 9238163).

### Complete Advantage®"

Receive discounts on eyeglasses, laser vision correction services (LASIK), accessories and examinations with the **Complete Advantage Program** through Davis Vision. To speak with a Davis Vision Member Services Representative or use the Interactive Voice Response System, call 1-877-518-8748 (use access code 2535) or visit <www.HorizonBlue.com/Discounts>.

### **TruVision**

TruVision's network of highly-trained optometrists, ophthalmologists and surgeons are committed to providing you with high-quality care. The TruVision program offers a complimentary consultation to determine candidacy for LASIK. TruVision also offers savings on contact lenses. Save 15 percent on your entire first order and get free standard shipping on any order of \$99 or more. To learn more, call TruVision at 1-866-483-2020 or visit <www.HorizonBlue.com/Discounts>.

Child Safety Products — Choose from the largest selection of babyproofing products from Safe Beginnings, plus home safety basics and specialty baby and toddler items. As a Horizon BCBSNJ member, you save 15 percent every time you order. For more information, call 1-800-598-8911 or visit www.HorizonBlue.com/Discounts (use member code HBC, under Group #).

Weight Management - Price reductions on weight management programs from:

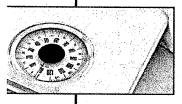
### Weight Watchers®"

Save on online access to personalized tools, information and resources, including weight tracker, meal planner and recipes. For information, call 1-800-710-4663 or visit <www.HorizonBlue.com/Discounts>.

### Jenny Craig®

Receive a Free 30-Day Program, 50 percent off the Six-Month Program and 20 percent off the One-Year Premium Success Program (plus the cost of food and shipping, when applicable).

Call 1-800-96-JENNY or visit <www.HorizonBlue.com/Discounts>.



### NutriSystem®""

You're eligible for a special low price on the NutriSystem weight loss program through GlobalFit, our healthy living benefits provider. You will also get unlimited counseling and support from nutrition and weight loss experts, on the phone or online, at no extra charge. Call GlobalFit at 1-800-294-1500 or visit <www.HorizonBlue.com/Discounts>.

(Over, please)





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\*Pearle Vision, Inc. does not employ Doctors of Optometry and does not provide eye exams in California.

Pearle VisionCare, Inc., a licensed vision health care service plan, provides eye exams in California.

Products and services offered as Horizon Wellness Discounts are not covered health benefits.

Programs may be terminated, and pricing, discount rates and other program features may be modified at any time.

Suppliers that participate in these programs are solely responsible for the quality of the goods and services they provide.

Discounts cannot be combined with benefits, unless otherwise noted. Programs are subject to change.

Services and products provided by Horizon Blue Cross Blue Shield of New Jersey and Horizon Healthcare Dental, Inc., independent licensees of the Blue Cross and Blue Shield Association.

## Healthyroads™ Coaching Program for Weight Management

You will receive a discount on the telephone-based Weight Management Program offered through ChooseHealthy™. With Healthyroads, you will have your own health coach who provides phone-based education, support and motivation as you work towards your goals. For information, call 1-877-335-2746 or visit <www.HorizonBlue.com/Discounts>.

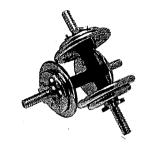
Gym Memberships - Discounts on gym memberships through:

### WellQuest Fitness Network

Access to an extensive network of more than 8,000 high-quality fitness centers. Call 1-800-595-8448 for more information or visit <www.HorizonBlue.com/Discounts>.

### **YMCAs**

Horizon BCBSNJ members can take advantage of the Gateway Family Membership Program for a free, one-month membership at participating YMCAs throughout New Jersey. For further program details and YMCA locations, visit <www.HorizonBlue.com/Discounts>.



### GlobalFit

Allows you to enjoy access to nearly 10,000 top fitness clubs nationwide with flexible membership options. To find the most convenient club or get more information, call 1-800-294-1500 or visit <www.HorizonBlue.com/Discounts>.

### **JCCs**

Provides health and fitness programs for people of all ages and backgrounds. Horizon BCBSNJ members can enjoy a discounted membership and/or services at 14 JCCs across New Jersey. For locations, visit <www.HorizonBlue.com/Discounts>.

### **New York Sports Clubs**

New York Sports Clubs features more than 95 convenient locations in the tri-state area. You pay a reduced initiation fee of \$49. In addition, you'll receive a complimentary meeting with a personal trainer. For more information, call 1-212-246-6700 or visit <a href="https://www.HorizonBlue.com/Discounts">www.HorizonBlue.com/Discounts</a>>.

- Hearing Care Savings on modern hearing technology and hearing evaluations through HearUSA, the nation's leading audiology network. Save 10 percent on hearing aid purchases at any HearUSA or HEARx locations, in addition to any promotional offers that apply. For more information, call 1-800-999-1458 or visit <www.HorizonBlue.com/Discounts>.
- Cord Blood Storage Savings on umbilical cord blood preservation with ViaCord, the Cord Blood Experts™.

  For more information or to join, call ViaCord at 1-866-835-0967 or visit <www.HorizonBlue.com/Discounts>.
- MedicAlert® (24-Hour Emergency Response Service) Savings on a simple, effective method for communicating medical conditions, combined with 24-hour emergency hotline service, recommended by more than 100,000 medical professionals. For more information, call MedicAlert at 1-800-963-3420 (mention code 9813) or visit <www.HorizonBlue.com/Discounts>.
  - Health Improvement Programs ChooseHealthy is Horizon BCBSNJ's online resource offering programs at a discounted rate to help you live a healthier life. You receive discounts on vitamins and supplements, homeopathic remedies, diet and sports nutrition products, personal body care products, audio/video products and books, smoking cessation and stress reduction programs. For more information, call American Specialty Health (ASH), the administrator of the ChooseHealthy Program, at 1-877-335-2746 or visit <a href="https://www.HorizonBlue.com/Discounts">www.HorizonBlue.com/Discounts</a>.
  - Complementary and Alternative Therapies American Specialty Health Networks offer you a 25 percent discount on regular service fees for chiropractic care, acupuncture, massage therapy and dietetic counseling. Call ASH at 1-877-335-2746 to locate a complementary health care provider in your area or visit www.HorizonBlue.com/Discounts for more information.

For more information on these discounts, visit <www.HorizonBlue.com/Discounts>.



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