

The State Health Benefits Program (SHBP) Open Enrollment

Dear Faculty and Staff,

Open enrollment period for state monthly employees begins October 1, 2021 and ends on October 31, 2021

If you do not wish to make any changes to your health or dental benefits, there is no action required. You do not have to log into Benefitsolver. *If you have questions or need to make any changes, contact Human Resources at 201-200-2335.

Open enrollment allows employees to make general changes such as: adding or deleting dependents, change medical or dental plans.

The State of New Jersey requires the following documents when:

- Adding a spouse: Marriage certificate, latest filed 2020 Tax 1040 Form, Social Security Number or Individual Taxpayer Identification number (ITIN), Health Benefits Application
- Adding a Child: Birth certificate, latest filed 2020-1040 Tax Form, Social Security Number or Individual Taxpayer Identification Number (ITIN). <u>Health Benefits Application</u>
- Removing a dependent: No document is needed, just the Health Benefits Application

Medical plans offered: Open Enrollment

PPO: NJ Direct / NJ Direct 2019 (MGR / AFT / IPFTE)

CWA Unity Direct / CWA Unity Direct 2019 (CWA)

HMO: Horizon HMO

Tiered Network: OMNIA Health Plan

High Deductible Plans: NJ Direct HD 4000 / NJ Direct HD 1500

OMNIA Tiered Plan Incentive:

The State of New Jersey is once again offering a financial incentive of \$1000 to first-time enrollees into the OMINIA Plan, who remain enrolled for one full year. The incentive is reportable for income tax purposes, and is paid by gift card no later than the end of the current tax year. The incentive shall be forfeited and returned to the SHBP if you fail to remain in the OMNIA tiered network plan for at least one year, (for example, if you resigned your employment in 2022.)

Level of Coverage:

Members will no longer be able to select different levels of medical and prescription plan coverage. **For example:** Employee chooses family coverage for medical then prescription will be family coverage.



Dental Plan Information:

There are two types of <u>Dental</u> plans offered. The most popular choice among employees is the Aetna Dental Expense Plan, the only dental PPO offered in the SHBP. The Aetna Dental Expense Plan is the only option that offers both in-and-out of network coverage. The remaining dental plans are all referred to as Dental Plan Organizations (DPO's); these are managed care dental plans, with a limited network of providers.

Dental list: Dental Expense Plan (PPO), Horizon Dental Choice (DPO), Aetna DPO (DPO), Metlife (DPO), Cigna Dental Health (DPO), Healthplex (DPO).

Flexible Spending Accounts – Administered by Horizon

A Flexible Spending Account (FSA) is an account you set up for your anticipated eligible medical services, medical supplies and dependent care expenses not normally covered by your insurance. You can choose either Unreimbursed Medical FSA and a Dependent Care FSA, or both. (If eligible).

- Use –It-or-Lose-It Rule: Be conservative in estimating your annual contribution since any money remaining in your accounts cannot be returned to you or carried forward to the next plan year.
 This is based on the Use-It-or-Lose-it Rule for Section 125 cafeteria plans, including Flexible Spending Accounts.
- Flexible Spending Accounts: cannot be canceled during the year and funds cannot be reimbursed.

To Apply for FSA

FSA Application 2022

FSA 2022 Essential Guide / FSA Quick Reference Guide

To apply, the employee must submit application to Horizon via email (HorizoMyWay.Documents@HelloFurther.com), fax (866-231-0214), mail to the carrier, apply via the Horizon Blue Mobile App or HorizonBlue.com/enrollfsa.

Please visit the Office of Human Resources, Hepburn Hall 105 for detailed information about Open Enrollment. You can also contact the Human Resources main-line at 201-200-2335.