Garden State Health Plan Effective July 1, 2022

Frequently Asked Questions



Insurance Risk Management Consulting

1. What is Chapter 44?

On July 1, 2020, Governor Phil Murphy signed P.L. Chapter 44 (S2273/A20), which will reduce the health care contributions for certain school employees who elect the newly created New Jersey Educators Health Plan (NJEHP) or Garden State Health Plan (GSHP). The New Jersey Educators Health Plan became effective as of January 1, 2021 and the Garden State Health Plan will be effective as of July 1, 2022.

2. What is the Garden State Health Plan?

The Garden State Health Plan (GSHP) is the second plan included in Chapter 44 legislation, specifically designed to offer benefits from New Jersey providers only.

3. How does the Garden State Health Plan work?

Chapter 44 requires that the Plan Design of the GSHP be the same as the Plan Design for the NJEHP, but without access to out-of-state services.

- **4.** Why is the employee contribution for the GSHP one-half (50%) of the NJEHP employee contribution? Chapter 44 states that the contribution of the GSHP will be 50% of the NJEHP (or a minimum of 1.5% of salary).
- 5. Are out-of-state providers covered under this plan?

No, out-of-state providers are not covered under this plan.

With the GSHP, you will have access to In-Network and Out-of-Network benefits from New Jersey based providers only. If you utilize a provider outside of the state of New Jersey under any circumstance, you will be responsible for 100% of the charges affiliated with services rendered.

6. What is the major difference between the NJEHP & GSHP?

The GSHP only provides coverage for In and Out-of-Network services in the state of New Jersey. In addition to NJ based providers only, the network of providers associated with the GSHP is significantly smaller than the network of provider available for the NJEHP. Due to this smaller network of providers, the employee contributions for the GSHP are half of the contributions affiliated with the NJEHP.

*Please refer to your Human Resources department for further information on how to locate a provider in the GSHP network.

7. What are the out-of-network reimbursements for the Garden State Health Plan?

Chapter 44 calls for a new out-of-network reimbursement structure which enforces reimbursement maximums on particular services as well as a general 200% of Centers for Medicare & Medicaid Services (CMS) reimbursement schedule.

If you utilize an out-of-network NJ based provider for physical therapy, acupuncture or chiropractic services, you must meet your annual deductible. Then you will pay the coinsurance amount for your plan, plus any amount exceeding the out-of-network limits shown below:

- ✓ Chiropractic Services: \$35 per visit
- ✓ Physical Therapy: \$52 per visit
- \checkmark Acupuncture for Pain Management: \$60 per visit

 $*Please \ note there \ is \ a \ 30-visit \ maximum \ per \ calendar \ year for \ both \ In-Network \ \& \ Out-of-Network \ Chiropractic \ Services$

8. What Drug Formulary is used for the GSHP?

The drug formulary for the GSHP is the same exact mandatory generic formulary utilized for the NJEHP.

9. Is the out-of-pocket maximum for the medical plan separate from the prescription drug out-of-pocket maximum?

Yes. The out-of-pocket costs for the medical plan and the prescription plan are separate.

10. Can the difference paid between generic and non-preferred brand prescription drugs be applied to the out-of-pocket maximum?

No. Any difference paid between generic and non-preferred brand prescription drugs are not to be applied to the out-of-pocket maximum.

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GSHP Contribution Schedule:

Salary	Coverage Level Percentages			
	Single	Parent & Child	Member & Spouse	Family
\$40,000 or less	0.85%	1.10%	1.40%	1.65%
>\$40,000-\$50,000	0.95%	1.25%	1.65%	1.95%
>\$50,000-\$60,000	1.10%	1.40%	1.95%	2.20%
>\$60,000-\$70,000	1.25%	1.50%	2.20%	2.50%
>\$70,000-\$80,000	1.40%	1.65%	2.50%	2.75%
>\$80,000-\$90,000	1.50%	1.80%	2.75%	3.00%
\$90,000-\$100,000	1.65%	1.95%	3.00%	3.30%
>\$100,000-\$125,000	1.80%	2.20%	3.30%	3.60%
More than \$125,000	Percentage to be continued shall be the same as for a base salary of \$125,000			

GSHP Plan Design:

Garden State Health Plan				
Primary Care Copayment	\$10			
Specialist Care Copayment	\$15			
Emergency Room Copayment	\$125 (to be waived if admitted)			
In-Network Deductible	\$0			
In-Network Coinsurance	10% applicable to Emergency Transportation & Durable Medical Equipment Only			
In-Network Out-of-Pocket Maximum (Individual/Family)	\$500/\$1,000 (*Covers all In-Network copayments, coinsurance & deductible)			
Out-of-Network Allowance	200% of CMS			
Out-of-Network Deductible (Individual/Family)	\$350/\$700			
Out-of-Network Coinsurance	30% of Out-of-Network fee schedule			
Out-of-Network Out-of-Pocket Maximum (Individual/Family)	\$2,000/\$5,000			
Out-of-Network Inpatient Hospital Deductible	30% of Out-of-Network fee schedule			
Prescription Dru	gCoverage & Copayments			
Prescription Drug Annual Out-of-Pocket Maximum (Individual/Family)	\$1,600 /\$3,200			
Generic (Retail/Mail Order)	\$5 30 Day Supply/\$10 90 Day Supply			
Preferred Brand	\$10 30 Day Supply/\$20 90 Day Supply			
Non-Preferred Brand	Members plays the difference between generic & brand plus brand copayment*			