



State of New Jersey School Employees' Health Benefits Program

Plan Year 2023 Rate Setting Recommendation
Analysis

As presented to the Commission on September 19, 2022

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Executive Summary

The purpose of this Analysis is to recommend premium levels for the School Employees' Health Benefits Program (SEHBP) for January 1, 2023 through December 31, 2023.

Recommended premium rate changes are based on a review of the experience of the Medical and Prescription Drug benefits offered to Active Employees and Retirees by the SEHBP. The updated projections for Plan Year 2023 are based on medical and prescription drug claims incurred January 1, 2021 through December 31, 2021 and paid through March 31, 2022. The following bullets summarize the major highlights in the Rate Setting Analysis:

- The total recommended Plan Year 2023 premium rate changes for the Local Education Actives, Early Retirees, and Medicare Retirees are as follows:
 - The recommended rate change for Local Education Actives is a 15.6% increase for medical and a 10.8% increase for the prescription drug premium rates, for a total increase of 15.1%.
 - The recommended Plan Year 2023 rate change for Early Retirees enrolled in New Jersey Educator Health Plan is approximately a 13.6% increase for medical and a 26.1% increase for the prescription drug premium rates, for a total increase of 15.8%.
 - The Medicare Retiree medical decrease for Plan Year 2023 is 9.6%, which includes both self-insured medical premiums and fully insured Medicare Advantage premiums. The recommended prescription drug rate change in Plan Year 2023 is a 6.1% increase.
- Effective July 1, 2022, SEHBP Actives and Early Retirees may enroll in the Garden State Health Plan. Final premium rates were developed for this plan based on partial year 2021 experience and will be effective for 18 months from July 1, 2022 through December 31, 2023.

Recommended Premium Rate Changes

The recommended Plan Year 2023 premium rate changes are as follows: a 15.1% increase for Active Employees, a 15.8% increase for Early Retirees and a 0.1% decrease for Medicare Retirees. The Retiree Medicare Medical Plan includes both fully insured Medicare Advantage plans administered by Aetna and self-insured Medicare plan options administered by Horizon. The Medicare Retirees medical increase for Plan Year 2023 includes both self-insured medical premiums and fully insured Medicare Advantage premiums.

The recommended rate setting premium rate changes for Plan Year 2023 by benefit plan are listed below:

	Medical	Rx			Total
		Rx Card	MMRx	Total Rx	
Actives					
NJ DIRECT 10/15	15.6%	7.8%	16.6%	12.8%	15.3%
NJEHP	15.6%	7.8%	7.8%	7.8%	14.9%
Total	15.6%	7.8%	12.9%	10.8%	15.1%
Early Retirees					
NJEHP	13.6%			26.1%	15.8%
Total	13.6%			26.1%	15.8%
Medicare Retirees					
Total	(9.6%)			6.1%	(0.1%)
Grand Total	13.8%			9.6%	12.9%

The table below shows the projected total Claim Stabilization Reserve at the end of Plan Years 2021 through 2023 for Local Education. The projected reserve balances are based on the reserve balance as of June 30, 2021 provided by the State. The CSR balances below are intended to illustrate how the claims stabilization reserve may fluctuate due to gains and losses in the active plans. Actual balances as of December 31, 2022 and December 31, 2023 may differ.

SEHBP Projected Active Claim Stabilization Reserve

(in \$ millions)

	Reserve Balance
12/31/2021	\$559
12/31/2022	\$314
12/31/2023	\$313
Months of Plan Cost as of 12/31/2023	2.5

COVID-19

Aon's current guidance is to project medical claims using 2021 claims data normalized for the impacts of COVID-19. For the Plan Year 2023 Rate Setting analyses, 2021 claims used for projecting 2022 and 2023 are adjusted using a blend of actual vs. expected claims experience, Aon National COVID-19 medical claim factors, and Aon North East Regional COVID-19 medical claims factors. The Local Education 2021 medical normalization factor for Actives is 1.01, for Early Retirees is 1.02, and for Medicare Retirees is 1.04.

Plan Year 2022 and 2023 estimates are limited by unknown factors, including:

- Cost of regular testing for COVID-19 and multiple infection peaks
- Cost of new drugs or vaccines that are developed and requirements for employers to cover those costs, at any price
- Unforeseen impact of provider economic distress & healthcare system capacity limits
- Potential higher ongoing costs of patients who recovered from COVID-19 illness
- Increased severity of claims as a result of delayed treatment
- Spillover of delayed non-essential care from 2020 and 2021
- Impact of federal assistance
- Potential to create anti-selection among employee population (i.e. COBRA, covered dependents, opt-in rates)

The Plan Year 2023 premium projections do not include any additional margin for COVID-19.

Additional Disclosures

The projections in this analysis are measured on an incurred basis and are consistent with the assumptions and methodology disclosed herein. Future projections may differ significantly from the current projections presented in this analysis due to (but not limited to) such factors as the following:

- Plan experience differing from what is anticipated by the economic or demographic assumptions;
- Changes in actuarial methods or in economic or demographic assumptions;
- Changes in plan provisions or applicable law.

Plan Year 2022 Rate Setting analyses included vendor reported savings for each program. Savings for these programs in the Plan Year 2023 rate setting analyses are assumed to be included in the claims and do not include any additional savings in 2022 and 2023 other than what is noted in this document.

This analysis contains the primary actuarial assumptions and methods used to develop the cost projections but may not include a comprehensive list of these methodologies and assumptions. Aon provided guidance with respect to these assumptions, and it is our belief that the assumptions represent reasonable expectations of anticipated plan experience.

Plan Year 2023 Overview

Chapter 44: Approved through the SEHBP Plan Design Committee on July 10, 2020 and as enacted in P.L.2020, c.44 ("Chapter 44"), the State of New Jersey approved legislation that requires the SEHBP to offer to Local Education Actives three plans and Early Retirees only one plan, effective January 1, 2021, for medical and prescription benefits coverage which include the PPO10, PPO15, and New Jersey Educators Health Plan (NJEHP). In addition to the three plans offered on January 1, 2021, Chapter 44 requires an additional plan be offered to Actives and Early Retirees beginning July 1, 2021 (later extended to July 1, 2022) called the Garden State Health Plan. This law requires the elimination of all other benefit plans available to SEHBP Active and Early Retiree members. There is no impact to Medicare Retirees associated with this legislation.

Garden State Health Plan: Beginning July 1, 2022, a new Garden State Health Plan will be implemented. All Local Education employees hired on or after July 1, 2020 will be enrolled in the NJEHP and will have the option to enroll in the Garden State Health Plan beginning July 1, 2022. Cost and enrollment projections for the Garden State Health Plan have been included in this analysis. Final 18-Month premium rates through December 31, 2023 were developed for this plan. There are no changes to these premiums reflected in this analysis.

Resolution 2020-02: Approved through the SEHBP Plan Design Committee on July 10, 2020 and effective as soon as reasonably practicable, but in no event later than August 1, 2020, the SEHBP agreed to limit out-of-network allowed amounts for coverage of chiropractic, acupuncture, and physical therapy services. The out-of-network coverage for chiropractic and acupuncture services will be no more than \$35 a visit for chiropractic services and \$60 a visit for acupuncture visits, or 75% of the average in-network cost per visit, whichever is less. The out-of-network coverage for physical therapy services will be no more than 75% of the average in network cost per visit for physical therapy. Applicable co-insurance will apply for these services. This change affects Actives and Early Retirees and does not impact Medicare Retirees. Estimated annual savings are assumed to be in 2021 claims experience. This legislation is assumed to continue to be in effect for Plan Year 2023.

Additional Plan Design Changes that have been made and are assumed to continue to be in effect for Plan Year 2023 are as follows:

- Implementation of Fair Health National Database Reimbursement Methodology: Effective March 1, 2020, Out-of-Network medical claims for plans that reimburse based on FAIR Health database will be reimbursed based on the National Database of associated charges, rather than based on charges grouped by three-digit zip code. Savings for this change are assumed to be in the underlying claims experience and will continue in Plan Year 2023. This change does not impact Medicare Retirees.
- HMS Data Integrity Vendor: In accordance with Public Law 2019, Chapter 143, the State recently conducted a bid solicitation awarding HMS the opportunity to provide Medical Claims

Review and Data Warehouse services for self-insured Active, Early, and Medicare Retirees. This law requires the third party Medical Claims Reviewer to provide ongoing review and oversight of current medical claims processes. In addition, the Medical Claims Reviewer also must collect, store and maintain a secure archive of medical and prescription drug claims and other health services payment information, as well as document the cost and nature of claims incurred, demographic information on the covered population, emerging utilization and demographic trends. Actual 2021 savings are assumed to be in the underlying claims experience. Actual 2021 fees as well as estimated 2022 and 2023 savings and fees are provided by HMS. This program is assumed to not impact Medicare Retirees.

- New Medicare Eligibility Vendor: The State implemented SSDC services to identify and conduct outreach to pre-65 retirees and spouses who are currently eligible or could become eligible for Medicare, in order to ensure enrollment in Medicare when appropriate. Estimated savings for this program are assumed to be in the underlying claims experience. This program does not impact Actives and Medicare Retirees.
- Navigation Advocacy: Effective January 1, 2020, Horizon implemented Horizon Health Guide, an enhanced Navigation and Advocacy Model. Horizon's position is that the Navigation and Advocacy program was fully implemented and thus the impact was included in the 2021 claims experience. The State is disputing this. As such, the savings that the State asserts should have been realized if the Navigation and Advocacy Program had been fully implemented, which should have resulted in a claims experience more in line with Horizon's projected decrement for this program, is not included in the analysis. Additionally, savings associated with Third-Party vendor solutions are assumed to be in the underlying 2021 claims experience. This program does not impact Medicare Retirees.
- Livongo Diabetes Management: Effective January 31, 2020, Livongo, a diabetes management program was launched for Actives and Early Retirees. The goal of the program is to help keep members living with diabetes in the safe zone of blood glucose levels by providing a cellular-enabled glucometer with testing strips and access to coaching and a 24/7 chat feature. Livongo identifies eligible participants through Medical and Rx claims data and sends targeted communications to members for enrollment. Livongo analyzes data to personalize the program for each member and provide real-time health insights. Estimated savings for this program are assumed to be in the underlying claims experience. This program does not impact Medicare Retirees.
- Livongo Whole Person: Beginning Plan Year 2021, Livongo is also implementing the Livongo "Whole Person", which provides a broader suite of services such as Livongo for Cardiovascular, Livongo for Weight Management, and Livongo for Behavioral Health in addition to the Livongo for Diabetes Management in effect since January 31, 2020. Estimated savings for this program are assumed to be in the underlying claims experience. This program does not impact Medicare Retirees.

- Hinge Health: Effective 2021, the State implemented Hinge Health, a coach-led, digital program using sensor guided exercise therapy for chronic back and joint pain. Estimated savings for this program are assumed to be in the underlying claims experience. This program does not impact Medicare Retirees.

- Amino: Effective 2021, the State implemented Amino, a provider directory promoting transparency that helps employees make smarter healthcare choices. The tool matches members with the highest quality, lowest cost in-network providers for their specific needs. Estimated savings for this program are assumed to be in the underlying claims experience. This program is assumed to impact Medicare Advantage Retirees beginning plan year 2022. No additional savings will be included for purposes of the rate setting projection.

- Wondr Health (formerly Naturally Slim): Effective 2021, the State implemented Wondr Health, an online weight loss program that uses informative videos and learning tools to teach participants how to lose weight and improve their overall health. Estimated savings for this program are assumed to be in the underlying claims experience. This program does not impact Medicare Retirees.

- eviCore: Effective January 1, 2021, the State implemented eviCore's Advanced Imaging Solution, which delivers cost savings and improved patient outcomes by guiding members to receive the appropriate test or treatment using prior authorizations and medical necessity reviews. Estimated savings for this program are assumed to be reflected in the underlying claims experience. This program does not impact Medicare Retirees.

- Included Health (Formerly Grand Rounds): Effective April 1, 2021, the State implemented Grand Round's Expert Medical Second Opinion Solution. The program provides guidance for members to access expert second opinions for health conditions and cases to ensure the right diagnosis and treatment plan while reducing unnecessary procedures and costs. No additional savings are included for purposes of the rate setting projection. This program does not impact Medicare Retirees.

Vendor Changes

Medical Vendors: Effective January 1, 2020, all self-insured medical plans are administered solely by Horizon. Aon assumes no change in the self-insured medical and fully-insured Medicare Advantage vendors in Plan Year 2023. Additionally, Aetna will administer the Garden State Health Plan, expected to be first offered on July 1, 2022.

Pharmacy Benefit Manager: Effective January 1, 2020, prescription drug benefits for Actives and Retirees are administered by Optum as a result of a 2019 Reverse Auction Bid Solicitation administered by Truveris, Inc. Optum is assumed to administer all of the prescription drug plans in Plan Year 2023.

Federal Health Care Reform

In-Network Out-of-Pocket Maximum: Effective 1/1/2023, Federal Health Care Reform requires that in-network medical and prescription drug benefits have a combined out-of-pocket maximum no greater than \$9,100 single / \$18,200 family. This benefit change will not have a significant impact on projected costs. Aon did not include any specific additional administrative load for the Local Education Plans with private Rx cards, who may want to integrate the administration of their medical and prescription drug out-of-pocket limits. This will not affect any plan designs available to Local Education Actives and Early Retirees due to the implementation of Chapter 44

Plan Year	Out-of-Pocket Maximum (Single/Family)
2021	\$8,550 / \$17,100
2022	\$8,700 / \$17,400
2023	\$9,100 / \$18,200

Health Insurance Exchanges: The public health insurance exchanges that are mandated by Federal Health Care Reform (which began in 2014), and the State's marketplace effective for coverage in 2021 and later, are assumed to have minimal impact on enrollment or cost levels within the SEHBP due to the SEHBP's low employee contributions and rich benefit designs.

Full-Time Employee Definition: The Patient Protection and Affordable Care Act (Affordable Care Act) defines full-time employees as employees who work 30 or more hours per week. The employer mandate, which is applicable to full-time employees, was essentially first effective 1/1/2015. This requirement is not projected to have a cost impact on the SEHBP because in general, the State offers coverage to all full-time employees.

ACA 9010: Section 9010 of the ACA imposed a Health Insurer Fee (HIF) on each covered entity engaged in the business of providing health insurance for United States health risks. The HIF will help fund the federal subsidies given to lower-income families that may not have coverage. On January 22, 2018, Congress passed a spending bill which placed a moratorium on this tax in Plan Year 2019. As of December 20, 2019, the HIF was in place for Plan Year 2020, however this has been repealed beginning Plan Year 2021.

Further Consolidated Appropriations Act, 2020: On December 20, 2019, the President signed an omnibus bill that included a repeal of the excise tax on high-cost employer-sponsored health coverage, the medical device excise tax, and the health insurance providers fee (also known as the health insurance tax). Although the excise tax has been twice delayed, it was scheduled to go into effect in 2022 and has since been eliminated. The medical device excise tax was scheduled to expire on December 31, 2019. The health insurance providers fee had a moratorium placed on it during 2019, will go back into effect in 2020, and will be eliminated permanently beginning in 2021.

Telehealth Expansion Act: Signed 12/21/2021, this bill extends for the next two years the requirement adopted at the outset of the COVID-19 pandemic that health benefits plans reimburse health care providers for telehealth and telemedicine services at the same rate as in-person services, with limited exceptions. The bill reimburses providers for all forms of healthcare, including behavioral health, delivered through telehealth at the same rate as in-person care, and it bans payers from placing restrictions on locations from where services are provided, and the technological platforms used. No additional cost impact is assumed since this program is already in place

No Surprises Act: Effective 1/1/2022, medical carriers must provide a reasonable estimate of the expected cost of a service before the service is carried out on a patient. This law is designed to regulate the frequency of surprise billings.

United States Preventive Services Task Force on ACA Preventive Service recommendations: Effective 3/1/2022, the recommended age for select preventive cancer screenings is being lowered. This may increase utilization of preventive care but is deemed to have no significant impact on cost in this analysis.

New Jersey State Mandates

New Jersey Reproductive Freedom of Choice Act: Effective 1/13/2022, this law codifies the constitutional right to freedom of reproductive choice.

NJ COVID-19 Emergency Guidance: During the COVID-19 pandemic, the SEHBP is subject to emergency guidance elimination member cost sharing on COVID-19 testing as well as telemedicine services.

These New Jersey State mandates are not expected to materially impact the projected SEHBP Plan Costs and are not reflected in the projected Plan Year 2023 costs and premiums.

Eligibility Changes

Chapter 375 Coverage of Adult Children: The number of Local Education adult children covered under Chapter 375 as of April 2022 is 133. The premiums for this group are required to be equivalent to the premium charges for children and are included in the standard premiums, with a 2% load for expenses. Plan Year 2023 rate setting premiums have been calculated based on this requirement. The adult child rate will be approximately 88% of the Single Employee rate.

Part-Time Coverage: Part-time Employees may enroll in any of the SEHBP plans, and as of April 2022, 36 Local Education Part-time Employees participate. A rate load of 10% for Plan Year 2023 is recommended, an increase from the rate load used in Plan Year 2022 of 6%. The recommendation is based on the three-year average loss ratio for Part-time Employees from 2017-2019. 2020 and 2021 Part-Time Employee Loss Ratios have increased, likely as a result of COVID-

19's impact on utilization. As a result, the rate load has increase compared to the rate load used in Plan Year 2022.

Enrollment Changes

Exhibit 1A shows historical enrollment patterns from Plan Year 2020 through 2022 and includes a projection of enrollment from Plan Year 2022 to 2023. This projection assumes that Local Education Active enrollment will increase by 2.0% in Plan Year 2023. Early Retiree enrollment is projected to decrease 2.0% in Plan Year 2023; and Medicare Retiree enrollment is projected to increase 1.0% in Plan Year 2023.

Exhibit 1B shows the projected distribution of enrollment among benefit options in Plan Year 2023. Approximately 50% of Local Education Actives are assumed to be enrolled in the new NJEHP plan and 35% are assumed to remain in the PPO10. Less than 1% of Local Education Actives are assumed to be enrolled in the Garden State Health Plan. Approximately 12% of Local Education Retirees are assumed to be enrolled in the new NJEHP plan, while 70% of the Local Education Retiree population is assumed to be enrolled in either the PPO10 or PPO15 plan. Less than 1% of Local Education Retirees are assumed to be enrolled in the Garden State Health Plan.

Exhibit 1C shows enrollment by benefit option and coverage tier as of April 2022. Projected enrollment changes noted above do not reflect any potential impacts associated with COVID-19 (i.e. furloughs, layoffs, etc.)

Dependents per Subscriber are based on ratios using SEHBP enrollment as of January 2022 and are assumed to remain constant for Plan Year 2023.

Enrollment Migration to Lower Cost Plans

Actives: Prior rate setting analyses assumed that contribution increases under Chapter 78 would motivate a small number of employees to migrate to lower cost plan options. For Local Education Actives, with the adoption of Chapter 44, no additional plan migration is anticipated beyond what is noted in this analysis.

Retirees: Chapter 78 does not apply to existing retirees as of 7/1/2011 or to employees who had 20 or more years of service on 7/1/2011. For this reason, we are assuming no changes to retiree contributions for Plan Year 2023, which means that the majority of retirees will continue to have no contribution for the cost of their retiree health benefits. As such, no migration is assumed for Retirees.

Local Education NJEHP Enrollment

For Plan Year 2023, it is assumed that 50% of Local Education Active employees will enroll in the new NJEHP. Additionally, it is assumed that 35% and 15% of total Active employees remain in the PPO10 and PPO15 plan, respectively.

Local Education GSTHP Enrollment

The Garden State Health Plan is expected to be first offered in July 2022. Actual enrollment based on open enrollment data provided by the State will be reflected for Plan Year 2022. Projected Plan Year 2023 enrollment in the Garden State Health Plan will incorporate actual enrollment experience assumed for Plan Year 2022.

Active Demographic Changes

Based on April 2022 census data, the Active Employee average age decreased 0.2 years from Plan Year 2021 to Plan Year 2022. The average PPO Employee average age increased 0.7 years. For April 2022 the average age of Employees enrolled in the new NJEHP plan is approximately 5.9 years younger than the average age of Employees enrolled in the Legacy PPO Plans.

Average Employee Age

	April 2021	April 2022	Change
Legacy PPO	49.1	49.8	0.7
NJEHP	44.4	43.9	(0.5)
Total	47.4	47.2	(0.2)

Trend Analysis

The recommended claim trend assumptions for Plan Years 2022 and 2023 are as follows:

	Plan Year 2022		Plan Year 2023	
	Medical	Prescription Drugs	Medical	Prescription Drugs
PPO Actives*	6.00%	7.75%	6.00%	7.75%
PPO Early Retirees	5.50%	8.00%	5.50%	8.00%
Self-Insured Medicare Retirees	5.50%	6.00%	5.50%	6.00%

*Does not include anti-selection trend adjustments outlined below

The Medicare Retiree medical trend assumptions do not reflect the fully insured Medicare Advantage plans. The Plan Year 2023 Medicare Advantage premium rates are provided by Aetna and are shown on the following page.

Exhibits 2A and 2B present historical SEHBP trend experience and the recommended trend assumptions for Plan Year 2023 for medical and prescription drug, respectively. These experience trends are based on estimated incurred claim trends from January 1, 2020 to December 31, 2021 and have been normalized for estimated benefit and vendor changes.

Recommended trends are developed using vendor recommended trends, national Aon trend guidance (which reflects vendor surveys, Pharmacy Benefit Manager national surveys and other external sources) as well as actual SEHBP plan experience adjusted for expected future trends. The vendor recommended trends and national Aon trend guidance are shown in the table below:

Plan Year 2023	Vendor Recommendation		National AON Trend Guidance	
	Horizon	Optum	Medical	Rx
PPO Actives	5.0%	7.2%	6.5%	8.2%
PPO Early Retirees	5.0%	8.0%	6.5%	8.2%
Self-Insured Medicare Retirees	5.0%	5.7%	5.5%	8.2%

*Gross trend shown before impact of plan design changes.

** Aon National Trend Guidance does not include the impact of plan design leveraging.

Medical Trends:

- PPO Actives: The recommended PPO medical trend for Actives for Plan Year 2022 is 6.0%, no change from the Plan Year 2022 Rate Setting Analysis (does not include the anti-selection adjustment described below). The recommended Active PPO medical trend is 6.0% in Plan Year 2023.

- PPO Early Retirees: The recommended PPO medical trend for Early Retirees for Plan Year 2022 is 5.5%, no change from the Plan Year 2022 Rate Setting Analysis. The recommended Early Retiree PPO medical trend is 5.5% in Plan Year 2023.
- Self-Insured Medicare Retirees (PPOs and HMOs): The self-insured Medicare Retiree medical trend is recommended to be 5.5% in Plan Year 2022 and Plan Year 2023, a 0.5% increase over the Plan Year 2022 Medicare Retiree medical trend in the Plan Year 2022 Rate Setting Analysis.

Prescription Drug Trends: Recommended trends are based on historical experience trends, the Aon trend survey and input from the Pharmacy Benefit Manager. Prescription drug trends are higher compared to the Plan Year 2022 Renewal Analysis as a result of expected high specialty drug trends.

The recommended prescription drug trend has increased to 7.75% for Local Education Actives, 8.0% for Local Education Early Retirees, and 6.0% for Self-Insured Medicare Retirees in Plan Year 2022 from the 5.0% Active, 5.5% Early Retiree, and 5.5% Self-Insured Medicare Retiree trends that were used in the Plan Year 2022 Rate Setting Analysis. The recommended prescription drug trend for Plan Year 2023 is 7.75% for Local Education Actives, 8.0% for Local Education Early Retirees, and 6.0% for Self-Insured Medicare Retirees.

Additional Trend Adjustments: Based on expected entrants and terminations of Local Education Active Employers from the SEHBP, the Active medical and prescription drug trends have been increased by 25 basis points for Plan Year 2022 and Plan Year 2023. This adjustment is consistent with long-term expectations and reflects anti-selection risk (employers with good experience are terminating or those with poor experience are entering which will affect the SEHBP's overall loss ratio).

Medicare Advantage: The Medicare Advantage rates in Plan Years 2022 and 2023 were provided by Aetna. Below is a table summarizing the fully insured Medicare Advantage per member per month rates for Plan Years 2022 and 2023. Aetna has projected that an \$11.04 PMPM gain-share premium credit may be available to reduce 2022 costs and the rates below reflect that reduction. Costs could be higher if the gain share does not apply. The Plan Year 2023 Medicare Advantage Premium Rates reflect pricing offered by Aetna on June 17, 2022.

Aetna Monthly Per Member Medicare Advantage Premium Rates

Local Education	Aetna Medicare Advantage Rates		
	2022	2023	\$ Change
PPO 10	\$ 133.38	\$ 114.44	\$ (18.94)
PPO 15	\$ 113.66	\$ 94.72	\$ (18.94)
HMO 10	\$ 160.90	\$ 141.96	\$ (18.94)
HMO 1525	\$ 125.47	\$ 106.53	\$ (18.94)

Financial Projections

Aggregate Financial Projections

Using the assumptions detailed in this Rate Setting Development section of this analysis, below are the current estimated projected costs for Plan Years 2021, 2022 and 2023.

Projected Financial Results

(in \$ millions)

	NJEHP / GSTHP*	PPO 10	PPO 15	Legacy HMOs	New Plans**	Total
Plan Year 2021						
Premium Rates x Enrollment	\$763.7	\$950.3	\$320.6	\$27.8	\$124.2	\$2,186.6
Incurred Claims	\$711.3	\$1,005.0	\$340.3	\$28.0	\$107.0	\$2,191.6
Administrative Charges	\$21.2	\$23.8	\$7.7	\$0.8	\$6.7	\$60.2
Net Gain (Loss)	\$31.2	(\$78.5)	(\$27.4)	(\$1.0)	\$10.5	(\$65.2)
Plan Year 2022						
Premium Rates x Enrollment	\$796.1	\$907.4	\$288.1	\$28.6	\$123.6	\$2,143.8
Incurred Claims	\$800.3	\$1,054.5	\$351.5	\$29.7	\$119.9	\$2,355.9
Administrative Charges	\$26.8	\$27.6	\$9.7	\$0.8	\$9.2	\$74.1
Net Gain (Loss)	(\$31.0)	(\$174.7)	(\$73.1)	(\$1.9)	(\$5.5)	(\$286.2)
Plan Year 2023						
Premium Rates x Enrollment	\$1,071.9	\$1,014.3	\$272.9	\$28.6	\$130.7	\$2,518.4
Incurred Claims	\$923.7	\$1,076.2	\$286.4	\$29.8	\$128.5	\$2,444.6
Administrative Charges	\$29.6	\$26.9	\$7.3	\$0.8	\$9.5	\$74.1
Net Gain (Loss)	\$118.6	(\$88.8)	(\$20.8)	(\$2.0)	(\$7.3)	(\$0.3)

* GSTHP is included beginning in Plan Year 2022

**This includes only certain self-insured Medicare Retiree plans.

The current Plan Year 2021 financial results project a decrease of \$125.9 million in the gain compared to the gain shown in the Plan Year 2022 Rate Setting Analysis.

The current Plan Year 2022 financial results project a \$285.9 million decrease in the gain from the Plan Year 2022 Rate Setting Analysis. This decrease includes the impact of a one-month premium holiday effective in January 2022.

The Plan Year 2023 rate setting premiums are projected to produce approximately no gain or loss. The Plan Year 2023 aggregate projected costs are \$2.5 billion: Approximately \$1.5 billion for Actives and approximately \$1.0 billion for Retirees.

More detailed aggregate projections are displayed in Exhibit 3. The losses and gains displayed in this table and in Exhibit 3 assume that all premiums are fully funded.

Financial Gain /(Loss)

Plan Year 2021

Projected active costs increased 11.6% from the Plan Year 2022 Renewal Analysis. This increase in plan cost is primarily a result of the following:

- The projected Plan Year 2021 claims in the Plan Year 2022 Renewal Analysis was based on 2020 claims experience. Based on updated incurred 2021 experience paid through March 2022, total active cost increased 10.5%.
 - Calendar Year 2021 PPO medical claims experience shows a 12.9% increase in PMPM claims. The 2022 Rate Setting Analysis estimated a 5.5% trend. Horizon's position is that the Navigation and Advocacy program was fully implemented and thus the impact was included in the 2021 claims experience. The State is disputing this. As such, the savings that the State asserts should have been realized if the Navigation and Advocacy Program had been fully implemented, which should have resulted in a claims experience more in line with Horizon's projected decrement for this program, is not included in the analysis. Additionally, savings associated with Third-Party vendor solutions are assumed to be in the underlying 2021 claims experience.
 - Large increases in member utilization were expected in 2021 due to a rebound from COVID-19. However, actual utilization appears to exceed these expectations.
 - Outpatient and Professional visits have increased 37.1% and 15.5% respectively. Additionally, specialist visits have increased 9.9%.
 - There is a 5.4% increase in network utilization.
 - Emergency Room trend is 22% and Urgent Care trend is 40%.
 - Calendar Year 2021 prescription drug experience show a 6.2% PMPM claims trend.
 - Optum reporting shows a utilization trend of 0.1%, lower than the Optum benchmark of 2.2% utilization trend. Drug mix trend of 3.1% is also lower than the 4.2% Optum benchmark.
 - Optum reporting shows a 33.3% PMPM trend in Inflammatory Conditions and a 5.7% PMPM trend in Diabetes.
- The 2022 Rate Setting Analysis was based on Plan Year 2020 billing file enrollment provided by the State. The State has advised that this enrollment was overstated, resulting in an average 2021 PMPM plan cost which was understated by approximately 1.4%. This has been corrected in this Rate Setting Analysis.
- Based on actual rebates provided by the State, Plan Year 2021 active prescription drug rebates increased from the Plan Year 2022 Renewal Analysis, an increase in prescription drug rebates is projected to reduce total active cost by 0.5%.

- Differences between actual and expected investment income and overhead costs result in a 0.2% increase in total active cost.

Retiree cost is projected to increase 4.5% from the Plan Year 2022 Renewal Analysis.

- The projected Plan Year 2021 claims in the Plan Year 2022 Renewal Analysis was based on 2020 claims experience. Based on updated incurred 2021 experience paid through March 2022, total retiree cost is increasing 2.4%.
 - Plan Year 2021 PPO claims experience shows a 0.9% increase in Early Retiree PMPM claims.
 - Large increases in member utilization were expected in 2021 due to COVID-19. However, actual utilization appears to exceed these expectations.
 - Outpatient and Professional visits have increased 29.4% and 10.6%, respectively. Primary care visits increased 32.0%.
 - Network utilization increased by 6.7%.
 - Calendar Year 2021 retiree prescription drug experience shows a 2.3% PMPM claims trend.
 - Optum reporting shows utilization and drug mix contributed 0.5% towards overall trend, lower than Optum benchmark of 6.4%.
 - Optum reporting shows a 22.0% PMPM trend in inflammatory conditions and a 7.9% PMPM trend in diabetes.
- The 2022 Rate Setting Analysis was based on Plan Year 2020 billing file enrollment provided by the State. The State has advised that this enrollment was overstated resulting in an average 2021 PMPM plan cost for Local Education Early and Medicare Retirees which was understated by approximately 2.0%. This has been corrected in this Rate Setting Analysis.
- There is a 0.4% increase in total retiree cost due to differences between actual and expected overhead charge, investment income, and education surcharge.
- Based on actual rebates provided by the State, Plan Year 2021 retiree prescription drug rebates increased from the Plan Year 2022 Rate Setting Analysis, decreasing projected retiree costs by approximately 1.1%. This decrease in retiree cost is offset by reduction in EGWP credits, which increase retiree costs by 0.8%.

Plan Year 2022

For Plan Year 2022, active medical and prescription drug costs are projected to increase 17.2% compared to the results shown in the Plan Year 2022 Renewal.

- Aggregate medical and prescription drug costs are estimated to increase 5.6% from the results shown in the Plan Year 2022 Renewal Analysis due to an overall increase in Local Education Active enrollment.
- Total active medical and prescription drug cost is expected to increase 8.7% due to updated medical and prescription drug claims experience.
 - 2022 estimates shown in the 2022 Renewal Analysis were understated by approximately 1.4% as a result of overstated 2020 enrollment provided by the State, as discussed above.
 - Updated medical claims experience in 2021 was higher than expected, as discussed above.
 - The Plan Year 2022 Renewal Analysis assumed that 50% of actives would enroll in the lower cost New Jersey Educator's Health Plan (NJEHP). Actual enrollment showed that approximately 42% of the active population is enrolled in the NJEHP, resulting in less savings than expected.
- Trend assumptions used in the Renewal Analysis have been increased to reflect the current inflationary environment and other expected factors. Updated trend assumptions are expected to increase projected active costs by 0.3%.
- The Plan Year 2022 Rate Setting Analysis included additional savings for third party vendor solutions as well as Horizon's Navigation Advocacy program. Horizon's position is that the Navigation and Advocacy program was fully implemented and thus the impact was included in the 2021 claims experience. The State is disputing this. As such, the savings that the State asserts should have been realized if the Navigation and Advocacy Program had been fully implemented, which should have resulted in a claims experience more in line with Horizon's projected decrement for this program, is not included in the analysis. Additionally, savings associated with Third-Party vendor solutions are assumed to be in the underlying 2021 claims experience. These estimated savings have been removed from the projection with the exception of HMS. This update is expected to result in a 3.4% increase in projected active costs.
- There is a 0.2% increase in active cost due to changes in investment income.
- Based on updated reporting from Optum, active prescription drug rebates are projected to increase, resulting in a 1.0% decrease in total active cost.

For Retirees, there is a 5.0% increase in total retiree costs from what was projected in the Plan Year 2022 Renewal Analysis.

- Total retiree costs are projected to increase 2.5% due to updated medical and prescription drug experience and enrollment.
 - 2022 estimates shown in the 2022 Renewal Analysis were understated by approximately 2.0% as a result of overstated 2020 enrollment provided by the State.
- Trend assumptions used in the Renewal Analysis have been increased to reflect the current inflationary environment and other expected factors. Updated trend assumptions are expected to increase projected retiree costs by 0.5%.
- The Plan Year 2022 Rate Setting Analysis included additional savings for third party vendor solutions as well as Horizon's Navigation Advocacy program. Horizon's position is that the Navigation and Advocacy program was fully implemented and thus the impact was included in the 2021 claims experience. The State is disputing this. As such, the savings that the State asserts should have been realized if the Navigation and Advocacy Program had been fully implemented, which should have resulted in a claims experience more in line with Horizon's projected decrement for this program, is not included in the analysis. Additionally, savings associated with Third-Party vendor solutions are assumed to be in the underlying 2021 claims experience. These estimated savings have been removed from the projection with the exception of HMS. This update is expected to result in a 1.5% increase in projected retiree costs.
- There is a 0.3% increase in total retiree cost due to changes in education surcharge and investment income.
- Based on updated information provided by Optum, increases in expected 2021 prescription drug rebates is projected to result in a 1.2% reduction in total retiree costs, offset by a reduction in EGWP credits resulting in a 1.4% increase in total retiree cost.

Self-Insured Vendor Administrative Fees and Claim Charges

Below are Plan Year 2023 administrative fees and other claim charges, as applicable, separately by each of the medical and prescription drug vendors. Plan Year 2023 Horizon Admin Fees PEPM are assumed to be 5.0% higher compared to 2022. The fees are reported by the vendors in different categories and may appear aggregated within different rows in Exhibit 3, including incurred medical and prescription drug claims, capitation and administrative fees.

Horizon Medical PEPM Fees/Charges

	Plan Year 2023		
	PPO	HMO	HDHP
Actives and Early Retirees			
Part 1 Services	\$23.52	\$34.65	\$23.24
Part 2 Services	\$9.45	\$9.45	\$9.45
Medical Management	\$1.16	\$1.16	\$1.16
Disease Management	\$0.42	\$0.42	\$0.42
HSA Banking Fee (Per Account Per Month)	N/A	N/A	\$2.49
NJWELL*	\$19.95	\$19.95	\$19.95
Medicare Retirees			
Part 1 Services	\$24.15	\$24.15	N/A
Part 2 Services	\$7.88	\$7.88	N/A

* Plan Year 2023 Fees are per attributed NJWELL employee and paid on a Per Enrolled Per Month basis. An attributed member is defined as an employee that is engaged in the wellness platform through completion of one or more of the point-achieving activities including, but not limited to, Health Assessment, Biometric Screening, Flu Shots, Telemedicine Wellness/Disease Management Coaching, Online Activities, etc. The NJWELL program includes access to WebMD wellness resources, custom rewards lobby, online tracking tools, monthly webinars and a comprehensive Health Management portal to track all activities.

Other fees/claim charges that may be included within the incurred medical and prescription drug claims, capitation and administrative fees within Exhibit 3 include but are not limited to:

- NJWELL and Retiree Wellness Program fees (physician attestation forms, gift cards, etc.)
- DPCMH and PCMH administrative fees and capitation amounts
- Claim recovery services

Garden State Health Plan

Administrative fees charged by Aetna for the Garden for Plan Year 2023 are \$35.45 PEPM for Active and Early Retirees.

Prescription Drug Fees

Administrative fees charged by Optum for the prescription drug program for Plan Year 2023 are \$5.20 PEPM for Commercial and \$8.00 PMPM for EGWP.

Rate Setting Development

Rating Methodology

Exhibit 3 shows the aggregate projected costs for Plan Years 2021, 2022 and 2023, separately for each PPO and HMO plan. Costs were projected separately for Actives, Early Retirees and Medicare Retirees, and for medical claims, prescription drug claims, administrative costs, and aggregate premiums.

Plan Year 2023 premium increases were calculated separately for Actives, Early Retirees and Medicare Retirees, and for medical and prescription drug. Horizon experience was used to develop the PPO and HMO premium increases, and Optum experience was used for the prescription drug premium increases.

Projection Assumptions

1. Using 2021 incurred claims data paid through March 2022 supplied by Horizon and Optum, incurred claims were completed for Plan Year 2021 separately for each benefit plan, for medical and prescription drugs and for Actives, Early Retirees, and Medicare Retirees.
2. Capitation and other similar fixed claim charges were added to the incurred claims.
3. Estimated incurred claims in Plan Year 2021 were divided by average covered members to get average claims per member per year. Covered members were based on historical monthly census data and adjusted with assumptions for the number of members per coverage tier.
4. Aon's current guidance is to project medical claims using 2021 claims data normalized for the impacts of COVID-19. Estimated 2021 incurred claims used for projecting 2022 and 2023 are adjusted using a blend of actual vs. expected claims experience, Aon National COVID-19 medical claim factors, and Aon Northeast Regional COVID-19 medical claims factors. The Local Education medical normalization factor for Actives is 1.01, for Early Retirees is 1.02, and for Medicare Retirees is 1.04.
5. Claims per member were projected from the mid-point of the experience period to the mid-point of Plan Year 2023 using the annual trend rates listed in the Trend Analysis section of this document.
6. Aggregate claims for Plan Year 2023 are the product of projected enrollment and the projected claims per member.

7. Plan Year 2023 projected Medicare Advantage fully-insured premiums are based on rates provided by Aetna on June 17, 2022.
8. Prescription drug rebates for Plan Year 2021 are based on actual rebate payment data received from the State. Projected rebates for Plan Years 2022 and 2023 are based on information provided by Optum.
9. Prescription drug rebates paid through the medical plan for Plan Year 2021 are based on actual rebate payment data provided by Horizon. Prescription Drug Rebates estimated to be paid through the medical plan for Plan Years 2022 and 2023 are incorporated in the medical claim projections and are based on the actual Plan Year 2021 data provided and Horizon.
10. EGWP projections include monthly CMS capitation payments per Medicare-eligible Retiree for prescription drug coverage, prescription drug manufacturers' coverage gap reimbursement payments, an annual CMS payment for reinsurance on catastrophic claims, and CMS Low Income Cost Sharing (LICS) payments. These amounts are equal to recommendations from Optum for Plan Years 2021 and 2022.
 - a. CMS per capita payments: Plan Years 2021, 2022, and 2023 actual and expected CMS per capita payments were provided by Optum. The Plan Year 2023 CMS per capita payment is assumed to be a reduction of -\$5.23 Per Member Per Month (PMPM).
 - b. Coverage Gap Discount: Plan Years 2021, 2022, and 2023 actual and expected coverage gap payments were provided by Optum. The Plan Year 2023 credits are assumed to be \$83.58 PMPM.
 - c. Catastrophic Reinsurance: This payment has a very long lag, and the Plan Year 2021 credit is not expected to be fully paid until the beginning of Plan Year 2023. Plan Years 2021, 2022, and 2023 expected catastrophic reinsurance payments were provided by Optum. The Plan Year 2023 credits are assumed to be \$104.99 PMPM.
 - d. Low Income Cost Sharing (LICS): Plan Years 2021 and 2022 actual and expected LICS payments were provided by Optum. For Plan Year 2023, the subsidy payment is assumed to be \$0.97 PMPM.
11. The Plan Year 2023 projected Education Surcharge is approximately \$42.0 million, and this is used as a credit against projected Early Retiree costs.

12. Total SEHBP projected Plan Year 2023 claim costs are the sum of projected medical and prescription drug claims, capitation charges, payments from CMS related to EGWP Plus Wrap, the Education Surcharge and prescription drug rebates.
13. Base administrative fees per subscriber per month or per member per month are multiplied by the projected average enrollment for the applicable projection Plan Year. Plan Year 2023 prescription drug administrative fees were provided by Optum. Plan Year 2023 Horizon medical administrative fees are assumed to increase 5% over Plan Year 2022 fees.
14. Overhead charges, which are internal State of New Jersey administrative costs charged against the plans, are projected to be equal to \$6.3 million for Plan Year 2023. Actual Plan Year 2021 overhead charges were provided by the State and were used to project charges for Plan Year 2023.
15. All other fees and claim charges reported by the vendors have been reflected in the projections.
16. Projected investment income of \$0.6 million was used to reduce projected administrative costs for Plan Year 2023. Projected investment income was estimated based on provided by the State. Actual Plan Year 2021 investment income was provided by the State and was used to project charges for Plan Year 2023.
17. Based on participation in NJWELL, employers are eligible for a 1% discount on their premium rates in the following plan year. Plan Year 2021 participation showed 7 Local Education employers (a total of 336 Employees) were eligible for this discount. The Plan Year 2022 costs have been adjusted to reflect the total number of Employees who will receive the 1% premium discount in Plan Year 2022. 1% of employers are expected to be eligible for this discount in Plan Year 2023.

Claim Stabilization Reserve

1. Active premiums include no margin since the Active Claim Stabilization Reserve at the end of Plan Year 2023 is projected to be at or above the target reserve of 2.0 months of Plan costs as of 12/31/2022.
2. Retiree premiums include no margin since the State is responsible for covering the costs of approximately 90% of Education Retirees.
3. Projected Claim Stabilization Reserve at December 31, 2023 is based on the actual Claim Stabilization Reserve at June 30, 2021 provided by the Division.

4. The Claim Stabilization Reserve can be used to reduce the Active premiums. The Local Education Active premium rate changes reflect no reduction in the Claim Stabilization Reserve for Plan Year 2023.

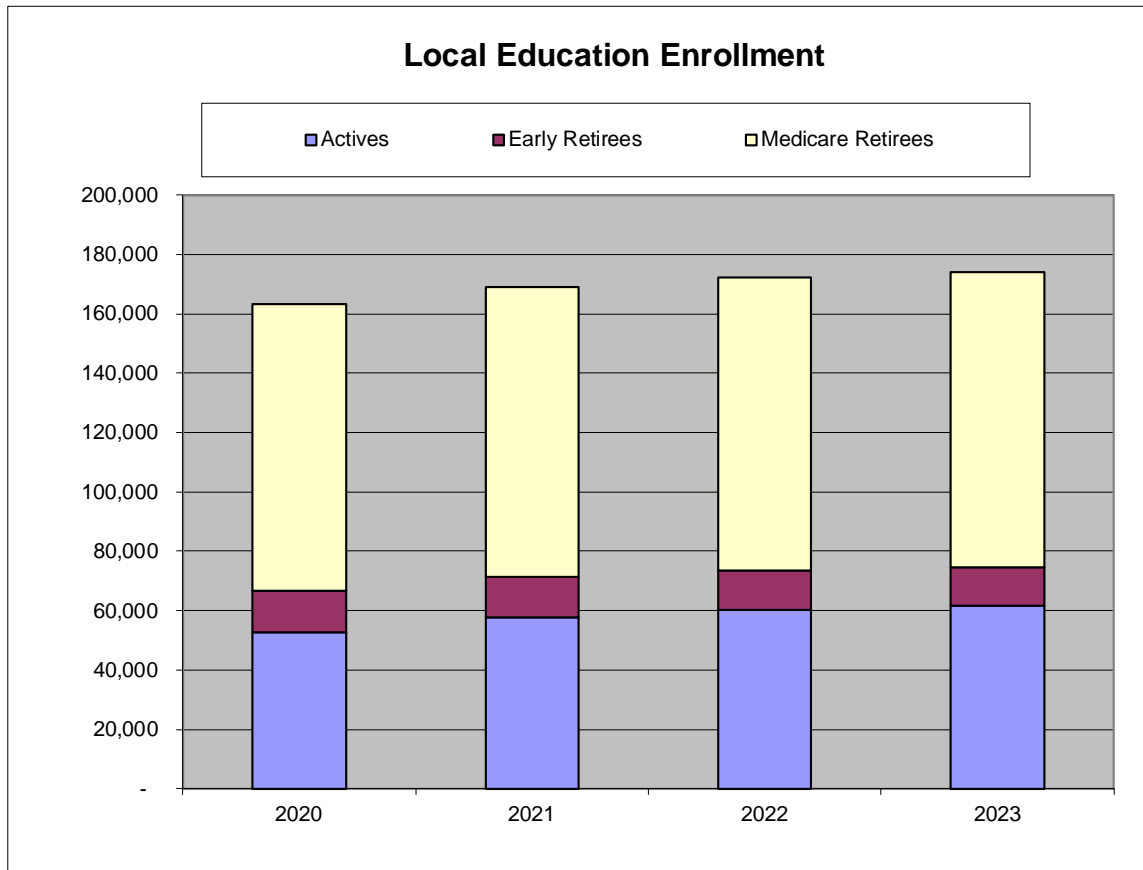
Projected Premiums

1. Plan Year 2021 SEHBP Active and Early Retiree medical and prescription drug experience was trended to Plan Year 2023 and adjusted for plan design changes. This plan experience was used to develop expected PPO10, PPO15, NJEHP per member per month plan costs. Projected GSTHP Plan Experience was developed based on expected relative cost differences compared to the NJEHP Plan. Plan Year 2023 fully insured Medicare Advantage premiums were provided by Aetna on June 17, 2022.
2. Aggregate Plan Year 2023 premium is calculated by multiplying projected Plan Year 2023 enrollment by Plan Year 2023 premium rates.

Data Assumptions

1. Claims: For medical and prescription drug claims, Aon is using claim files from each of the vendors which have claims incurred through December 31, 2021 and paid through March 31, 2022 for all groups.
2. Enrollment: Plan Year 2022 enrollment and Plan Year 2023 projected enrollment is based on actual census data provided by the State through April 2022. Actual calendar year 2021 census data from the Division is used for the 2021 exposure units in the cost analysis.

Exhibit 1A – Enrollment Projections

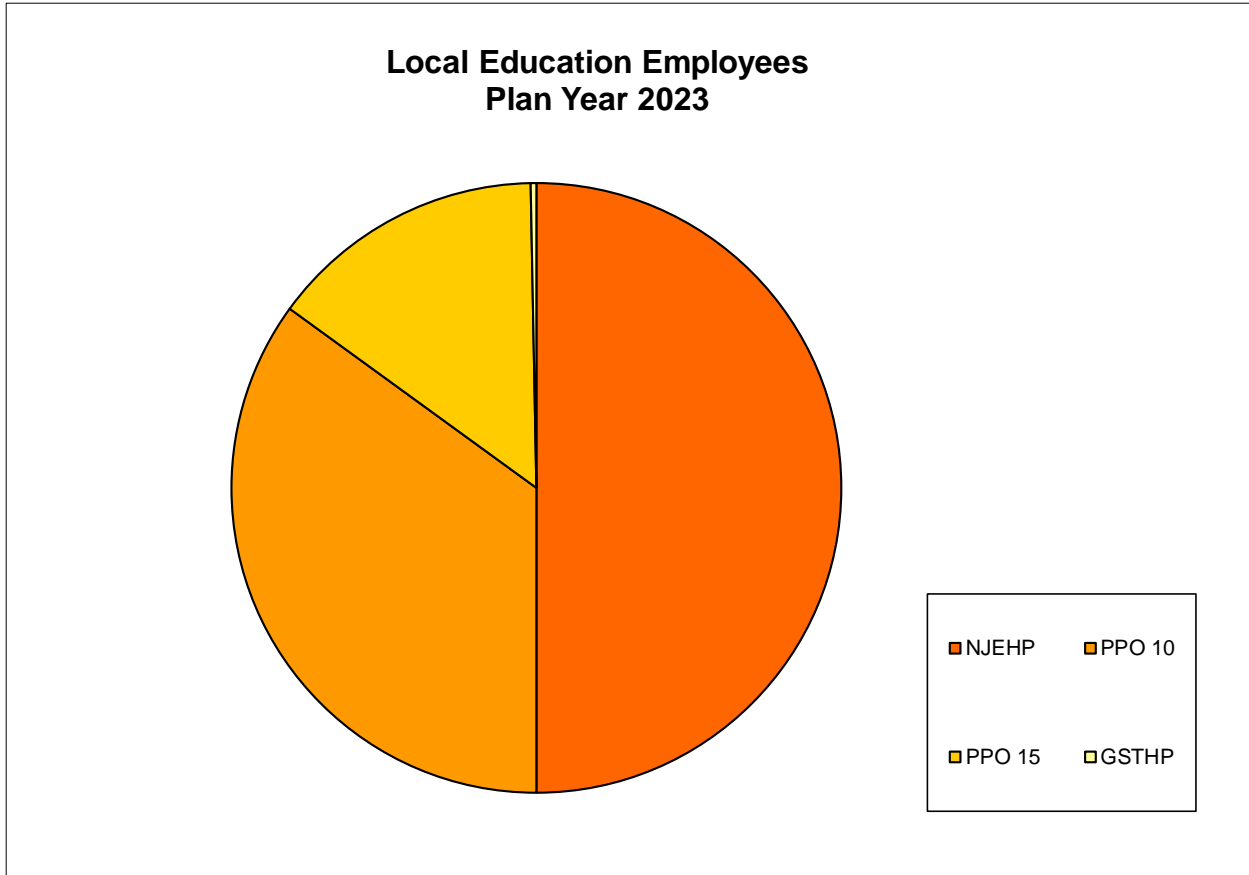


Annual Change in Enrollment

	Actual <u>2020 to 2021</u>	Actual <u>2021 to 2022</u>	Actual* <u>2022 to 2023</u>
Actives	9.1%	4.8%	2.0%
Early Retirees	(3.1%)	(3.3%)	(2.0%)
Medicare Retirees	1.5%	0.7%	1.0%

*Projected 2022 enrollment for Active Employees and Retirees was assumed to be consistent with actual census data provided by the State through April 2022.

Exhibit 1B Actives – Projected Plan Year 2023 Plan Distribution

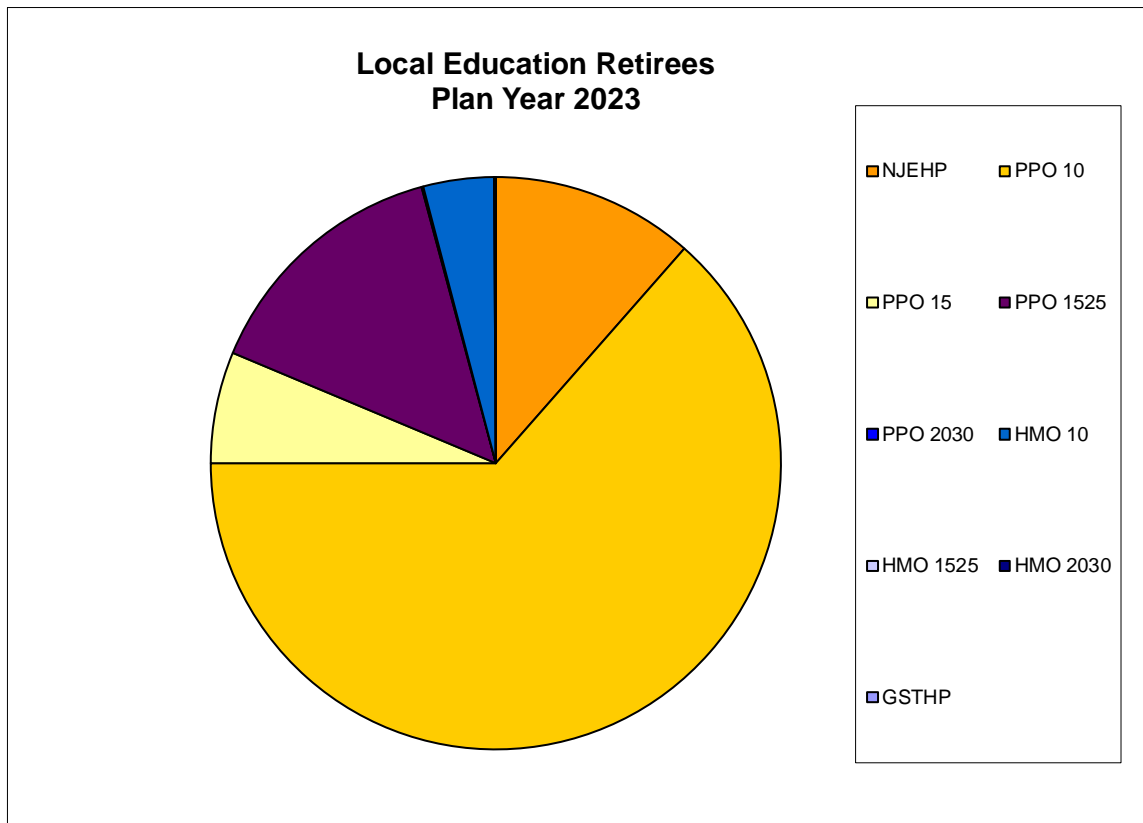


Assumes approximately 50% of Employees enroll in the NJEHP and less than 1% enroll in the Garden State Health Plan.

Assumes approximately 35% of Employees will remain in the \$10 copay plan.

Actives	Horizon
NJEHP	50.0%
PPO 10	35.0%
PPO 15	14.7%
GSTHP	0.3%
Total	100.0%

Exhibit 1B Early and Medicare Retirees – Projected Plan Year 2023 Plan Distribution



Assumes approximately 68% of Retirees will remain in the \$10 copay plans.

Assumes approximately 12% of Retirees enroll in the NJEHP and less than 1% of Retirees enroll in the Garden State Health Plan.

Assumes approximately 74% of Retirees will enroll in the Legacy plans and

Retirees	Horizon	Aetna	Total
NJEHP	11.5%	0.0%	11.5%
PPO 10	0.0%	63.5%	63.5%
PPO 15	0.0%	6.3%	6.3%
PPO 1525	14.5%	0.0%	14.5%
PPO 2030	0.1%	0.0%	0.1%
HMO 10	0.2%	3.8%	4.0%
HMO 1525	0.1%	0.0%	0.1%
HMO 2030	0.0%	0.0%	0.0%
GSTHP	0.0%	0.0%	0.0%
Total	26.4%	73.6%	100.0%

*Some plans may show 0.0% enrollment. These plans may include low enrollment which rounds to 0.0%.

Exhibit 1C Actives - 2022 Enrollment

2022 Estimated Average Number of Contracts					
	Single	Employee + Spouse	Family	Employee + Child(ren)	Total
EDUCATION - ACTIVE & COBRA					
Medical Plans					
NJEHP	10,537	3,069	9,601	2,863	26,070
NJ DIRECT10	6,606	4,135	9,150	2,195	22,085
NJ DIRECT15	3,674	2,171	5,100	1,139	12,083
GSTHP	43	13	5	35	95
Horizon Total	20,861	9,387	23,854	6,231	60,333

Exhibit 1C Early and Medicare Retirees – 2022 Enrollment

	2022 Estimated Average Number of Contracts				
	Single	Employee + Spouse	Family	Employee + Child(ren)	Total
EDUCATION RETIREES					
<u>Medical Plans</u>					
NJEHP	4,334	5,132	2,887	820	13,173
NJ DIRECT1525	9,187	6,557	248	110	16,102
NJ DIRECT2030	74	37	3	3	117
Horizon Legacy HMO (10)	102	63	11	2	178
Horizon 1525 HMO	35	22	1	1	58
Horizon 2030 HMO	5	3	0	0	8
GSTHP	3	1	1	1	5
Horizon Total	13,739	11,815	3,150	936	29,640
Aetna Freedom 10	40,182	28,737	1,328	641	70,888
Aetna Freedom 15	4,338	2,484	117	75	7,014
Aetna Legacy HMO (10)	2,582	1,562	63	36	4,243
Aetna 1525 HMO	28	7	1	1	37
Aetna Total	47,130	32,790	1,508	753	82,181
Total	60,869	44,605	4,658	1,689	111,821

Exhibit 2A – Medical Trend

	(A) Increase in Claims/Mem	(B) Benefit + RFP Changes	(C) = (A) - (B) Claim Trend
<u>PPO Active</u>			
01/01/2020 - 12/31/2020	(16.1%)	(8.3%)	(7.8%)
01/01/2021 - 12/31/2021	12.9%	(9.9%)	22.8%
Average			7.5%
Recommended 2023 Trend Assumption			6.0%

<u>PPO Early Retiree</u>			
01/01/2020 - 12/31/2020	(10.4%)	(8.0%)	(2.4%)
01/01/2021 - 12/31/2021	0.9%	(7.9%)	8.8%
Average			3.2%
Recommended 2023 Trend Assumption			5.5%

Normalizing Adjustments

1/1/2020: Hospital Discount
 1/1/2020: DEVA Audit Results
 1/1/2020: Medicare Eligibility Vendor
 3/1/2020: Fair Health National
 8/1/2020: Physical Therapy / Chiropractic Changes
 1/1/2021: EviCore
 1/1/2021: HMS

Exhibit 2B – Prescription Drug Trend

	(A) Increase in Claims/Mem	(B) Benefit + RFP Changes	(C) = (A) - (B) Claim Trend
Active Rx			
01/01/2020 - 12/31/2020	0.9%	(1.3%)	2.2%
01/01/2021 - 12/31/2021	6.2%	0.0%	6.2%
Average			4.2%
Recommended 2023 Trend Assumption			7.8%

Early Retiree Rx			
01/01/2020 - 12/31/2020	7.6%	(1.4%)	9.0%
01/01/2021 - 12/31/2021	4.2%	0.0%	4.2%
Average			6.6%
Recommended 2023 Trend Assumption			8.0%

EGWP Retiree Rx			
01/01/2020 - 12/31/2020	6.7%	(2.6%)	9.3%
01/01/2021 - 12/31/2021	1.7%	0.0%	1.7%
Average			5.5%
Recommended 2023 Trend Assumption			6.0%

Normalizing Adjustments:

1/1/2020: Rx RFP Results

1/1/2020: DEVA Audit Results

Exhibit 3A – Plan Year 2021 Aggregate Costs

Page 1 of 2

	Legacy Plans							
	Total	NJEHP	Aetna Freedom 10	Aetna Freedom 15	NJ DIRECT10	NJ DIRECT15	Aetna HMO	Horizon HMO
Employees and Retirees								
Average Medical Members	315,091	85,913	99,009	9,509	59,552	32,261	5,962	236
Incurred Medical Claims	\$1,656,437,000	\$618,676,000	\$149,475,000	\$12,106,000	\$549,995,000	\$265,088,000	\$10,821,000	\$674,000
Capitation	\$50,330,000	\$24,288,000	\$0	\$0	\$16,743,000	\$8,943,000	\$0	\$13,000
Incurred Prescription Drug Claims	\$1,085,799,000	\$147,035,000	\$567,387,000	\$53,913,000	\$93,629,000	\$47,160,000	\$37,771,000	\$1,051,000
Prescription Drug Rebates	(\$265,814,000)	(\$43,944,000)	(\$128,041,000)	(\$12,167,000)	(\$27,792,000)	(\$13,999,000)	(\$8,524,000)	(\$237,000)
EGWP Credits	(\$300,345,000)	\$0	(\$216,484,000)	(\$20,791,000)	\$0	\$0	(\$13,035,000)	(\$515,000)
Education Surcharge	(\$34,800,000)	(\$34,800,000)	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$60,216,000	\$21,197,000	\$11,874,000	\$1,151,000	\$11,969,000	\$6,543,000	\$720,000	\$67,000
Total Cost	\$2,251,823,000	\$732,452,000	\$384,211,000	\$34,212,000	\$644,544,000	\$313,735,000	\$27,753,000	\$1,053,000
Total Premium	\$2,186,806,000	\$763,659,000	\$402,622,000	\$36,418,000	\$547,663,000	\$284,168,000	\$26,271,000	\$1,544,000
Gain (Loss)	(\$65,217,000)	\$31,207,000	\$18,411,000	\$2,206,000	(\$96,881,000)	(\$29,567,000)	(\$1,482,000)	\$491,000
Employees								
Average Medical Members	144,807	52,994	N/A	N/A	59,552	32,261	N/A	N/A
Incurred Medical Claims	\$1,121,492,000	\$306,409,000	N/A	N/A	\$549,995,000	\$265,088,000	N/A	N/A
Capitation	\$40,410,000	\$14,724,000	N/A	N/A	\$16,743,000	\$8,943,000	N/A	N/A
Incurred Prescription Drug Claims	\$185,805,000	\$45,016,000	N/A	N/A	\$93,629,000	\$47,160,000	N/A	N/A
Prescription Drug Rebates	(\$55,153,000)	(\$13,362,000)	N/A	N/A	(\$27,792,000)	(\$13,999,000)	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$29,982,000	\$11,470,000	N/A	N/A	\$11,969,000	\$6,543,000	N/A	N/A
Total Cost	\$1,322,536,000	\$364,257,000	N/A	N/A	\$644,544,000	\$313,735,000	N/A	N/A
Total Premium	\$1,264,083,000	\$432,252,000	N/A	N/A	\$547,663,000	\$284,168,000	N/A	N/A
Gain (Loss)	(\$58,453,000)	\$67,995,000	N/A	N/A	(\$96,881,000)	(\$29,567,000)	N/A	N/A
Early Retirees								
Average Medical Members	32,919	32,919	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	\$312,267,000	\$312,267,000	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	\$9,564,000	\$9,564,000	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	\$102,019,000	\$102,019,000	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	(\$30,582,000)	(\$30,582,000)	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	(\$34,800,000)	(\$34,800,000)	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$9,727,000	\$9,727,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	\$368,195,000	\$368,195,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	\$331,407,000	\$331,407,000	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	(\$36,788,000)	(\$36,788,000)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Retirees								
Average Medical Members	137,365	N/A	99,009	9,509	N/A	N/A	5,962	236
Incurred Medical Claims	\$222,678,000	N/A	\$149,475,000	\$12,106,000	N/A	N/A	\$10,821,000	\$674,000
Capitation	\$356,000	N/A	\$0	\$0	N/A	N/A	\$0	\$13,000
Incurred Prescription Drug Claims	\$797,975,000	N/A	\$567,387,000	\$53,913,000	N/A	N/A	\$37,771,000	\$1,051,000
Prescription Drug Rebates	(\$180,079,000)	N/A	(\$128,041,000)	(\$12,167,000)	N/A	N/A	(\$8,524,000)	(\$237,000)
EGWP Credits	(\$300,345,000)	N/A	(\$216,484,000)	(\$20,791,000)	N/A	N/A	(\$13,035,000)	(\$515,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$20,507,000	N/A	\$11,874,000	\$1,151,000	N/A	N/A	\$720,000	\$67,000
Total Cost	\$561,092,000	N/A	\$384,211,000	\$34,212,000	N/A	N/A	\$27,753,000	\$1,053,000
Total Premium	\$591,116,000	N/A	\$402,622,000	\$36,418,000	N/A	N/A	\$26,271,000	\$1,544,000
Gain (Loss)	\$30,024,000	N/A	\$18,411,000	\$2,206,000	N/A	N/A	(\$1,482,000)	\$491,000

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3A – Plan Year 2021 Aggregate Costs

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	1525			2030	
	NJ DIRECT	Aetna HMO	Horizon HMO	NJ DIRECT	Horizon HMO
Employees and Retirees					
Average Medical Members	22,381	41	74	140	13
Incurred Medical Claims	\$49,025,000	\$57,000	\$204,000	\$289,000	\$27,000
Capitation	\$339,000	\$0	\$1,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$136,465,000	\$150,000	\$589,000	\$598,000	\$51,000
Prescription Drug Rebates	(\$30,796,000)	(\$34,000)	(\$133,000)	(\$135,000)	(\$12,000)
EGWP Credits	(\$48,936,000)	(\$89,000)	(\$161,000)	(\$306,000)	(\$28,000)
Education Surcharge	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$6,620,000	\$5,000	\$21,000	\$45,000	\$4,000
Total Cost	\$112,717,000	\$89,000	\$521,000	\$493,000	\$43,000
Total Premium	\$122,853,000	\$162,000	\$428,000	\$746,000	\$72,000
Gain (Loss)	\$10,136,000	\$73,000	(\$93,000)	\$253,000	\$29,000
Employees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Early Retirees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Medicare Retirees					
Average Medical Members	22,381	41	74	140	13
Incurred Medical Claims	\$49,025,000	\$57,000	\$204,000	\$289,000	\$27,000
Capitation	\$339,000	\$0	\$1,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$136,465,000	\$150,000	\$589,000	\$598,000	\$51,000
Prescription Drug Rebates	(\$30,796,000)	(\$34,000)	(\$133,000)	(\$135,000)	(\$12,000)
EGWP Credits	(\$48,936,000)	(\$89,000)	(\$161,000)	(\$306,000)	(\$28,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$6,620,000	\$5,000	\$21,000	\$45,000	\$4,000
Total Cost	\$112,717,000	\$89,000	\$521,000	\$493,000	\$43,000
Total Premium	\$122,853,000	\$162,000	\$428,000	\$746,000	\$72,000
Gain (Loss)	\$10,136,000	\$73,000	(\$93,000)	\$253,000	\$29,000

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3B – Plan Year 2022 Aggregate Costs

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	Total	NJEHP	GSTHP	Legacy Plans					
		Horizon PPO	Aetna PPO	Aetna Freedom 10	Aetna Freedom 15	NJ DIRECT10	NJ DIRECT15	Aetna HMO	Horizon HMO
Employees and Retirees									
Average Medical Members	321,134	94,273	187	99,920	9,470	57,109	31,329	5,751	239
Incurred Medical Claims	\$1,766,620,000	\$696,899,000	\$1,010,000	\$159,928,000	\$12,916,000	\$557,203,000	\$271,645,000	\$11,104,000	\$756,000
Capitation	\$54,910,000	\$28,193,000	\$48,000	\$0	\$0	\$17,062,000	\$9,227,000	\$0	\$14,000
Incurred Prescription Drug Claims	\$1,163,550,000	\$164,088,000	\$259,000	\$606,966,000	\$56,914,000	\$98,261,000	\$49,852,000	\$38,622,000	\$1,133,000
Prescription Drug Rebates	(\$290,707,000)	(\$51,441,000)	(\$82,000)	(\$137,203,000)	(\$12,865,000)	(\$31,047,000)	(\$15,751,000)	(\$8,730,000)	(\$256,000)
EGWP Credits	(\$299,801,000)	N/A	N/A	(\$216,704,000)	(\$20,538,000)	N/A	N/A	(\$12,473,000)	(\$519,000)
Education Surcharge	(\$38,700,000)	(\$38,690,000)	(\$10,000)	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$74,110,000	\$26,742,000	\$73,000	\$12,041,000	\$1,152,000	\$15,591,000	\$8,561,000	\$698,000	\$99,000
Total Cost	\$2,429,982,000	\$825,791,000	\$1,298,000	\$425,028,000	\$37,579,000	\$657,070,000	\$323,534,000	\$29,221,000	\$1,227,000
Total Premium	\$2,143,780,000	\$794,555,000	\$1,510,000	\$432,812,000	\$38,779,000	\$474,543,000	\$249,281,000	\$27,023,000	\$1,538,000
Gain (Loss)	(\$286,202,000)	(\$31,236,000)	\$212,000	\$7,784,000	\$1,200,000	(\$182,527,000)	(\$74,253,000)	(\$2,198,000)	\$311,000
Employees									
Average Medical Members	151,096	62,479	179	N/A	N/A	57,109	31,329	N/A	N/A
Incurred Medical Claims	\$1,207,617,000	\$377,831,000	\$938,000	N/A	N/A	\$557,203,000	\$271,645,000	N/A	N/A
Capitation	\$44,783,000	\$18,448,000	\$46,000	N/A	N/A	\$17,062,000	\$9,227,000	N/A	N/A
Incurred Prescription Drug Claims	\$206,017,000	\$57,673,000	\$231,000	N/A	N/A	\$98,261,000	\$49,852,000	N/A	N/A
Prescription Drug Rebates	(\$65,093,000)	(\$18,222,000)	(\$73,000)	N/A	N/A	(\$31,047,000)	(\$15,751,000)	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$41,996,000	\$17,775,000	\$69,000	N/A	N/A	\$15,591,000	\$8,561,000	N/A	N/A
Total Cost	\$1,435,320,000	\$453,505,000	\$1,211,000	N/A	N/A	\$657,070,000	\$323,534,000	N/A	N/A
Total Premium	\$1,189,373,000	\$464,121,000	\$1,428,000	N/A	N/A	\$474,543,000	\$249,281,000	N/A	N/A
Gain (Loss)	(\$245,947,000)	\$10,616,000	\$217,000	N/A	N/A	(\$182,527,000)	(\$74,253,000)	N/A	N/A
Early Retirees									
Average Medical Members	31,802	31,794	8	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	\$319,140,000	\$319,068,000	\$72,000	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	\$9,747,000	\$9,745,000	\$2,000	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	\$106,443,000	\$106,415,000	\$28,000	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	(\$33,228,000)	(\$33,219,000)	(\$9,000)	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	(\$38,700,000)	(\$38,690,000)	(\$10,000)	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$8,971,000	\$8,967,000	\$4,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	\$372,373,000	\$372,286,000	\$87,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	\$330,516,000	\$330,434,000	\$82,000	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	(\$41,857,000)	(\$41,852,000)	(\$5,000)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Retirees									
Average Medical Members	138,236	N/A	N/A	99,920	9,470	N/A	N/A	5,751	239
Incurred Medical Claims	\$239,863,000	N/A	N/A	\$159,928,000	\$12,916,000	N/A	N/A	\$11,104,000	\$756,000
Capitation	\$380,000	N/A	N/A	\$0	\$0	N/A	N/A	\$0	\$14,000
Incurred Prescription Drug Claims	\$851,090,000	N/A	N/A	\$606,966,000	\$56,914,000	N/A	N/A	\$38,622,000	\$1,133,000
Prescription Drug Rebates	(\$192,386,000)	N/A	N/A	(\$137,203,000)	(\$12,865,000)	N/A	N/A	(\$8,730,000)	(\$256,000)
EGWP Credits	(\$299,801,000)	N/A	N/A	(\$216,704,000)	(\$20,538,000)	N/A	N/A	(\$12,473,000)	(\$519,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$23,143,000	N/A	N/A	\$12,041,000	\$1,152,000	N/A	N/A	\$698,000	\$99,000
Total Cost	\$622,289,000	N/A	N/A	\$425,028,000	\$37,579,000	N/A	N/A	\$29,221,000	\$1,227,000
Total Premium	\$623,891,000	N/A	N/A	\$432,812,000	\$38,779,000	N/A	N/A	\$27,023,000	\$1,538,000
Gain (Loss)	\$1,602,000	N/A	N/A	\$7,784,000	\$1,200,000	N/A	N/A	(\$2,198,000)	\$311,000

*So

me plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3B – Plan Year 2022 Aggregate Costs

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	1525			2030	
	NJ DIRECT	Aetna HMO	Horizon HMO	NJ DIRECT	Horizon HMO
Employees and Retirees					
Average Medical Members	22,571	45	81	148	11
Incurred Medical Claims	\$54,483,000	\$67,000	\$248,000	\$336,000	\$25,000
Capitation	\$361,000	\$0	\$2,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$145,880,000	\$175,000	\$686,000	\$668,000	\$46,000
Prescription Drug Rebates	(\$32,976,000)	(\$40,000)	(\$155,000)	(\$151,000)	(\$10,000)
EGWP Credits	(\$48,951,000)	(\$97,000)	(\$176,000)	(\$320,000)	(\$23,000)
Education Surcharge	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$9,046,000	\$6,000	\$33,000	\$64,000	\$4,000
Total Cost	\$127,843,000	\$111,000	\$638,000	\$599,000	\$43,000
Total Premium	\$122,363,000	\$191,000	\$346,000	\$779,000	\$60,000
Gain (Loss)	(\$5,480,000)	\$80,000	(\$292,000)	\$180,000	\$17,000
Employees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Early Retirees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Medicare Retirees					
Average Medical Members	22,571	45	81	148	11
Incurred Medical Claims	\$54,483,000	\$67,000	\$248,000	\$336,000	\$25,000
Capitation	\$361,000	\$0	\$2,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$145,880,000	\$175,000	\$686,000	\$668,000	\$46,000
Prescription Drug Rebates	(\$32,976,000)	(\$40,000)	(\$155,000)	(\$151,000)	(\$10,000)
EGWP Credits	(\$48,951,000)	(\$97,000)	(\$176,000)	(\$320,000)	(\$23,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$9,046,000	\$6,000	\$33,000	\$64,000	\$4,000
Total Cost	\$127,843,000	\$111,000	\$638,000	\$599,000	\$43,000
Total Premium	\$122,363,000	\$191,000	\$346,000	\$779,000	\$60,000
Gain (Loss)	(\$5,480,000)	\$80,000	(\$292,000)	\$180,000	\$17,000

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3C – Plan Year 2023 Aggregate Costs

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	Total	NJEHP	GSTHP	Legacy Plans					
		Horizon PPO	Aetna PPO	Aetna Freedom 10	Aetna Freedom 15	NJ DIRECT10	NJ DIRECT15	Aetna HMO	Horizon HMO
Employees and Retirees									
Average Medical Members	324,164	105,126	381	100,861	9,557	55,696	23,413	5,808	242
Incurred Medical Claims	\$1,826,653,000	\$809,766,000	\$2,165,000	\$138,511,000	\$10,863,000	\$579,097,000	\$216,803,000	\$9,894,000	\$804,000
Capitation	\$58,797,000	\$33,278,000	\$103,000	\$0	\$0	\$17,680,000	\$7,332,000	\$0	\$14,000
Incurred Prescription Drug Claims	\$1,242,882,000	\$186,033,000	\$396,000	\$649,443,000	\$60,884,000	\$105,633,000	\$40,098,000	\$41,345,000	\$1,211,000
Prescription Drug Rebates	(\$333,090,000)	(\$65,900,000)	(\$139,000)	(\$154,265,000)	(\$14,462,000)	(\$36,767,000)	(\$13,956,000)	(\$9,821,000)	(\$288,000)
EGWP Credits	(\$308,629,000)	\$0	\$0	(\$223,069,000)	(\$21,137,000)	N/A	N/A	(\$12,845,000)	(\$534,000)
Education Surcharge	(\$42,044,000)	(\$42,023,000)	(\$21,000)	\$0	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$74,127,000	\$29,427,000	\$140,000	\$12,227,000	\$1,170,000	\$14,629,000	\$6,151,000	\$709,000	\$103,000
Total Cost	\$2,518,696,000	\$950,581,000	\$2,644,000	\$422,847,000	\$37,318,000	\$680,272,000	\$256,428,000	\$29,282,000	\$1,310,000
Total Premium	\$2,518,394,000	\$1,068,919,000	\$2,950,000	\$430,867,000	\$38,565,000	\$583,408,000	\$234,368,000	\$26,958,000	\$1,621,000
Gain (Loss)	(\$302,000)	\$118,338,000	\$306,000	\$8,020,000	\$1,247,000	(\$96,864,000)	(\$22,060,000)	(\$2,324,000)	\$311,000
Employees									
Average Medical Members	153,231	73,757	365	N/A	N/A	55,696	23,413	N/A	N/A
Incurred Medical Claims	\$1,274,525,000	\$476,608,000	\$2,017,000	N/A	N/A	\$579,097,000	\$216,803,000	N/A	N/A
Capitation	\$48,246,000	\$23,135,000	\$99,000	N/A	N/A	\$17,680,000	\$7,332,000	N/A	N/A
Incurred Prescription Drug Claims	\$218,712,000	\$72,643,000	\$338,000	N/A	N/A	\$105,633,000	\$40,098,000	N/A	N/A
Prescription Drug Rebates	(\$76,125,000)	(\$25,284,000)	(\$118,000)	N/A	N/A	(\$36,767,000)	(\$13,956,000)	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$41,648,000	\$20,735,000	\$133,000	N/A	N/A	\$14,629,000	\$6,151,000	N/A	N/A
Total Cost	\$1,507,006,000	\$567,837,000	\$2,469,000	N/A	N/A	\$680,272,000	\$256,428,000	N/A	N/A
Total Premium	\$1,506,748,000	\$686,182,000	\$2,790,000	N/A	N/A	\$583,408,000	\$234,368,000	N/A	N/A
Gain (Loss)	(\$258,000)	\$118,345,000	\$321,000	N/A	N/A	(\$96,864,000)	(\$22,060,000)	N/A	N/A
Early Retirees									
Average Medical Members	31,385	31,369	16	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	\$333,306,000	\$333,158,000	\$148,000	N/A	N/A	N/A	N/A	N/A	N/A
Capitation	\$10,147,000	\$10,143,000	\$4,000	N/A	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	\$113,448,000	\$113,390,000	\$58,000	N/A	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	(\$40,637,000)	(\$40,616,000)	(\$21,000)	N/A	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Education Surcharge	(\$42,044,000)	(\$42,023,000)	(\$21,000)	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$8,699,000	\$8,692,000	\$7,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Cost	\$382,919,000	\$382,744,000	\$175,000	N/A	N/A	N/A	N/A	N/A	N/A
Total Premium	\$382,897,000	\$382,737,000	\$160,000	N/A	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	(\$22,000)	(\$7,000)	(\$15,000)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Retirees									
Average Medical Members	139,548	N/A	N/A	100,861	9,557	N/A	N/A	5,808	242
Incurred Medical Claims	\$218,822,000	N/A	N/A	\$138,511,000	\$10,863,000	N/A	N/A	\$9,894,000	\$804,000
Capitation	\$404,000	N/A	N/A	\$0	\$0	N/A	N/A	\$0	\$14,000
Incurred Prescription Drug Claims	\$910,722,000	N/A	N/A	\$649,443,000	\$60,884,000	N/A	N/A	\$41,345,000	\$1,211,000
Prescription Drug Rebates	(\$216,328,000)	N/A	N/A	(\$154,265,000)	(\$14,462,000)	N/A	N/A	(\$9,821,000)	(\$288,000)
EGWP Credits	(\$308,629,000)	N/A	N/A	(\$223,069,000)	(\$21,137,000)	N/A	N/A	(\$12,845,000)	(\$534,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$23,780,000	N/A	N/A	\$12,227,000	\$1,170,000	N/A	N/A	\$709,000	\$103,000
Total Cost	\$628,771,000	N/A	N/A	\$422,847,000	\$37,318,000	N/A	N/A	\$29,282,000	\$1,310,000
Total Premium	\$628,749,000	N/A	N/A	\$430,867,000	\$38,565,000	N/A	N/A	\$26,958,000	\$1,621,000
Gain (Loss)	(\$22,000)	N/A	N/A	\$8,020,000	\$1,247,000	N/A	N/A	(\$2,324,000)	\$311,000

*Some

plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 3C – Projected Plan Year 2023 Aggregate Costs

Page 2 of 2

	1525			2030	
	NJ DIRECT	Aetna HMO	Horizon HMO	NJ DIRECT	Horizon HMO
Employees and Retirees					
Average Medical Members	22,793	45	82	149	11
Incurred Medical Claims	\$58,044,000	\$58,000	\$264,000	\$358,000	\$26,000
Capitation	\$385,000	\$0	\$2,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$156,153,000	\$187,000	\$734,000	\$716,000	\$49,000
Prescription Drug Rebates	(\$37,092,000)	(\$44,000)	(\$174,000)	(\$170,000)	(\$12,000)
EGWP Credits	(\$50,409,000)	(\$100,000)	(\$181,000)	(\$330,000)	(\$24,000)
Education Surcharge	\$0	\$0	\$0	\$0	\$0
Administrative Fees	\$9,459,000	\$6,000	\$34,000	\$67,000	\$5,000
Total Cost	\$136,540,000	\$107,000	\$679,000	\$643,000	\$45,000
Total Premium	\$129,294,000	\$190,000	\$367,000	\$824,000	\$63,000
Gain (Loss)	(\$7,246,000)	\$83,000	(\$312,000)	\$181,000	\$18,000
Employees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Early Retirees					
Average Medical Members	N/A	N/A	N/A	N/A	N/A
Incurred Medical Claims	N/A	N/A	N/A	N/A	N/A
Capitation	N/A	N/A	N/A	N/A	N/A
Incurred Prescription Drug Claims	N/A	N/A	N/A	N/A	N/A
Prescription Drug Rebates	N/A	N/A	N/A	N/A	N/A
EGWP Credits	N/A	N/A	N/A	N/A	N/A
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	N/A	N/A	N/A	N/A	N/A
Total Cost	N/A	N/A	N/A	N/A	N/A
Total Premium	N/A	N/A	N/A	N/A	N/A
Gain (Loss)	N/A	N/A	N/A	N/A	N/A
Medicare Retirees					
Average Medical Members	22,793	45	82	149	11
Incurred Medical Claims	\$58,044,000	\$58,000	\$264,000	\$358,000	\$26,000
Capitation	\$385,000	\$0	\$2,000	\$2,000	\$1,000
Incurred Prescription Drug Claims	\$156,153,000	\$187,000	\$734,000	\$716,000	\$49,000
Prescription Drug Rebates	(\$37,092,000)	(\$44,000)	(\$174,000)	(\$170,000)	(\$12,000)
EGWP Credits	(\$50,409,000)	(\$100,000)	(\$181,000)	(\$330,000)	(\$24,000)
Education Surcharge	N/A	N/A	N/A	N/A	N/A
Administrative Fees	\$9,459,000	\$6,000	\$34,000	\$67,000	\$5,000
Total Cost	\$136,540,000	\$107,000	\$679,000	\$643,000	\$45,000
Total Premium	\$129,294,000	\$190,000	\$367,000	\$824,000	\$63,000
Gain (Loss)	(\$7,246,000)	\$83,000	(\$312,000)	\$181,000	\$18,000

*Some plans may show \$0 in certain cost categories. These plans may have costs which are less than \$500 and round to \$0. The Incurred Medical Claims cost category reflects the Medicare Advantage plan premiums for the Fully Insured Medicare Retiree medical plan options.

Exhibit 4A – Plan Year 2023 Monthly Active Premiums

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	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Medical Coverage Only</u>				
Single	\$896.84	\$704.64	\$988.59	\$941.11
Employee+Spouse	\$1,793.68	\$1,409.27	\$1,977.18	\$1,882.22
Family	\$2,564.96	\$2,015.26	\$2,827.37	\$2,691.58
Employee+Child(ren)	\$1,668.12	\$1,310.62	\$1,838.78	\$1,750.47
Adult Child Rate	\$786.71	\$618.10	\$867.19	\$825.55
	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Rx Card</u>				
Single	\$124.77	\$121.37	\$182.65	\$182.65
Employee+Spouse	\$249.54	\$242.74	\$365.30	\$365.30
Family	\$356.84	\$347.12	\$522.38	\$522.38
Employee+Child(ren)	\$232.07	\$225.75	\$339.73	\$339.73
Adult Child Rate	\$109.45	\$106.47	\$160.22	\$160.22
	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Rx with Medical Coverage</u>				
Single	\$1,021.61	\$826.01	\$1,158.91	\$1,109.83
Employee+Spouse	\$2,043.22	\$1,652.02	\$2,317.82	\$2,219.65
Family	\$2,921.80	\$2,362.39	\$3,314.48	\$3,174.11
Employee+Child(ren)	\$1,900.19	\$1,536.38	\$2,155.57	\$2,064.28
Adult Child Rate	\$896.15	\$724.58	\$1,016.59	\$973.54

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023.

Exhibit 4B – Plan Year 2023 Annual Active Premiums

Page 1 of 1

	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Medical Coverage Only</u>				
Single	\$10,762	\$8,456	\$11,863	\$11,293
Employee+Spouse	\$21,524	\$16,911	\$23,726	\$22,587
Family	\$30,780	\$24,183	\$33,928	\$32,299
Employee+Child(ren)	\$20,017	\$15,727	\$22,065	\$21,006
Adult Child Rate	\$9,441	\$7,417	\$10,406	\$9,907
	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Rx Card</u>				
Single	\$1,497	\$1,456	\$2,192	\$2,192
Employee+Spouse	\$2,994	\$2,913	\$4,384	\$4,384
Family	\$4,282	\$4,165	\$6,269	\$6,269
Employee+Child(ren)	\$2,785	\$2,709	\$4,077	\$4,077
Adult Child Rate	\$1,313	\$1,278	\$1,923	\$1,923
	NJEHP	GSTHP	Legacy Plans	
	Horizon PPO	Aetna PPO	Horizon DIR10	Horizon DIR15
<u>Rx with Medical Coverage</u>				
Single	\$12,259	\$9,912	\$13,907	\$13,318
Employee+Spouse	\$24,519	\$19,824	\$27,814	\$26,636
Family	\$35,062	\$28,349	\$39,774	\$38,089
Employee+Child(ren)	\$22,802	\$18,437	\$25,867	\$24,771
Adult Child Rate	\$10,754	\$8,695	\$12,199	\$11,682

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023. The annual premiums shown above are for illustrative purposes.

Exhibit 4C – Plan Year 2023 Monthly Retiree Premiums

Page 1 of 3

	NJHP		GSTHP		Legacy Plans						Legacy HMO (Aetna Medicare Subscriber)		
	Horizon Early Retiree Subscriber	Aetna Early Retiree Subscriber	PPO10			PPO15			Legacy HMO				
			Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium		
Total Premium													
Single - 0 Medicare	\$1,189.28	\$955.07	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28	N/A	\$1,189.28
Single - 1 Medicare	N/A	N/A	N/A	\$359.19	\$359.19	N/A	\$339.47	\$339.47	N/A	\$390.03	\$390.03	N/A	\$390.03
EE+Spouse - 0 Medicare	\$2,592.60	\$2,082.05	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60	N/A	\$2,592.60
EE+Spouse - 1 Medicare	\$1,403.32	\$1,126.98	\$1,403.32	\$359.19	\$1,762.51	\$1,403.32	\$339.47	\$1,742.79	\$1,403.32	\$390.03	\$1,793.35	\$390.03	\$1,793.35
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$718.38	\$718.40	N/A	\$678.94	\$678.96	N/A	\$780.06	\$780.04	N/A	\$780.04
Family - 0 Medicare	\$2,949.38	\$2,368.56	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38	N/A	\$2,949.38
Family - 1 Medicare	\$1,760.10	\$1,413.49	\$1,760.10	\$359.19	\$2,119.29	\$1,760.10	\$339.47	\$2,099.57	\$1,760.10	\$390.03	\$2,150.13	\$390.03	\$2,150.13
Family - 2 Medicare	\$570.82	\$458.42	\$570.82	\$718.38	\$1,289.20	\$570.82	\$678.94	\$1,249.76	\$570.82	\$780.06	\$1,350.88	\$780.06	\$1,350.88
EE+Ch - 0 Medicare	\$1,664.98	\$1,337.10	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98	N/A	\$1,664.98
EE+Ch - 1 Medicare	\$475.70	\$382.03	\$475.70	\$359.19	\$834.89	\$475.70	\$339.47	\$815.17	\$475.70	\$390.03	\$865.73	\$390.03	\$865.73
Medical Premium													
Single - 0 Medicare	\$960.66	\$764.47	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66	N/A	\$960.66
Single - 1 Medicare	N/A	N/A	N/A	\$114.44	\$114.44	N/A	\$94.72	\$94.72	N/A	\$141.96	\$141.96	N/A	\$141.96
EE+Spouse - 0 Medicare	\$2,094.22	\$1,666.54	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22	N/A	\$2,094.22
EE+Spouse - 1 Medicare	\$1,133.56	\$902.07	\$1,133.56	\$114.44	\$1,248.00	\$1,133.56	\$94.72	\$1,228.28	\$1,133.56	\$141.96	\$1,275.52	\$141.96	\$1,275.52
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$228.88	\$228.88	N/A	\$189.44	\$189.44	N/A	\$283.92	\$283.92	N/A	\$283.92
Family - 0 Medicare	\$2,382.43	\$1,895.88	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43	N/A	\$2,382.43
Family - 1 Medicare	\$1,421.77	\$1,131.41	\$1,421.77	\$114.44	\$1,536.21	\$1,421.77	\$94.72	\$1,516.49	\$1,421.77	\$141.96	\$1,563.73	\$141.96	\$1,563.73
Family - 2 Medicare	\$461.11	\$366.94	\$461.11	\$228.88	\$689.99	\$461.11	\$189.44	\$650.55	\$461.11	\$283.92	\$745.03	\$283.92	\$745.03
EE+Ch - 0 Medicare	\$1,344.91	\$1,070.26	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91	N/A	\$1,344.91
EE+Ch - 1 Medicare	\$384.25	\$305.79	\$384.25	\$114.44	\$498.69	\$384.25	\$94.72	\$478.97	\$384.25	\$141.96	\$526.21	\$141.96	\$526.21
Rx Premium													
Single - 0 Medicare	\$228.62	\$190.60	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62	N/A	\$228.62
Single - 1 Medicare	N/A	N/A	N/A	\$244.75	\$244.75	N/A	\$244.75	\$244.75	N/A	\$248.07	\$248.07	N/A	\$248.07
EE+Spouse - 0 Medicare	\$498.38	\$415.51	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38	N/A	\$498.38
EE+Spouse - 1 Medicare	\$269.76	\$224.91	\$269.76	\$244.75	\$514.51	\$269.76	\$244.75	\$514.51	\$269.76	\$248.07	\$517.83	\$248.07	\$517.83
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$489.50	\$489.52	N/A	\$489.50	\$489.52	N/A	\$496.14	\$496.12	N/A	\$496.12
Family - 0 Medicare	\$566.95	\$472.68	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95	N/A	\$566.95
Family - 1 Medicare	\$338.33	\$282.08	\$338.33	\$244.75	\$583.08	\$338.33	\$244.75	\$583.08	\$338.33	\$248.07	\$586.40	\$248.07	\$586.40
Family - 2 Medicare	\$109.71	\$91.48	\$109.71	\$489.50	\$599.21	\$109.71	\$489.50	\$599.21	\$109.71	\$496.14	\$605.85	\$496.14	\$605.85
EE+Ch - 0 Medicare	\$320.07	\$266.84	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07	N/A	\$320.07
EE+Ch - 1 Medicare	\$91.45	\$76.24	\$91.45	\$244.75	\$336.20	\$91.45	\$244.75	\$336.20	\$91.45	\$248.07	\$339.52	\$248.07	\$339.52

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 4C – Plan Year 2023 Monthly Retiree Premiums

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	Legacy HMO			1525 PPO			1525 HMO (Aetna Medicare Subscriber)		
	Legacy HMO			1525 PPO			1525 HMO		
	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium
Total Premium									
Single - 0 Medicare	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28
Single - 1 Medicare	N/A	\$562.40	\$562.40	N/A	\$475.82	\$475.82	N/A	\$354.48	\$354.48
EE+Spouse - 0 Medicare	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60
EE+Spouse - 1 Medicare	\$1,403.32	\$562.40	\$1,965.72	\$1,403.32	\$475.82	\$1,879.14	\$1,403.32	\$354.48	\$1,757.80
EE+Spouse - 2 Medicare	N/A	\$1,124.76	\$1,124.76	N/A	\$951.63	\$951.63	N/A	\$708.96	\$708.98
Family - 0 Medicare	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38
Family - 1 Medicare	\$1,760.10	\$562.40	\$2,322.50	\$1,760.10	\$475.82	\$2,235.92	\$1,760.10	\$354.48	\$2,114.58
Family - 2 Medicare	\$570.86	\$1,124.76	\$1,695.62	\$570.83	\$951.63	\$1,522.46	\$570.82	\$708.96	\$1,279.78
EE+Ch - 0 Medicare	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98
EE+Ch - 1 Medicare	\$475.70	\$562.40	\$1,038.10	\$475.70	\$475.82	\$951.52	\$475.70	\$354.48	\$830.18
Medical Premium									
Single - 0 Medicare	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66
Single - 1 Medicare	N/A	\$314.33	\$314.33	N/A	\$238.64	\$238.64	N/A	\$106.53	\$106.53
EE+Spouse - 0 Medicare	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22
EE+Spouse - 1 Medicare	\$1,133.56	\$314.33	\$1,447.89	\$1,133.56	\$238.64	\$1,372.20	\$1,133.56	\$106.53	\$1,240.09
EE+Spouse - 2 Medicare	N/A	\$628.64	\$628.64	N/A	\$477.26	\$477.26	N/A	\$213.06	\$213.06
Family - 0 Medicare	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43
Family - 1 Medicare	\$1,421.77	\$314.33	\$1,736.10	\$1,421.77	\$238.64	\$1,660.41	\$1,421.77	\$106.53	\$1,528.30
Family - 2 Medicare	\$461.13	\$628.64	\$1,089.77	\$461.13	\$477.26	\$938.39	\$461.11	\$213.06	\$674.17
EE+Ch - 0 Medicare	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91
EE+Ch - 1 Medicare	\$384.25	\$314.33	\$698.58	\$384.25	\$238.64	\$622.89	\$384.25	\$106.53	\$490.78
Rx Premium									
Single - 0 Medicare	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62
Single - 1 Medicare	N/A	\$248.07	\$248.07	N/A	\$237.18	\$237.18	N/A	\$247.95	\$247.95
EE+Spouse - 0 Medicare	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38
EE+Spouse - 1 Medicare	\$269.76	\$248.07	\$517.83	\$269.76	\$237.18	\$506.94	\$269.76	\$247.95	\$517.71
EE+Spouse - 2 Medicare	N/A	\$496.12	\$496.12	N/A	\$474.37	\$474.37	N/A	\$495.90	\$495.92
Family - 0 Medicare	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95
Family - 1 Medicare	\$338.33	\$248.07	\$586.40	\$338.33	\$237.18	\$575.51	\$338.33	\$247.95	\$586.28
Family - 2 Medicare	\$109.73	\$496.12	\$605.85	\$109.70	\$474.37	\$584.07	\$109.71	\$495.90	\$605.61
EE+Ch - 0 Medicare	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07
EE+Ch - 1 Medicare	\$91.45	\$248.07	\$339.52	\$91.45	\$237.18	\$328.63	\$91.45	\$247.95	\$339.40

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 4C – Plan Year 2023 Monthly Retiree Premiums

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	1525 HMO			2030 Plans					
	1525 HMO			Horizon PPO			Horizon HMO		
	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium
Total Premium									
Single - 0 Medicare	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28	\$1,189.28	N/A	\$1,189.28
Single - 1 Medicare	N/A	\$377.44	\$377.44	N/A	\$463.70	\$463.70	N/A	\$489.48	\$489.48
EE+Spouse - 0 Medicare	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60	\$2,592.60	N/A	\$2,592.60
EE+Spouse - 1 Medicare	\$1,403.32	\$377.44	\$1,780.76	\$1,403.32	\$463.70	\$1,867.02	\$1,403.32	\$489.48	\$1,892.80
EE+Spouse - 2 Medicare	N/A	\$754.90	\$754.90	N/A	\$927.43	\$927.43	N/A	\$978.94	\$978.94
Family - 0 Medicare	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38	\$2,949.38	N/A	\$2,949.38
Family - 1 Medicare	\$1,760.10	\$377.44	\$2,137.54	\$1,760.10	\$463.70	\$2,223.80	\$1,760.10	\$489.48	\$2,249.58
Family - 2 Medicare	\$570.80	\$754.90	\$1,325.70	\$570.79	\$927.43	\$1,498.22	\$570.84	\$978.94	\$1,549.78
EE+Ch - 0 Medicare	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98	\$1,664.98	N/A	\$1,664.98
EE+Ch - 1 Medicare	\$475.70	\$377.44	\$853.14	\$475.70	\$463.70	\$939.40	\$475.70	\$489.48	\$965.18
Medical Premium									
Single - 0 Medicare	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66	\$960.66	N/A	\$960.66
Single - 1 Medicare	N/A	\$129.49	\$129.49	N/A	\$224.27	\$224.27	N/A	\$239.16	\$239.16
EE+Spouse - 0 Medicare	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22	\$2,094.22	N/A	\$2,094.22
EE+Spouse - 1 Medicare	\$1,133.56	\$129.49	\$1,263.05	\$1,133.56	\$224.27	\$1,357.83	\$1,133.56	\$239.16	\$1,372.72
EE+Spouse - 2 Medicare	N/A	\$258.98	\$258.98	N/A	\$448.55	\$448.55	N/A	\$478.29	\$478.29
Family - 0 Medicare	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43	\$2,382.43	N/A	\$2,382.43
Family - 1 Medicare	\$1,421.77	\$129.49	\$1,551.26	\$1,421.77	\$224.27	\$1,646.04	\$1,421.77	\$239.16	\$1,660.93
Family - 2 Medicare	\$461.11	\$258.98	\$720.09	\$461.10	\$448.55	\$909.65	\$461.14	\$478.29	\$939.43
EE+Ch - 0 Medicare	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91	\$1,344.91	N/A	\$1,344.91
EE+Ch - 1 Medicare	\$384.25	\$129.49	\$513.74	\$384.25	\$224.27	\$608.52	\$384.25	\$239.16	\$623.41
Rx Premium									
Single - 0 Medicare	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62	\$228.62	N/A	\$228.62
Single - 1 Medicare	N/A	\$247.95	\$247.95	N/A	\$239.43	\$239.43	N/A	\$250.32	\$250.32
EE+Spouse - 0 Medicare	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38	\$498.38	N/A	\$498.38
EE+Spouse - 1 Medicare	\$269.76	\$247.95	\$517.71	\$269.76	\$239.43	\$509.19	\$269.76	\$250.32	\$520.08
EE+Spouse - 2 Medicare	N/A	\$495.92	\$495.92	N/A	\$478.88	\$478.88	N/A	\$500.65	\$500.65
Family - 0 Medicare	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95	\$566.95	N/A	\$566.95
Family - 1 Medicare	\$338.33	\$247.95	\$586.28	\$338.33	\$239.43	\$577.76	\$338.33	\$250.32	\$588.65
Family - 2 Medicare	\$109.69	\$495.92	\$605.61	\$109.69	\$478.88	\$588.57	\$109.70	\$500.65	\$610.35
EE+Ch - 0 Medicare	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07	\$320.07	N/A	\$320.07
EE+Ch - 1 Medicare	\$91.45	\$247.95	\$339.40	\$91.45	\$239.43	\$330.88	\$91.45	\$250.32	\$341.77

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 4D – Plan Year 2023 Annual Retiree Premiums

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	NJHP		GSTHP		Legacy Plans						Legacy HMO (Aetna Medicare Subscriber)		
	Horizon Early Retiree Subscriber	Aetna Early Retiree Subscriber	PPO10			PPO15			Legacy HMO				
			Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium		
Total Premium													
Single - 0 Medicare	\$14,271	\$11,461	\$14,271	N/A	\$14,271	\$14,271	\$14,271	N/A	\$14,271	\$14,271	N/A	\$14,271	\$14,271
Single - 1 Medicare	N/A	N/A	N/A	\$4,310	\$4,310	N/A	N/A	\$4,074	\$4,074	N/A	\$4,680	\$4,680	\$4,680
EE+Spouse - 0 Medicare	\$31,111	\$24,985	\$31,111	N/A	\$31,111	\$31,111	\$31,111	N/A	\$31,111	\$31,111	N/A	\$31,111	\$31,111
EE+Spouse - 1 Medicare	\$16,840	\$13,524	\$16,840	\$4,310	\$21,150	\$16,840	\$16,840	\$4,074	\$20,914	\$16,840	\$4,680	\$21,520	\$21,520
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$8,621	\$8,621	N/A	N/A	\$8,147	\$8,148	N/A	\$9,361	\$9,360	\$9,360
Family - 0 Medicare	\$35,393	\$28,423	\$35,393	N/A	\$35,393	\$35,393	\$35,393	N/A	\$35,393	\$35,393	N/A	\$35,393	\$35,393
Family - 1 Medicare	\$21,121	\$16,962	\$21,121	\$4,310	\$25,431	\$21,121	\$21,121	\$4,074	\$25,195	\$21,121	\$4,680	\$25,802	\$25,802
Family - 2 Medicare	\$6,850	\$5,501	\$6,850	\$8,621	\$15,470	\$6,850	\$6,850	\$8,147	\$14,997	\$6,850	\$9,361	\$16,211	\$16,211
EE+Ch - 0 Medicare	\$19,980	\$16,045	\$19,980	N/A	\$19,980	\$19,980	\$19,980	N/A	\$19,980	\$19,980	N/A	\$19,980	\$19,980
EE+Ch - 1 Medicare	\$5,708	\$4,584	\$5,708	\$4,310	\$10,019	\$5,708	\$5,708	\$4,074	\$9,782	\$5,708	\$4,680	\$10,389	\$10,389
Medical Premium													
Single - 0 Medicare	\$11,528	\$9,174	\$11,528	N/A	\$11,528	\$11,528	\$11,528	N/A	\$11,528	\$11,528	N/A	\$11,528	\$11,528
Single - 1 Medicare	N/A	N/A	N/A	\$1,373	\$1,373	N/A	N/A	\$1,137	\$1,137	N/A	\$1,704	\$1,704	\$1,704
EE+Spouse - 0 Medicare	\$25,131	\$19,998	\$25,131	N/A	\$25,131	\$25,131	\$25,131	N/A	\$25,131	\$25,131	N/A	\$25,131	\$25,131
EE+Spouse - 1 Medicare	\$13,603	\$10,825	\$13,603	\$1,373	\$14,976	\$13,603	\$13,603	\$1,137	\$14,739	\$13,603	\$1,704	\$15,306	\$15,306
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$2,747	\$2,747	N/A	N/A	\$2,273	\$2,273	N/A	\$3,407	\$3,407	\$3,407
Family - 0 Medicare	\$28,589	\$22,751	\$28,589	N/A	\$28,589	\$28,589	\$28,589	N/A	\$28,589	\$28,589	N/A	\$28,589	\$28,589
Family - 1 Medicare	\$17,061	\$13,577	\$17,061	\$1,373	\$18,434	\$17,061	\$17,061	\$1,137	\$18,198	\$17,061	\$1,704	\$18,765	\$18,765
Family - 2 Medicare	\$5,533	\$4,403	\$5,533	\$2,747	\$8,280	\$5,533	\$5,533	\$2,273	\$7,807	\$5,533	\$3,407	\$8,940	\$8,940
EE+Ch - 0 Medicare	\$16,139	\$12,843	\$16,139	N/A	\$16,139	\$16,139	\$16,139	N/A	\$16,139	\$16,139	N/A	\$16,139	\$16,139
EE+Ch - 1 Medicare	\$4,611	\$3,669	\$4,611	\$1,373	\$5,984	\$4,611	\$4,611	\$1,137	\$5,748	\$4,611	\$1,704	\$6,315	\$6,315
Rx Premium													
Single - 0 Medicare	\$2,743	\$2,287	\$2,743	N/A	\$2,743	\$2,743	\$2,743	N/A	\$2,743	\$2,743	N/A	\$2,743	\$2,743
Single - 1 Medicare	N/A	N/A	N/A	\$2,937	\$2,937	N/A	N/A	\$2,937	\$2,937	N/A	\$2,977	\$2,977	\$2,977
EE+Spouse - 0 Medicare	\$5,981	\$4,986	\$5,981	N/A	\$5,981	\$5,981	\$5,981	N/A	\$5,981	\$5,981	N/A	\$5,981	\$5,981
EE+Spouse - 1 Medicare	\$3,237	\$2,699	\$3,237	\$2,937	\$6,174	\$3,237	\$3,237	\$2,937	\$6,174	\$3,237	\$2,977	\$6,214	\$6,214
EE+Spouse - 2 Medicare	N/A	N/A	N/A	\$5,874	\$5,874	N/A	N/A	\$5,874	\$5,874	N/A	\$5,954	\$5,953	\$5,953
Family - 0 Medicare	\$6,803	\$5,672	\$6,803	N/A	\$6,803	\$6,803	\$6,803	N/A	\$6,803	\$6,803	N/A	\$6,803	\$6,803
Family - 1 Medicare	\$4,060	\$3,385	\$4,060	\$2,937	\$6,997	\$4,060	\$4,060	\$2,937	\$6,997	\$4,060	\$2,977	\$7,037	\$7,037
Family - 2 Medicare	\$1,317	\$1,098	\$1,317	\$5,874	\$7,191	\$1,317	\$1,317	\$5,874	\$7,191	\$1,317	\$5,954	\$7,270	\$7,270
EE+Ch - 0 Medicare	\$3,841	\$3,202	\$3,841	N/A	\$3,841	\$3,841	\$3,841	N/A	\$3,841	\$3,841	N/A	\$3,841	\$3,841
EE+Ch - 1 Medicare	\$1,097	\$915	\$1,097	\$2,937	\$4,034	\$1,097	\$1,097	\$2,937	\$4,034	\$1,097	\$2,977	\$4,074	\$4,074

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023. The annual premiums shown above are for illustrative purposes.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 4D – Plan Year 2023 Annual Retiree Premiums

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	Legacy HMO			1525 PPO			1525 HMO (Aetna Medicare Subscriber)		
	Legacy HMO			1525 PPO			1525 HMO		
	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Aetna Medicare Advantage Subscriber	Total Plan Premium
Total Premium									
Single - 0 Medicare	\$14,271	N/A	\$14,271	\$14,271	N/A	\$14,271	\$14,271	N/A	\$14,271
Single - 1 Medicare	N/A	\$6,749	\$6,749	N/A	\$5,710	\$5,710	N/A	\$4,254	\$4,254
EE+Spouse - 0 Medicare	\$31,111	N/A	\$31,111	\$31,111	N/A	\$31,111	\$31,111	N/A	\$31,111
EE+Spouse - 1 Medicare	\$16,840	\$6,749	\$23,589	\$16,840	\$5,710	\$22,550	\$16,840	\$4,254	\$21,094
EE+Spouse - 2 Medicare	N/A	\$13,497	\$13,497	N/A	\$11,420	\$11,420	N/A	\$8,508	\$8,508
Family - 0 Medicare	\$35,393	N/A	\$35,393	\$35,393	N/A	\$35,393	\$35,393	N/A	\$35,393
Family - 1 Medicare	\$21,121	\$6,749	\$27,870	\$21,121	\$5,710	\$26,831	\$21,121	\$4,254	\$25,375
Family - 2 Medicare	\$6,850	\$13,497	\$20,347	\$6,850	\$11,420	\$18,269	\$6,850	\$8,508	\$15,357
EE+Ch - 0 Medicare	\$19,980	N/A	\$19,980	\$19,980	N/A	\$19,980	\$19,980	N/A	\$19,980
EE+Ch - 1 Medicare	\$5,708	\$6,749	\$12,457	\$5,708	\$5,710	\$11,418	\$5,708	\$4,254	\$9,962
Medical Premium									
Single - 0 Medicare	\$11,528	N/A	\$11,528	\$11,528	N/A	\$11,528	\$11,528	N/A	\$11,528
Single - 1 Medicare	N/A	\$3,772	\$3,772	N/A	\$2,864	\$2,864	N/A	\$1,278	\$1,278
EE+Spouse - 0 Medicare	\$25,131	N/A	\$25,131	\$25,131	N/A	\$25,131	\$25,131	N/A	\$25,131
EE+Spouse - 1 Medicare	\$13,603	\$3,772	\$17,375	\$13,603	\$2,864	\$16,466	\$13,603	\$1,278	\$14,881
EE+Spouse - 2 Medicare	N/A	\$7,544	\$7,544	N/A	\$5,727	\$5,727	N/A	\$2,557	\$2,557
Family - 0 Medicare	\$28,589	N/A	\$28,589	\$28,589	N/A	\$28,589	\$28,589	N/A	\$28,589
Family - 1 Medicare	\$17,061	\$3,772	\$20,833	\$17,061	\$2,864	\$19,925	\$17,061	\$1,278	\$18,340
Family - 2 Medicare	\$5,534	\$7,544	\$13,077	\$5,534	\$5,727	\$11,261	\$5,533	\$2,557	\$8,090
EE+Ch - 0 Medicare	\$16,139	N/A	\$16,139	\$16,139	N/A	\$16,139	\$16,139	N/A	\$16,139
EE+Ch - 1 Medicare	\$4,611	\$3,772	\$8,383	\$4,611	\$2,864	\$7,475	\$4,611	\$1,278	\$5,889
Rx Premium									
Single - 0 Medicare	\$2,743	N/A	\$2,743	\$2,743	N/A	\$2,743	\$2,743	N/A	\$2,743
Single - 1 Medicare	N/A	\$2,977	\$2,977	N/A	\$2,846	\$2,846	N/A	\$2,975	\$2,975
EE+Spouse - 0 Medicare	\$5,981	N/A	\$5,981	\$5,981	N/A	\$5,981	\$5,981	N/A	\$5,981
EE+Spouse - 1 Medicare	\$3,237	\$2,977	\$6,214	\$3,237	\$2,846	\$6,083	\$3,237	\$2,975	\$6,212
EE+Spouse - 2 Medicare	N/A	\$5,953	\$5,953	N/A	\$5,692	\$5,692	N/A	\$5,951	\$5,951
Family - 0 Medicare	\$6,803	N/A	\$6,803	\$6,803	N/A	\$6,803	\$6,803	N/A	\$6,803
Family - 1 Medicare	\$4,060	\$2,977	\$7,037	\$4,060	\$2,846	\$6,906	\$4,060	\$2,975	\$7,035
Family - 2 Medicare	\$1,317	\$5,953	\$7,270	\$1,316	\$5,692	\$7,009	\$1,317	\$5,951	\$7,267
EE+Ch - 0 Medicare	\$3,841	N/A	\$3,841	\$3,841	N/A	\$3,841	\$3,841	N/A	\$3,841
EE+Ch - 1 Medicare	\$1,097	\$2,977	\$4,074	\$1,097	\$2,846	\$3,944	\$1,097	\$2,975	\$4,073

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023. The annual premiums shown above are for illustrative purposes.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 4D – Plan Year 2023 Annual Retiree Premiums

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	1525 HMO			2030 Plans					
	1525 HMO			Horizon PPO			Horizon HMO		
	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium	Horizon Early Retiree Subscriber	Horizon Medicare Subscriber	Total Plan Premium
Total Premium									
Single - 0 Medicare	\$14,271	N/A	\$14,271	\$14,271	N/A	\$14,271	\$14,271	N/A	\$14,271
Single - 1 Medicare	N/A	\$4,529	\$4,529	N/A	\$5,564	\$5,564	N/A	\$5,874	\$5,874
EE+Spouse - 0 Medicare	\$31,111	N/A	\$31,111	\$31,111	N/A	\$31,111	\$31,111	N/A	\$31,111
EE+Spouse - 1 Medicare	\$16,840	\$4,529	\$21,369	\$16,840	\$5,564	\$22,404	\$16,840	\$5,874	\$22,714
EE+Spouse - 2 Medicare	N/A	\$9,059	\$9,059	N/A	\$11,129	\$11,129	N/A	\$11,747	\$11,747
Family - 0 Medicare	\$35,393	N/A	\$35,393	\$35,393	N/A	\$35,393	\$35,393	N/A	\$35,393
Family - 1 Medicare	\$21,121	\$4,529	\$25,650	\$21,121	\$5,564	\$26,686	\$21,121	\$5,874	\$26,995
Family - 2 Medicare	\$6,850	\$9,059	\$15,908	\$6,849	\$11,129	\$17,979	\$6,850	\$11,747	\$18,597
EE+Ch - 0 Medicare	\$19,980	N/A	\$19,980	\$19,980	N/A	\$19,980	\$19,980	N/A	\$19,980
EE+Ch - 1 Medicare	\$5,708	\$4,529	\$10,238	\$5,708	\$5,564	\$11,273	\$5,708	\$5,874	\$11,582
Medical Premium									
Single - 0 Medicare	\$11,528	N/A	\$11,528	\$11,528	N/A	\$11,528	\$11,528	N/A	\$11,528
Single - 1 Medicare	N/A	\$1,554	\$1,554	N/A	\$2,691	\$2,691	N/A	\$2,870	\$2,870
EE+Spouse - 0 Medicare	\$25,131	N/A	\$25,131	\$25,131	N/A	\$25,131	\$25,131	N/A	\$25,131
EE+Spouse - 1 Medicare	\$13,603	\$1,554	\$15,157	\$13,603	\$2,691	\$16,294	\$13,603	\$2,870	\$16,473
EE+Spouse - 2 Medicare	N/A	\$3,108	\$3,108	N/A	\$5,383	\$5,383	N/A	\$5,739	\$5,739
Family - 0 Medicare	\$28,589	N/A	\$28,589	\$28,589	N/A	\$28,589	\$28,589	N/A	\$28,589
Family - 1 Medicare	\$17,061	\$1,554	\$18,615	\$17,061	\$2,691	\$19,752	\$17,061	\$2,870	\$19,931
Family - 2 Medicare	\$5,533	\$3,108	\$8,641	\$5,533	\$5,383	\$10,916	\$5,534	\$5,739	\$11,273
EE+Ch - 0 Medicare	\$16,139	N/A	\$16,139	\$16,139	N/A	\$16,139	\$16,139	N/A	\$16,139
EE+Ch - 1 Medicare	\$4,611	\$1,554	\$6,165	\$4,611	\$2,691	\$7,302	\$4,611	\$2,870	\$7,481
Rx Premium									
Single - 0 Medicare	\$2,743	N/A	\$2,743	\$2,743	N/A	\$2,743	\$2,743	N/A	\$2,743
Single - 1 Medicare	N/A	\$2,975	\$2,975	N/A	\$2,873	\$2,873	N/A	\$3,004	\$3,004
EE+Spouse - 0 Medicare	\$5,981	N/A	\$5,981	\$5,981	N/A	\$5,981	\$5,981	N/A	\$5,981
EE+Spouse - 1 Medicare	\$3,237	\$2,975	\$6,212	\$3,237	\$2,873	\$6,110	\$3,237	\$3,004	\$6,241
EE+Spouse - 2 Medicare	N/A	\$5,951	\$5,951	N/A	\$5,747	\$5,747	N/A	\$6,008	\$6,008
Family - 0 Medicare	\$6,803	N/A	\$6,803	\$6,803	N/A	\$6,803	\$6,803	N/A	\$6,803
Family - 1 Medicare	\$4,060	\$2,975	\$7,035	\$4,060	\$2,873	\$6,933	\$4,060	\$3,004	\$7,064
Family - 2 Medicare	\$1,316	\$5,951	\$7,267	\$1,316	\$5,747	\$7,063	\$1,316	\$6,008	\$7,324
EE+Ch - 0 Medicare	\$3,841	N/A	\$3,841	\$3,841	N/A	\$3,841	\$3,841	N/A	\$3,841
EE+Ch - 1 Medicare	\$1,097	\$2,975	\$4,073	\$1,097	\$2,873	\$3,971	\$1,097	\$3,004	\$4,101

* GSTHP monthly premiums are effective July 1, 2022 and are applicable for the 18-month period ending December 31, 2023. The annual premiums shown above are for illustrative purposes.

** Split family premium rates shown above assume the Early Retiree subscriber is enrolled in the NJEHP plan. For Early Retiree subscribers enrolled in the GSTHP, the total plan premium is equal to the sum of the GSTHP Horizon Early Retiree subscriber premium and the Medicare rate for the Medicare option and tier that is elected.

Exhibit 5A – Plan Year 2023 Employee Plan Option Summary

	Education Actives			
	\$10 PPO	\$15 PPO	NJ Educators Health Plan	NJ Garden State Health Plan
In-Network				
Deductible (Single/Family)	None	None	None	None
Coinsurance OOP Maximum (Single/ Family)	None	\$400/\$1,000	None	None
Total In-Network OOP Maximum (Single/Family)	\$400/\$1,000	\$7,280/\$14,560	\$500/\$1000	\$500/\$1000
Overall Coinsurance	10% ¹	10% ¹	10% ¹	10% ¹
PCP	\$10 copay	\$15 copay	\$10 copay	\$10 copay
Specialist	\$10 copay	\$15 copay	\$15 copay	\$15 copay
Urgent Care	\$10 copay	\$15 copay	\$15 copay	\$15 copay
Emergency Room	\$25 copay	\$50 copay	\$125 copay	\$125 copay
Inpatient Hospital	No charge	No charge	No charge	No charge
Out-of-Network				
Deductible (Single/Family)	\$100/\$250	\$100/\$250	\$350/\$700	\$350/\$700
Total Out-of-Network OOP Maximum (Single/Family)	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000	\$2,000/\$5,000
Overall Coinsurance	20%	30%	30% (200% CMS)	30% (200% CMS)
Out-of-Network Chiropractic Services	Lesser of \$35/visit or 75% of In-Network cost/visit	Lesser of \$35/visit or 75% of In-Network cost/visit	Lesser of \$35/visit or 75% of In-Network cost/visit	Lesser of \$35/visit or 75% of In-Network cost/visit
Out-of-Network Acupuncture Services	Lesser of \$60/visit or 75% of In-Network cost/visit	Lesser of \$60/visit or 75% of In-Network cost/visit	Lesser of \$60/visit or 75% of In-Network cost/visit	Lesser of \$60/visit or 75% of In-Network cost/visit
Out-of-Network Physical Therapy Services	75% of In-Network cost/visit	75% of In-Network cost/visit	75% of In-Network cost/visit	75% of In-Network cost/visit
Prescription Drug				
OOP Maximum (Single/Family)	\$1,820/\$3,640	\$1,820/\$3,640	\$1600/\$3200	\$1600/\$3200
Retail - Generic	\$3	\$3	\$5	\$5
Retail - Preferred Brand	\$10	\$10	\$10	\$10
Retail - Non-Preferred Brand	\$10	\$10	Member Pays the Difference between generic and brand plus brand copayment	Member Pays the Difference between generic and brand plus brand copayment
Mail - Generic	\$5	\$5	\$10	\$10
Mail - Preferred Brand	\$15	\$15	\$20	\$20
Mail - Non-Preferred Brand	\$15	\$15	Member Pays the Difference between generic and brand plus brand copayment	Member Pays the Difference between generic and brand plus brand copayment

¹ On Select Services

Note: Local education employers can select from the SEHBP's Prescription Drug Plans, purchase their own prescription drug coverage plan, or receive prescription drug coverage through the SEHBP medical plan. Copayments shown apply to the plans when coverage is through the SEHBP's Prescription Drug Plans. If prescription drug coverage is through the medical plan: Coinsurance is 10% for NJ DIRECT10 and NJ DIRECT15.

Note: Beginning 1/1/2022 a new Garden State Health Plan is to be implemented. Plan Design details for the Garden State Health Plan are yet to be determined.

All employees hired on or after 7/1/20 will be enrolled in the NJ Educators Health plan and will have the option to enroll in the Garden State Plan after 1/1/22.

Exhibit 5B – Plan Year 2023 Early Retiree Plan Option Summary

	Education Early Retirees	
	NJ Educators Health Plan	NJ Garden State Health Plan
In-Network		
Deductible (Single/Family)	None	None
Coinsurance OOP Maximum (Single/ Family)	None	None
Total In-Network OOP Maximum (Single/Family)	\$500/\$1000	\$500/\$1000
Overall Coinsurance	10% ¹	10% ¹
PCP	\$10 copay	\$10 copay
Specialist	\$15 copay	\$15 copay
Urgent Care	\$15 copay	\$15 copay
Emergency Room	\$125 copay	\$125 copay
Inpatient Hospital	No charge	No charge
Out-of-Network		
Deductible (Single/Family)	\$350/\$700	\$350/\$700
Total Out-of-Network OOP Maximum (Single/Family)	\$2,000/\$5,000	\$2,000/\$5,000
Overall Coinsurance	30% (200% of CMS)	30% (200% of CMS)
Out-of-Network Chiropractic Services	Lesser of \$35/visit or 75% of In-Network cost/visit	Lesser of \$35/visit or 75% of In-Network cost/visit
Out-of-Network Acupuncture Services	Lesser of \$60/visit or 75% of In-Network cost/visit	Lesser of \$60/visit or 75% of In-Network cost/visit
Out-of-Network Physical Therapy Services	75% of In-Network cost/visit	75% of In-Network cost/visit
Prescription Drug		
OOP Maximum (Single/Family)	\$1,600/\$3,200	\$1,600/\$3,200
Retail - Generic	\$5	\$5
Retail - Preferred Brand	\$10	\$10
Retail - Non-Preferred Brand	Member Pays the Difference between generic and brand plus brand copayment	Member Pays the Difference between generic and brand plus brand copayment
Mail - Generic	\$10	\$10
Mail - Preferred Brand	\$20	\$20
Mail - Non-Preferred Brand	Member Pays the Difference between generic and brand plus brand copayment	Member Pays the Difference between generic and brand plus brand copayment

Exhibit 5C – Plan Year 2023 Medicare Retiree Plan Option Summary

	Education Medicare Advantage ³				Education Medicare Supplement				
	\$10 PPO	\$15 PPO	\$10 HMO	1525HMO	\$10 HMO	1525PPO	1525HMO	2030PPO	2030HMO
In-Network									
Deductible (Single/Family)	None	None	None	None	None	None	None	None	None
Coinsurance OOP Maximum (Single/ Family) ¹	None	None	None	None	None	\$400/\$1,000	None	\$800/\$2,000	None
Total In-Network OOP Maximum (Single/Family)	\$400 per person	\$1,000 per person	\$2,500 per person	\$2,500 per person	\$7,689/\$15,378	\$7,689/\$15,378	\$7,689/\$15,378	\$7,689/\$15,378	\$7,689/\$15,378
Overall Coinsurance	None	None	None	None	10% ⁴	10% ⁴	10% ⁴	10% ⁴	10% ⁴
PCP ²	\$10 copay	\$15 copay	\$10 copay	\$15 copay	\$10 copay	\$15 copay	\$15 copay	\$20 copay	\$20 copay
Specialist	\$10 copay	\$15 copay	\$10 copay	\$25 copay	\$10 copay	\$25 copay	\$25 copay	\$30 copay/ \$20 copay (child)	\$30 copay/ \$20 copay (child)
Urgent Care	\$10 copay	\$15 copay	\$10 copay	\$25 copay	\$10 copay	\$25 copay	\$25 copay	\$30 copay/ \$20 copay (child)	\$30 copay/ \$20 copay (child)
Emergency Room	\$25 copay	\$50 copay	\$35 copay	\$65 copay	\$35 copay	\$75 copay	\$75 copay	\$125 copay	\$125 copay
Inpatient Hospital	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
Out-of-Network									
Deductible (Single/Family)	None	None	Not Covered	Not Covered	Not covered	\$100/\$250	Not covered	\$200/\$500	Not covered
Total Out-of-Network OOP Maximum (Single/Family)	\$400 per person; Combined with IN OOP	\$1,000 per person; Combined with IN OOP	Not Covered	Not Covered	Not covered	\$2,000/\$5,000	Not covered	\$5,000/\$12,500	Not covered
Overall Coinsurance	None	None	Not Covered	Not Covered	Not covered	30%	Not covered	30%	Not covered
Prescription Drug									
OOP Maximum (Single/Family)	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822	\$1,411/\$2,822
Retail - Generic	\$10	\$10	\$6	\$7	\$6	\$7	\$7	\$3	\$3
Retail - Preferred Brand	\$21	\$21	\$13	\$17	\$13	\$17	\$17	\$19	\$19
Retail - Non-Preferred Brand	\$42	\$42	\$26	\$36	\$26	\$36	\$36	\$48	\$48
Mail - Generic	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5	\$5
Mail - Preferred Brand	\$31	\$31	\$19	\$41	\$19	\$41	\$41	\$37	\$37
Mail - Non-Preferred Brand	\$52	\$52	\$31	\$91	\$31	\$91	\$91	\$95	\$95

¹ Coinsurance OOP Maximum applies on the applicable Horizon plans for IN outpatient private duty nursing, IN or OON ambulance, DME and some prosthetic and orthotic services

²Physician visits for Medicare Advantage Plan Options will be reimbursed up to \$250 each visit

³Medicare Advantage plans do not have In-Network and Out-of-Network differentiation. Medicare Advantage plans provide coverage at the same benefit level regardless of network status for visits to any provider that accepts Medicare.

⁴On Select Services

The plan options shown above are provided for reference purposes and reflect potential options available to a member. The plan options shown above are not available for all members and can be dependent on multiple factors such as union designation, years of service, etc.

About Aon

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