



## State of New Jersey

DEPARTMENT OF BANKING AND INSURANCE

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JUSTIN ZIMMERMAN  
Commissioner

### BULLETIN NO. 25-04

**TO: ALL NEW JERSEY HEALTH INSURANCE COMPANIES; HEALTH SERVICE CORPORATIONS; HEALTH MAINTENANCE ORGANIZATIONS; DENTAL SERVICE CORPORATIONS; DENTAL PLAN ORGANIZATIONS; PREPAID PRESCRIPTION SERVICE ORGANIZATIONS; AND OTHER INTERESTED PARTIES**

**FROM: JUSTIN ZIMMERMAN, COMMISSIONER**

**RE: AMENDMENTS TO HINT GROUP ENROLLMENT/CHANGE REQUEST FORM**

The purpose of this bulletin is to advise carriers and other interested parties that the Department of Banking and Insurance ("Department") has revised its Healthcare Information Networks and Technologies ("HINT") Group Enrollment/Change Request Form to capture the data requested for Enrollee-Level External Data Gathering Environment ("EDGE") by the Centers for Medicare and Medicaid Services ("CMS").

The revised form can be accessed on the Department's website at <http://www.state.nj.us/dobi/formlist.htm>. Carriers should begin using this form no later than April 1, 2025.

Should you have any questions regarding the content of this Bulletin, please contact the Department's Office of Life and Health at [lifehealth@dobi.nj.gov](mailto:lifehealth@dobi.nj.gov).

March 7, 2025

Date

A handwritten signature in black ink that reads "Justin Zimmerman".

Justin Zimmerman  
Commissioner

AR Changes to Hint Form\_Group/Bulletins

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