

2024 New Jersey Individual Health Benefits Plans and Rates Effective 01/01/2024 - 12/31/2024

Metal Level ⁽¹⁾	Carrier / Entity Name	Plan Type ⁽²⁾⁽³⁾	Base Rate ⁽⁴⁾ (multiply by Age Rating Factor) ⁽⁵⁾	Plan Name ⁽⁶⁾	Footnotes		Available to Purchase through...		Visit the carrier's web site for details about plans and coverage options:
					(7)	(8)	Carrier	Marketplace	
Gold	Ambetter from WellCare of New Jersey	EPO	\$487.54	Gold 1008	8		C	M	Ambetter.WellCareNewJersey.com
Gold	Oscar Garden State Insurance Corporation	EPO	\$559.36	Gold Classic PCP Saver	8		C	M	www.hioscar.com
Gold	Aetna Life Insurance Company	EPO	\$573.82	2024 NJ Gold 1: Aetna Whole Health EPO	8		C	M	
Gold	Aetna Life Insurance Company	EPO	\$575.93	2024 NJ Gold 1: Aetna Whole Health EPO + Ped Dental	8		C		
Gold	UnitedHealthcare Insurance Company	EPO	\$712.14	UHC Gold Value (0 Virtual Urgent Care, 3 Tier 1 Rx)			C	M	
Gold	UnitedHealthcare Insurance Company	EPO	\$728.13	UHC Gold Advantage (0 Virtual Urgent Care, 3 Tier 1 Rx)			C	M	
Gold	Horizon Healthcare Services, Inc.	EPO	\$748.41	OMNIA Gold			C	M	www.horizonblue.com
Gold	AmeriHealth HMO	HMO	\$817.42	IHC Gold HMO Regional Preferred \$20/\$50			C		www.amerhealth.com
Gold	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$903.99	IHC Gold EPO Regional Preferred \$30/\$50			C	M	www.amerhealth.com
Silver	Aetna Life Insurance Company	EPO	\$323.65	2024 NJ Silver 1: Aetna Whole Health EPO + Ped Dental	8		C		
Silver	Aetna Life Insurance Company	EPO	\$324.79	2024 NJ Silver 2: Aetna Whole Health EPO + Ped Dental	8		C		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$334.43	IHC Select Silver EPO AmeriHealth Advantage \$25/\$60	8		C		www.amerhealth.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$349.81	IHC Select Silver EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	C		www.amerhealth.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$350.12	Silver 1007 Off Exchange	8		C		Ambetter.WellCareNewJersey.com
Silver	Aetna Life Insurance Company	EPO	\$358.39	2024 NJ Silver 1: Aetna Whole Health EPO	8		C	M	
Silver	Aetna Life Insurance Company	EPO	\$359.67	2024 NJ Silver 2: Aetna Whole Health EPO	8		C	M	
Silver	Horizon Healthcare Services, Inc.	EPO	\$360.91	OMNIA Silver Value			C	M	www.horizonblue.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$365.83	IHC Silver EPO AmeriHealth Advantage \$45/40%	8		C	M	www.amerhealth.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$370.75	IHC Silver EPO AmeriHealth Advantage \$25/\$60	8		C	M	www.amerhealth.com
Silver	Oscar Garden State Insurance Corporation	EPO	\$376.62	Silver Simple PCP Saver	8		C	M	www.hioscar.com
Silver	Oscar Garden State Insurance Corporation	EPO	\$380.40	Silver Simple	8		C	M	www.hioscar.com
Silver	UnitedHealthcare Insurance Company	EPO	\$381.62	UHC Silver Value			C	M	
Silver	UnitedHealthcare Insurance Company	EPO	\$383.53	UHC Silver Advantage (0 Virtual Urgent Care, 3 Tier 1 Rx, 0 Insulin)			C	M	
Silver	Ambetter from WellCare of New Jersey	EPO	\$383.74	Silver 1003	8		C	M	Ambetter.WellCareNewJersey.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$387.16	Silver 1020	8		C	M	Ambetter.WellCareNewJersey.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$391.08	IHC Silver EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	C	M	www.amerhealth.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$394.75	IHC Silver EPO AmeriHealth Hospital Advantage \$50/\$75	8		C	M	www.amerhealth.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$396.83	Silver 1007	8		C	M	Ambetter.WellCareNewJersey.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$396.83	Silver 1007	8		C	M	Ambetter.WellCareNewJersey.com
Silver	Oscar Garden State Insurance Corporation	EPO	\$397.98	Silver Classic	8		C	M	www.hioscar.com
Silver	Oscar Garden State Insurance Corporation	EPO	\$410.09	Silver Classic Saver Plus	8		C	M	www.hioscar.com
Silver	Horizon Healthcare Services, Inc.	EPO	\$427.49	OMNIA Silver HSA	7		C	M	www.horizonblue.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$446.75	Silver 1010	8		C	M	Ambetter.WellCareNewJersey.com
Silver	Ambetter from WellCare of New Jersey	EPO	\$446.75	Silver 1010	8		C	M	Ambetter.WellCareNewJersey.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$457.77	IHC Select Silver EPO Local Value \$35/\$75	8		C		www.amerhealth.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$472.65	IHC Silver EPO HSA Local Value \$50/\$75	7	8	C	M	www.amerhealth.com
Silver	Horizon Healthcare Services, Inc.	EPO	\$477.27	OMNIA Silver			C	M	www.horizonblue.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$514.14	IHC Silver EPO Local Value \$50/\$75	8		C		www.amerhealth.com
Silver	Horizon Healthcare Services, Inc.	EPO	\$600.96	Horizon Advantage EPO Silver			C	M	www.horizonblue.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$779.33	IHC Select Silver EPO Regional Preferred \$35/\$75			C		www.amerhealth.com
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$806.27	IHC Silver EPO HSA Regional Preferred \$50/\$75	7		C	M	www.amerhealth.com
Silver	Oxford Health Insurance, Inc.	EPO	\$1,133.14	Silver Copay Select 70			C		www.uhone.com
Silver	Oxford Health Insurance, Inc.	EPO	\$1,174.28	Silver Copay Select 80			C		www.uhone.com
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$296.59	IHC Bronze EPO HSA AmeriHealth Advantage \$25/\$50	7	8	C	M	www.amerhealth.com
Bronze	Aetna Life Insurance Company	EPO	\$301.65	2024 NJ Bronze 2 HSA: Aetna Whole Health EPO	7	8	C	M	
Bronze	Aetna Life Insurance Company	EPO	\$302.70	2024 NJ Bronze 2 HSA: Aetna Whole Health EPO + Ped Dental	7	8	C		
Bronze	Aetna Life Insurance Company	EPO	\$306.42	2024 NJ Bronze 1: Aetna Whole Health EPO	8		C	M	
Bronze	Aetna Life Insurance Company	EPO	\$307.49	2024 NJ Bronze 1: Aetna Whole Health EPO + Ped Dental	8		C		
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$313.52	IHC Bronze EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	C	M	www.amerhealth.com
Bronze	UnitedHealthcare Insurance Company	EPO	\$323.17	UHC Bronze Value HSA (5 Tier 1 Rx)			C	M	
Bronze	UnitedHealthcare Insurance Company	EPO	\$327.02	UHC Bronze Essential (0 Virtual Urgent Care)			C	M	
Bronze	Horizon Healthcare Services, Inc.	EPO	\$341.60	OMNIA Bronze			C	M	www.horizonblue.com
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$342.53	IHC Bronze EPO HSA Local Value 50%/50%	7	8	C	M	www.amerhealth.com
Bronze	Oscar Garden State Insurance Corporation	EPO	\$353.06	Bronze Classic	8		C	M	www.hioscar.com
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$382.97	IHC Bronze EPO Local Value \$50/\$75	8		C	M	www.amerhealth.com
Bronze	Horizon Healthcare Services, Inc.	EPO	\$474.24	Horizon Advantage EPO Bronze			C	M	www.horizonblue.com
Bronze	Oxford Health Insurance, Inc.	EPO	\$1,093.71	Bronze Copay Select 50			C		www.uhone.com
Catastrophic	Oscar Garden State Insurance Corporation	EPO	\$263.23	Secure	8		C	M	www.hioscar.com
Catastrophic	Horizon Healthcare Services, Inc.	EPO	\$311.42	Horizon Advantage EPO Essentials			C	M	www.horizonblue.com
Catastrophic	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$334.35	IHC Local Value Simple Saver	8		C	M	www.amerhealth.com

Ages	Age Rating Factors ⁽⁵⁾	Ages	Age Rating Factors ⁽⁵⁾	Footnotes
0-14	0.765	40	1.278	⁽¹⁾ Metal Level indicates the actuarial value of the plan.
15	0.833	41	1.302	Each metal level is designed to cover an expected percentage of the covered charges:
16	0.859	42	1.325	Bronze 60%, Silver 70%, Gold 80%, and Platinum 90%.
17	0.885	43	1.357	⁽²⁾ Plan Types HMO and EPO are network-only plans with no option to use out-of-network providers,
18	0.913	44	1.397	except in the case of emergency or urgent care.
19	0.941	45	1.444	⁽³⁾ Catastrophic Plans are available only to those individuals who are under 30 years old, or
20	0.970	46	1.500	who have received an exemption from the personal responsibility requirement on the Marketplace.
21	1.000	47	1.563	⁽⁴⁾ Base Rate is multiplied by the Age Rating Factor ⁽⁵⁾ to determine the premium for each person to be covered.
22	1.000	48	1.635	⁽⁵⁾ Age Rating Factor is used to calculate the premium for each person to be covered.
23	1.000	49	1.706	⁽⁶⁾ Plan Names were supplied by the Carrier. Please contact them for explanations of the abbreviations used in the plan names.
24	1.000	50	1.786	⁽⁷⁾ These are high deductible health plans and are compatible with Health Savings Accounts (HSA).
25	1.004	51	1.865	Contact the Carrier for additional information.
26	1.024	52	1.952	⁽⁸⁾ These plans are not available in all counties. Contact the Carrier for additional information.
27	1.048	53	2.040	For details about plans, abbreviations used in the plan names, and coverage options, please contact the Carrier directly.
28	1.087	54	2.135	For information regarding subsidies (Premium Tax Credits and Cost-Sharing Reductions) visit:
29	1.119	55	2.230	www.nj.gov/getcoverednj
30	1.135	56	2.333	Premium Calculation
31	1.159	57	2.437	Premium per person = (Base Rate ⁽³⁾ x Age Rating Factor ⁽⁵⁾).
32	1.183	58	2.548	Premium per family = The sum of the premiums for each family member to be covered.
33	1.198	59	2.603	Note: For dependent children under age 20, the premium is capped at the sum of the premiums for three children.
34	1.214	60	2.714	
35	1.222	61	2.810	
36	1.230	62	2.873	
37	1.238	63	2.952	
38	1.246	64+	3.000	
39	1.262			