2025 New Jersey Individual Health Benefits Plans and Rates Effective 01/01/2025 - 12/31/2025											
Metal	Carrier / Entity Name	Plan	Base Rate ⁽⁴⁾ (multiply by Age Rating Factor) ⁽⁵⁾	Plan Name ⁽⁶⁾	Footnotes			o Purchase ugh	Visit the carrier's web site for details about plans and coverage options:		
Level ⁽¹⁾		Type ⁽²⁾⁽³⁾		Pian Name [*]		(8)	Carrier	Marketplace			
Gold	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$529.19	Secure Gold + 0 Virtual 24/7 Care Visits		8	С	M	Ambetter.WellCareNewJersey.com		
Gold	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$583.18	Elite Gold 0 Deductible + 0 Virtual 24/7 Care Visits		8	С	M	Ambetter.WellCareNewJersey.com		
Gold	Oscar Garden State Insurance Corporation	EPO	\$583.57	Gold Classic PCP Saver			С	M	www.hioscar.com		
Gold	Oscar Garden State Insurance Corporation	EPO	\$585.53	Gold \$1500 Get Healthy Off Exchange			С		www.hioscar.com		
Gold	Aetna Life Insurance Company	EPO	\$611.48	2025 NJ Gold 1 Advanced: Aetna Whole Health EPO		8	С	M			
Gold	Horizon Healthcare Services, Inc.	EPO	\$748.41	OMNIA Gold			C	M	www.horizonblue.com		
Gold	UnitedHealthcare Insurance Company	EPO	\$787.05	UHC Gold Advantage (\$0 Virtual Urgent Care, \$5 Tier 2 Rx, No Referrals)			C	M	www.nonzonbluc.com		
		EPO	\$789.09				C	M			
Gold	UnitedHealthcare Insurance Company		·	UHC Gold Value (\$0 Virtual Urgent Care, \$5 Tier 2 Rx, No Referrals)			C	IVI			
Gold	AmeriHealth HMO	HMO	\$848.03	IHC Gold HMO Regional Preferred \$20/\$50			C		www.amerihealth.com		
Gold	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$938.03	IHC Gold EPO Regional Preferred \$30/\$50			С	M	www.amerihealth.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$348.75	IHC Select Silver EPO AmeriHealth Advantage \$25/\$60		8	С		www.amerihealth.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$362.98	IHC Select Silver EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	С		www.amerihealth.com		
Silver	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$376.28	Premium Silver + 0 Virtual 24/7 Care Visits		8	С		Ambetter.WellCareNewJersey.com		
Silver	Horizon Healthcare Services, Inc.	EPO	\$377.49	OMNIA Silver Value			С	М	www.horizonblue.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$381.88	IHC Silver EPO AmeriHealth Advantage \$45/40%		8	С	М	www.amerihealth.com		
Silver	Oscar Garden State Insurance Corporation	EPO	\$383.84	Silver \$2500 Off Exchange			С		www.hioscar.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$385.87	IHC Silver EPO AmeriHealth Advantage \$25/\$60		8	С	M	www.amerihealth.com		
Silver	Aetna Life Insurance Company	EPO	\$391.19	2025 NJ Silver 1 Advanced: Aetna Whole Health EPO		8	С	M			
Silver	Oscar Garden State Insurance Corporation	EPO	\$392.85	Silver Simple			C	M	www.hioscar.com		
Silver	Aetna Life Insurance Company	EPO	\$393.57	2025 NJ Silver 2 Advanced: Aetna Whole Health EPO		8	C	M	www.moscar.com		
Silver	1 ,	EPO	\$398.03	Secure Silver with 0 Insulin Options + 0 Virtual 24/7 Care Visits		8	C	M	Ambetter.WellCareNewJersey.com		
	WellCare Health Insurance Company of New Jersey, Inc.					0	0		,		
Silver	Oscar Garden State Insurance Corporation	EPO EPO	\$401.57	Silver Simple PCP Saver			C	M	www.hioscar.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$405.80	IHC Silver EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	С	M	www.amerihealth.com		
Silver	Oscar Garden State Insurance Corporation	EPO	\$414.19	Silver Classic			С	M	www.hioscar.com		
Silver	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$417.19	Balanced Silver + 0 Virtual 24/7 Care Visits		8	С	M	Ambetter.WellCareNewJersey.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$417.80	IHC Silver EPO AmeriHealth Hospital Advantage \$50/\$75		8	С	М	www.amerihealth.com		
Silver	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$419.84	Premium Silver + 0 Virtual 24/7 Care Visits		8	С		Ambetter.WellCareNewJersey.com		
Silver	Oscar Garden State Insurance Corporation	EPO	\$426.66	Silver Classic Saver Plus			С	М	www.hioscar.com		
Silver	UnitedHealthcare Insurance Company	EPO	\$444.73	UHC Silver Advantage (\$0 Virtual Urgent Care, No Referrals)			С	М			
Silver	UnitedHealthcare Insurance Company	EPO	\$450.16	UHC Silver Value (\$0 Virtual Urgent Care, No Referrals)			С	М			
Silver	Horizon Healthcare Services, Inc.	EPO	\$458.74	OMNIA Silver HSA	7		С	М	www.horizonblue.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$476.44	IHC Select Silver EPO Local Value \$35/\$75		8	С		www.amerihealth.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$480.63	IHC Silver EPO Local Value \$50/\$75		8	C		www.amerihealth.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$490.45	IHC Silver EPO HSA Local Value \$50/\$75	7	8	C	M	www.amerihealth.com		
Silver	WellCare Health Insurance Company of New Jersey, Inc.	EPO	\$491.11	Elite Silver 0 Medical Deductible + 0 Virtual 24/7 Care Visits	,	8	C	M	Ambetter.WellCareNewJersey.com		
						0	C				
Silver	Horizon Healthcare Services, Inc.	EPO EPO	\$512.23	OMNIA Silver			C	M	www.horizonblue.com		
Silver	Horizon Healthcare Services, Inc.	EPO EPO	\$641.27	Horizon Advantage EPO Silver			C	M	www.horizonblue.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$811.10	IHC Select Silver EPO Regional Preferred \$35/\$75			С		www.amerihealth.com		
Silver	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$836.63	IHC Silver EPO HSA Regional Preferred \$50/\$75	7		С	M	www.amerihealth.com		
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$305.91	IHC Bronze EPO HSA AmeriHealth Advantage \$25/\$50	7	8	С	М	www.amerihealth.com		
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$323.37	IHC Bronze EPO HSA AmeriHealth Hospital Advantage \$50/\$75	7	8	С	М	www.amerihealth.com		
Bronze	Aetna Life Insurance Company	EPO	\$328.04	2025 NJ Bronze 2 Advanced HSA: Aetna Whole Health EPO	7	8	С	М			
Bronze	Aetna Life Insurance Company	EPO	\$334.14	2025 NJ Bronze 1 Advanced: Aetna Whole Health EPO		8	С	M			
Bronze	Oscar Garden State Insurance Corporation	EPO	\$348.09	Bronze Classic			С	М	www.hioscar.com		
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$353.30	IHC Bronze EPO HSA Local Value 50%/50%	7	8	С	М	www.amerihealth.com		
Bronze	Oscar Garden State Insurance Corporation	EPO	\$355.21	Bronze \$3000 Off Exchange			С		www.hioscar.com		
Bronze	Horizon Healthcare Services, Inc.	EPO	\$365.93	OMNIA Bronze			C	M	www.horizonblue.com		
		EPO EPO	\$379.91	UHC Bronze Value (\$0 Virtual Urgent Care, No Referrals)			С	M	www.nonzonbluc.com		
Bronze	UnitedHealthcare Insurance Company										
Bronze	UnitedHealthcare Insurance Company	EPO EPO	\$380.99	UHC Bronze Value HSA (No Referrals)	1		С	M			
Bronze	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$398.97	IHC Bronze EPO Local Value \$50/\$75		8	С	M	www.amerihealth.com		
Bronze	Horizon Healthcare Services, Inc.	EPO	\$504.59	Horizon Advantage EPO Bronze			С	M	www.horizonblue.com		
Catastrophic	Oscar Garden State Insurance Corporation	EPO	\$267.33	Secure			С	М	www.hioscar.com		
Catastrophic	Horizon Healthcare Services, Inc.	EPO	\$332.86	Horizon Advantage EPO Essentials			С	M	www.horizonblue.com		
Catastrophic	AmeriHealth Insurance Company of NJ, Inc.	EPO	\$349.36	IHC Local Value Simple Saver		8	С	М	www.amerihealth.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 multipled 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	

1.262