

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**INSTRUCTIONS:** Pursuant to N.J.S.A. 17:48E-3h, this Health Service Corporation (HSC) Information Statement is required to be filed annually with, and in a form and manner prescribed by, the Department of Banking and Insurance. For the reports for year-end 2016 and year-end 2017, a health service corporation shall on or before April 30, 2018, file an original and two copies of this HSC Information Statement, providing fully completed information for all sections and requests below as of year-end 2016. For all subsequent years, a health service corporation shall annually on or before April 30<sup>th</sup> file an original and 2 copies of its fully completed HSC Information Statement with the Department providing fully completed information for all sections and requests below as of the end of the preceding calendar year. Please be advised that the Department anticipates that portions of the information requested herein will also be reported in the HSC's Annual Financial Statement. However, to be fully complete, this Information Statement requires submission of the actual information and data requested, and cross-references to the Annual Financial Statement will not be sufficient.

The HSC Information Statements shall be sent to the New Jersey Department of Banking and Insurance, 20 W. State Street, Trenton, NJ 08625, Attn: Assistant Commissioner - Office of Solvency Regulation.

The HSC Information Statement and the information provided herein shall be certified as true and correct by a senior officer of the filing health service corporation. This Information Statement will be evaluated by the Department for its annual report to the Governor and the Legislature on compliance with P.L. 2017, c. 100 beginning on or before June 30, 2019, as required by N.J.S.A. 17:48E-3i.

**I) General Information**

<b>Report as of Year-End:</b>	2020
<b>Name of Health Service Corporation (HSC):</b>	Horizon Healthcare Services, Inc. dba Horizon Blue Cross Blue Shield of New Jersey ("Horizon BCBSNJ")
<b>Principle Address:</b>	3 Penn Plz E Ste PP-15D, Newark, NJ US 07105-2248
<b>Primary Location of Books and Records:</b>	3 Penn Plz E Ste PP-15D, Newark, NJ US 07105-2248
<b>Contact Person for Filing:</b>	Catherine Merlino, Controller Tel: 973-466-5954, Fax: 973-466-4632 <a href="mailto:catherine_merlino@horizonblue.com">catherine_merlino@horizonblue.com</a>
<b>Location/Date of Formation:</b>	New Jersey/December 7, 1932

**A) Subsidiaries & Affiliates - List all Subsidiaries and Affiliates of the HSC and a brief description of their activities and identifying services that are provided to the HSC (insert rows as needed):**

<b>Name of Subsidiary/Affiliate<sup>1</sup></b>	<b>Description of Activities &amp; HSC Services Provided</b>
Horizon Casualty Services, Inc. (HCS)	A managed care workers' compensation company which offers integrated care and administrative services to insurers employers, and third-party administrators.
Horizon Healthcare Dental, Inc. (HHD)	A New Jersey dental plan organization offering dental products.
Horizon Healthcare of New Jersey, Inc. (HHNJ)	A health maintenance organization ("HMO") operating in New Jersey offering commercial HMO, Dual Special Needs Plans ("DSNP"), and contracted with the NJ Division of Medical Assistance and Human Services to provide managed Medicaid services.
Horizon Insurance Company, Inc. (HIC)	A health insurer operating in New Jersey offering senior and ancillary products, including Medicare Advantage plans, Medicare supplemental plans and managed vision plans.

<sup>1</sup> The list of subsidiaries and affiliates reflect operating companies within the holding system.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**B) Management & Governance:**

**1) Briefly describe the management and governance structure of the HSC below:**

Horizon BCBSNJ is a health service corporation organized and operating under the Health Service Corporation Act. N.J.S.A. 17:48E-1 et seq. As of December 31, 2020, the Board of Directors was a 16 member board including: an Executive Chair, Horizon BCBSNJ's Chief Executive Officer and President, nine (9) elected directors, four (4) gubernatorial appointees, and one (1) appointee by the Speaker of the New Jersey Assembly. There is a current vacancy on the Board of Directors for a public director to be appointed by the New Jersey Senate President. The Board of Directors is as listed in Exhibit I-B-2. The Board of Directors acts as the ultimate decision-making body of Horizon BCBSNJ and advises and oversees Management. Management is responsible for the day-to-day operations and management of Horizon BCBSNJ. Kevin P. Conlin was the Chief Executive Officer and President of Horizon BCBSNJ until April 6, 2020 at which time Gary D. St. Hilaire became Chief Executive Officer and President. Mr. Conlin continued as Chairman of the Board throughout 2020.

**2) Attach as Exhibit IB2 a chart of all officers, directors, senior management and trustees, their titles, and a brief description of their responsibilities.**

**II) Mission:**

**A) Describe the HSC's mission and how it fulfills the statutory mission pursuant to N.J.S.A. 17:48E-3a.**

Under N.J.S.A. 17:48E-3a, a health service corporation shall not be established as a corporation organized for pecuniary profit. It should operate for the benefit of its subscribers. The Health Service Corporation Act states that a health service corporation's mission shall be to: (1) provide affordable and accessible health insurance to its subscribers; and (2) promote the integration of the health care system to meet the needs of its subscribers.

Horizon BCBSNJ's mission statement is as follows: "We empower our members to achieve their best health".

**B) Provide a chart with the group's New Jersey Medical Loss Ratio Results for the Individual, Small Employer and Large Group markets pursuant to N.J.A.C. 11:20-6.3, -7.4 and -7.5, N.J.A.C. 11:21-7A.4, -7A.5, and -9.3, and N.J.S.A. 17:48-10.1 respectively, for most recent policy year as follows: Premiums; Claims; Loss Ratio; and NJ Refund Liability (net any Federal Liability):**

Market	Premiums	Claims	Loss Ratio	NJ Refund Liability (net any Federal Liability)
Individual	\$1,263,256,683	\$1,015,765,984	80%	\$TBD
Small Employer	\$1,431,164,529	\$1,167,258,235	82%	\$TBD
Large Group	\$3,313,619,673	\$2,866,992,469	87%	\$TBD

Note:

The above information is preliminary and is subject to change upon the filing of the actual reports in August 2021.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

Per N.J.A.C. 11:20-7.4 and N.J.A.C. 11:21-7A, the individual, small employer and large group loss ratio filing requires a 6 month run-out of claims data which is not reflected. Additionally, this submission does not account for any final risk adjustment impact for the 2020 year or other regulator adjustment. A complete submission will be available on the New Jersey Department of Banking and Insurance's ("DOBI") website at <http://www.nj.us/dobi/> on or after August 1 of each year.

**III) Activities:**

**A) Describe in detail the most significant business activities of the HSC and all material subsidiaries and affiliates.**

**2020 Business Activities**

In 2020, Horizon BCBSNJ continued to provide its members with access to affordable, high quality health coverage in all market segments. Horizon BCBSNJ provided health insurance coverage to roughly 3.7 million members through commercial and governmental health plans. See below chart for details on our enrollment by customer type and funding method.

<b>Customer Type:</b>	<b>Number of Members</b>
Large Group	1,454,080
State Health Benefits Program	615,865
Federal Employee Program	125,227
Small Group	205,234
Individual	167,095
Medicaid	1,005,773
Medicare	112,512
<b>Total members</b>	<b>3,685,786</b>
<b>Funding Method:</b>	
Fully-insured	1,916,001
Self-insured	1,769,785
<b>Total members</b>	<b>3,685,786</b>

***Commercial Markets***

Horizon BCBSNJ provided a wide array of commercial health insurance products to its enrollees in 2020 with leading market shares in both the individual and group markets. Horizon BCBSNJ was one of three carriers on the Health Insurance Marketplace and played a significant role in the individual market. It also provided quality health insurance solutions to many employers, ranging from small to large private employers, local municipals, the State of New Jersey, federal

**New Jersey Department of Banking and Insurance**  
**Division of Insurance**  
**Office of Solvency Regulation**

**Health Service Corporation Information Statement**  
**Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

employees, and many others.

At the end of 2020, Horizon BCBSNJ had in excess of 2.5 million insured and self-funded commercial health plan members.

### **Individual Market**

The Individual market consists of New Jersey residents who do not have health insurance benefits through their employer or otherwise not enrolled in Medicare, Medicaid, or other governmental health plans. In June of 2019, Governor Murphy signed legislation to establish a State-Based Exchange (SBE) to be funded by an assessment on premiums. New Jersey transitioned to a SBE on the Federal Platform for plan year 2020 as part of the ultimate transition to a State Based Exchange for plan year 2021. Individual health plans were available on the SBE on the Federal Platform or directly from the carriers. In 2021, New Jersey fully transitioned to a SBE as expected.

Plans in the individual market are offered pursuant to the requirements applicable to all carriers under the New Jersey Individual Health Coverage Program (“IHC”). Horizon BCBSNJ offered two EPO plan design options on and off the marketplace, the Horizon EPO Advantage broad network plans and the Horizon OMNIA<sub>SM</sub> tiered network plans. Additionally, an HMO option was sold off the marketplace through an affiliate, Horizon Healthcare of New Jersey, Inc.

As of December 31, 2020, 296,935 New Jersey consumers had health insurance coverage through the Individual market. Roughly 70% of those consumers purchased their health plan on the health exchange. Horizon BCBSNJ’s total Individual membership at the end of 2020 stood at 168,383, representing a 56.71% market share per the DOBI website made available at [https://www.state.nj.us/dobi/division\\_insurance/ihcseh/enroll/20q4/ihccarrier.pdf](https://www.state.nj.us/dobi/division_insurance/ihcseh/enroll/20q4/ihccarrier.pdf).

Of Horizon BCBSNJ’s members, approximately 93% of the covered lives in the individual market purchased an OMNIA<sub>SM</sub> Health Plan in 2020. For Horizon BCBSNJ’s individual market, on a statutory accounting basis (“STAT”), it incurred \$989,988,692 in claims and earned 1,334,925,753 in premiums.

### **Small Employer Market**

The Small Employer market consists of companies with up to 50 employees who provide an employer-sponsored health plan. Plans in this market segment comply with the NJ Small Employer Health Coverage Program (“SEH”) rules.

In 2020, Horizon BCBSNJ offered a range of ACA compliant plans. Plan designs included closed panel HMO and EPO plans such as the Horizon HMO, Horizon Advantage EPO and Horizon OMNIA<sub>SM</sub> plans as well as plans with out-of-network coverage such as the Horizon Direct Access. Horizon BCBSNJ also allowed for the renewal of “grandmothered” transitional policy plans issued prior to the ACA market reform rules pursuant to the federal transitional policy rules.

As of the end of 2020, roughly 47,337 small employers offered insurance to their employees, covering a total of 295,820 employees and their eligible dependents in New Jersey’s small employer market. Per the DOBI website, Horizon BCBSNJ’s total small employer membership at the end of 2020 stood at 205,120. Of Horizon BCBSNJ’s members, roughly 59% had purchased an OMNIA<sub>SM</sub> Health Plan. Horizon BCBSNJ’s estimated market share was 73.18% pursuant to the carrier enrollment data made available on the DOBI website at [https://www.state.nj.us/dobi/division\\_insurance/ihcseh/enroll/20q4/sehplansbycarrier.pdf](https://www.state.nj.us/dobi/division_insurance/ihcseh/enroll/20q4/sehplansbycarrier.pdf).

For Horizon BCBSNJ’s small employer market, on a STAT basis, Horizon BCBSNJ incurred \$1,183,782,535 in claims and earned \$1,489,975,887 in premiums.

### **Large Employer Market**

A majority of the commercial health plans are through employers with 51+ employees. Large employer customers can range from local employers to multistate national accounts, and includes labor unions, municipalities, and the federal

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

employee health plans.

These markets can be insured or self-insured. Horizon BCBSNJ issued insured large employer plans covering 425,473 lives, and administered self-funded large employer plans covering 1,153,920 lives. There is greater variability in the plan designs, benefit structures and actuarial values as compared to the IHC and SEH plans. Further, pricing in the large employer market is more variable due to experience rating. As of the end of 2020, Horizon BCBSNJ offered HMO, EPO, including OMNIA, PPO, and Direct Access health plans in these market segments.

For insured large employer plans, Horizon BCBSNJ incurred \$2,828,093,924 in claims and earned \$3,304,366,237 in premiums. For self-funded large employer plans, on a STAT basis, Horizon BCBSNJ incurred \$5,551,522,724 in employer-funded claims and earned \$277,189,467 in administration fees/charges.

**State Health Benefits Program and the School Employees' Health Benefits Program**

The State Health Benefits Program ("SHBP") and School Employees' Health Benefits Program ("SEHBP") together represent one of the largest public sector group health plans in the country. All New Jersey State active employees, employees of state colleges and universities, and retirees, are covered by the SHBP. Additionally, local government groups, such as municipalities and counties, may elect to participate in the SHBP to provide coverage for their active employees, retirees, and eligible dependents. Employees of local boards of education and community colleges may elect to participate in the SEHBP for their active employees, retirees, and eligible dependents.

Horizon BCBSNJ has held the honor of being the medical carrier for the state of New Jersey's State Health Benefits Program (SHBP) and the School Employees' Health Benefits Program (SEHBP) since 1996. The most recent SHBP/SEHBP contract was awarded in 2019 for an effective date of January 1, 2020. Horizon BCBSNJ is the sole administrator of the SHBP and SEHBP programs for the active members. Plan options includes PPO, HMO, and High-Deductible Health Plan (HDHP) offerings to active members, with the same programs being made available to the under-65 retirees. The contract term is for three years with the potential for two one-year extensions.

As of the end of 2020, Horizon BCBSNJ's total membership in the SHBP and SEHBP market was 615,865. On a STAT basis, Horizon BCBSNJ incurred \$4,070,851,793 in self-funded claims for the SHBP/SEHBP and earned \$89,566,943 in administration fees/charges.

**Federal and State Governmental Health Programs (Medicare, Medicaid, etc.)**

The Government Programs division of Horizon BCBSNJ manages all lines of government business; serving members across both Medicare and Medicaid lines of business, with special attention to Aged, Blind & Disabled (ABD), Managed Long-Term Services & Supports ("MLTSS"), Dual-Eligible, and other specialized populations.

***Medicaid Markets***

The Medicaid business, operated by Horizon Healthcare of New Jersey, Inc., a New Jersey HMO doing business as Horizon NJ Health, is New Jersey's largest Medicaid managed care organization serving 1,005,773 beneficiaries (as of 12/31/20) through the NJ FamilyCare and MLTSS programs. On a STAT basis, Horizon NJ Health incurred \$4,740,924,950 in claims for the Medicaid Managed Care and MLTSS population and earned \$5,651,136,538 in premium/fees for service.

Horizon NJ Health has developed targeted member-centered services, innovative programs and community outreach to serve the diverse needs of its members. Additionally, Horizon NJ Health is accredited by the National Committee for Quality Assurance (NCQA).

One of the primary missions of Horizon NJ Health is to reduce the persistent gaps in health care access and quality that

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

disproportionately affects New Jerseyans from diverse racial and ethnic backgrounds. Many who experience disparate care live in neighborhoods lacking access to quality health services or to providers. To address these persistent gaps, members of Horizon NJ Health's staff interact extensively with community members on a daily basis, offering health education to adults and children, providing health screenings, and taking steps to assure that community members receive all health benefits that are available to them.

***Medicare Markets***

The Government Programs division markets and sells a competitive and wide-ranging line of senior market products that serves New Jersey beneficiaries that are Medicare eligible for reasons of age or disability. Horizon BCBSNJ's Medicare plans include Medicare Advantage, Medicare Part D, Medicare Supplemental and Dual Special Needs (DSNP) plans. For total Medicare market, Horizon together with its affiliates insured 112,512 lives, earned premiums totaling \$911,838,023, and incurred claims totaling \$754,238,551.

**Key Accomplishments in 2020**

***WE EMPOWER***

**Social Determinants of Health (SDOH) Program**

After a successful pilot in 2019 in Newark, Horizon BCBSNJ launched a Social Determinants of Health demonstration program, Horizon Neighbors in Health™, with eight provider partners in 2020. Horizon BCBSNJ's social determinants of health program is the most significant in the State with an investment of \$25 million over 3 years. Horizon partnered with non-profit health care institutions to deploy community health workers to knock on doors in vulnerable neighborhoods to meet with residents to provide convenient and effective access to health care resources and to encourage members, particularly in the Medicaid population, to take advantage of primary care physicians to treat chronic conditions such as diabetes, high blood pressure, and asthma.

The program is currently utilizing 40 community health workers, 4 personal health assistants, and community resource linkages through the personalized community referral solution, NowPow, to address social and psycho-social barriers for some of our high and rising risk members. Horizon's commitment to address social determinants of health puts it at the leading edge of payer activity. Through Horizon Neighbors in Health, Horizon BCBSNJ, is creating a scalable and sustainable program to engage members that can benefit the most.

**Care for the Mind and Body**

As of January 1, 2020, Horizon BCBSNJ successfully in-sourced all behavioral health management of the government programs lines of business from its vendor partner. All behavioral health management for the commercial lines of business was transitioned in house as of March 2020. This extensive shift was made in order to ensure that end to end behavioral health solutions are delivered in a fully coordinated manner. Below are some key components of Horizon BCBSNJ's behavioral health program:

**Integrated Behavioral Health Delivery**

A core premise of Horizon BCBSNJ's integrated behavioral health strategy is the belief that the best care outcomes and cost efficiencies are achieved when physical, social and behavioral health issues are addressed in an integrated manner, and if possible, in a way which preempts exacerbation of illness. There is no "one size fits all" approach to behavioral health and the Horizon Behavioral Health team is committed to helping members secure access to the care they need. To meet these needs, Horizon Behavioral Health provides convenient access to mental health and substance use disorder treatment services through a variety of member focused programs.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

The Horizon BCBSNJ behavioral health and medical teams collaborate to coordinate and manage mental health and substance use disorder services. Contracted network behavioral health facilities and professionals offer a full range of treatment and counseling services to members and their families including: a full continuum of facility-based mental health and substance use disorder treatment programs including hospitals, residential facilities, intensive outpatient and partial hospitalization programs, as well as individual and group psychotherapy, family counseling, crisis intervention, and substance use recovery programs and support. Referrals to community resources are also offered and autism services are available within the network.

Horizon Behavioral Health is additionally committed to expanding access to evidence based practices through telehealth and by expanding our virtual product line to include evidence-based treatments and specialty services to meet a variety of treatment and population needs.

**Integrated System of Care (ISC)**

The Integrated System of Care pilot, launched in July 2019, was successfully completed in July 2020. Building on promising early results from the pilot, Horizon BCBSNJ launched a multi-stage, statewide expansion in July 2020 to assure that Horizon BCBSNJ members with high acuity behavioral health conditions (severe mental illness and substance use disorder) have access to high quality, fully integrated behavioral health and physical health care leveraging SDOH supports. The ISC ensures that Horizon BCBSNJ's most vulnerable members are guided through the complexities of the health care system to optimal outcomes for their behavioral health, physical health, and social needs. The ISC model places the member at the center of care, and using the behavioral health provider to "quarterback" care on behalf of the member, builds a network of physical and behavioral health care providers, along with social service supports, around the member. This novel approach has garnered national attention and promises to put Horizon Behavioral Health on the cutting edge of behavioral health integration.

**Supportive Care**

Through our Supportive Care Program<sup>SM</sup>, we helped members who were experiencing a serious medical illness or undergoing treatment. This free and voluntary pilot program connected these members to palliative care services that improve the quality of life for both them and their families. Supportive care nurses worked with members, their families and their doctors to help them identify personal care goals, navigate the health care system, understand their benefits and collaborate to address their specific needs. While this pilot program is no longer active, many of the lessons learned have been incorporated into our care management programs that help our members deal with their medical conditions every day.

***WE LEAD***

**J.D. Power Award**

For the third time in four years, Horizon BCBSNJ was rated #1 in member satisfaction among commercial health plans in New Jersey by J.D. Power.

**COVID-19**

When the pandemic first began, Horizon BCBSNJ acted quickly to ensure that our members would continue to have access to the health services they needed - whether it be for testing or treatment related to COVID-19, routine care, mental health treatment, or vital prescriptions. We waived all member cost-sharing – copays, coinsurance, and deductibles - associated with COVID-19 testing and care. These changes will remain in effect until the end of the public health emergency. We also expanded access to telemedicine services and waived cost-sharing obligations for those services when delivered by an in-network provider.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

Additionally, Horizon BCBSNJ took a leadership role by partnering with the State in its coordinated response effort by providing \$2.35 million worth of PPE, including 500,000 N95 respirator masks and 81,000 face shields. This was the largest single donation made by the Company in its 88-year history. When the New Jersey Pandemic Relief Fund was opened, Horizon BCBSNJ stepped forward with an additional \$2 million donation.

Further, to support employers or individuals impacted by the economic downturn triggered by the pandemic, Horizon BCBSNJ waived rules to allow furloughed employees and those working fewer hours to remain covered, helped those who lost employer-sponsored coverage secure a new health plan, and allowed businesses to defer premium payments. To help frontline health care providers manage the impact to their practices, we offered advances against future payments on care for Horizon members. In all, the impact of these measures exceeded \$60 million.

### **COVID-19 Testing Competition**

To accelerate safe return to work and school, Horizon BCBSNJ joined a coalition of entities that teamed up with XPRIZE and OpenCovidScreen to sponsor the XPRIZE Rapid COVID testing competition offering \$5 million in incentive prizes. Having more affordable testing and obtaining results faster may help lead to more people being tested as well as better, data-driven contact tracing and isolating strategies. The XPRIZE Rapid COVID testing competition encouraged participants to meet the need to scale testing capabilities by 100-times past the then-current standard, and support the ability to safely return to everyday activities.

### ***WE INNOVATE***

#### **Lowering Prescription Costs**

In 2020, Horizon BCBSNJ entered into a collaborative partnership with Civica, a not-for-profit generic drug maker to create a new subsidiary dedicated to lowering the cost of selected generic drugs. This partnership is expected to provide savings for consumers and promote competition in the generic drugs market. The Civica partnership joins other Horizon BCBSNJ initiatives aimed at lowering the cost of prescriptions for members. Examples of these initiatives include:

- The Gemini price transparency tool that allows prescribers to present their patients with lower cost Rx options;
- Pharmacy case management in which Horizon works with value-based partners to promote use of generics, manage use of specialty drugs, improve adherence and help reduce the overall cost of care; and
- Utilization alert systems that flag potential abuse and overutilization of opioids, and pharmacy lock-in program that averts duplicate opioid prescriptions.

#### **Choices That Deliver**

Horizon BCBSNJ continues to be the state's leader in offering affordable coverage that addresses the needs of New Jersey's residents. In the individual market, Horizon BCBSNJ offered seven competitively priced plans for 2020, led by four OMNIA Health Plans (Bronze HSA, Silver, Silver HSA and Gold) and three broad-network Horizon Advantage plans.

Our OMNIA Health Plans, launched in 2016, were created in response to consumer demand for coverage that would provide access to quality care at a lower cost. These tiered-network plans feature premiums with an average discount of more than 10 percent, when compared to equivalent broad-network products, and give our members the opportunity to save even more on their out-of-pocket costs (copayments, coinsurance and deductibles) when they receive care from OMNIA Tier 1-designated doctors, hospitals and other health care professionals.

In 2020, the OMNIA Health Plans continued to be our premier product line, with more than 467,000 members enrolled in one of these innovative products across the commercial markets, which collectively score higher in member satisfaction than the equivalent broad-network plans.



**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

We also improved our portfolio of non-medical ancillary product solutions. Now offered under the branded name Horizon EXPAND, our supplemental products and services go beyond medical coverage to give our customers the products, tools and resources they need to provide a broad and attractive range of benefit offerings.

**Options for Those Who Need Them**

Through our Government Programs division, we are focused on our Medicaid and Medicare members. In 2020, we continued to offer innovative plan options to better serve residents in all 21 New Jersey counties who are most in need of health care, including our senior population.

Our Government Programs division serves the state's Medicaid community through our Horizon NJ Health subsidiary. In 2020, Horizon NJ Health celebrated its 27th anniversary. What started in one county 27 years ago has grown into the largest Medicaid managed care organization in the State, serving more than a million members and providing coverage to those most in need, including low-income families, individuals with disabilities and people in need of long-term care services. Horizon NJ Health also serves the State's most vulnerable residents through our Managed Long Term Services & Supports (MLTSS) program. MLTSS members have Care Managers who strive to enable them to live in their homes and communities as long as possible by providing services such as home-delivered meals, assisted-living, patient care assistance, medical daycare services, home modifications, vehicle modifications and non-medical transport.

***WE CARE***

**The Horizon Foundation for New Jersey**

The Horizon Foundation made 86 grants in 2020, totaling more than \$2.9 million, and has now made 1,650 grants since its inception in 2004, totaling more than \$62 million.

**Knocking Out Opioid Abuse**

In 2020, The Horizon Foundation for New Jersey, together with The Partnership for a Drug-Free New Jersey (PDFNJ), continued its support of Knock Out Opioid Abuse (KOOA), an initiative that addresses the opioid epidemic through community outreach, prescriber and parent education, and a statewide awareness campaign.

The multi-year KOOA initiative has sponsored a series of town halls to reduce stigma and raise community awareness of the epidemic. The feedback on these town halls has been overwhelmingly positive. According to an evaluation conducted by Rutgers University regarding the program's impact, hundreds of town hall participants are more informed, and are more likely to share lessons learned, talk with children and young adults about the risks of opioid addiction, and safely dispose of opioid medications stored at home.

Due to the COVID-19 pandemic, town halls in 2020 were conducted virtually.

**Engaging the Audience**

Believing that open communication is essential in the fight against the opioid epidemic, The Horizon Foundation for New Jersey continued its support of *Anytown*, a musical developed by the George Street Playhouse. *Anytown* explores the opioid impact on students and families in a way that is easily understood by its intended audience of students in grades seven through 12. *Anytown* has been available virtually amid the COVID-19 pandemic and will continue to be offered cost free to schools and community organizations through June 2021.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**Empowering the Provider Community**

To help educate health professionals authorized to prescribe in New Jersey, Horizon BCBSNJ and the PDFNJ launched a one-hour education webinar entitled *Do No Harm: Exploring Strategies for Safer Prescribing of Opioids*, which provides information vital to promoting safer prescribing practices to keep patients safe from opioid misuse and addiction. According to the PDFNJ, since its launch in May, more than 200 health care professionals, caring for an estimated 220,000 patients, have completed the course (based on self-reported information from participating medical professionals).

**Horizon Cares**

Horizon BCBSNJ employees remain committed to their communities even in a pandemic. Through participation in our Horizon *Cares* program, 99 employees volunteered more than 2800 hours to non-profit organizations throughout the state in 2020.

Horizon BCBSNJ is the statewide sponsor of the American Cancer Society.

Horizon BCBSNJ and its employees also supported select nonprofit organizations in New Jersey, such as the Greater Newark Conservancy and the Community FoodBank of New Jersey through our Days of Caring program. And, Horizon BCBSNJ employees took advantage of the Matching Gifts Program, with the Company matching a record \$595,292 in gifts to eligible non-profit organizations in 2020.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**Assets, Liabilities, Revenue, Expenses:**

**B) Provide a separate and distinct summary of the financial information from the HSC's most recent Annual Statement filing on the following:**

**1) Assets; see below**

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	2,827,956,206	0	2,827,956,206	2,261,183,973
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	4,459,152	0	4,459,152	5,328,997
2.2 Common stocks.....	1,826,380,837	23,346,972	1,803,033,865	1,671,952,296
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$ ..... encumbrances).....	0	0	0	0
5. Cash (\$ .....(265,350,770) , Schedule E-Part 1), cash equivalents (\$ .....57,023,418 , Schedule E-Part 2) and short-term investments (\$ .....15,005,390 , Schedule DA).....	(193,321,962)	0	(193,321,962)	(231,489,205)
6. Contract loans (including \$ ..... premium notes).....	0	0	0	0
7. Derivatives (Schedule DB).....	0	0	0	0
8. Other invested assets (Schedule BA).....	10,175,585	0	10,175,585	783,973
9. Receivables for securities.....	9,883,935	0	9,883,935	246,632
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	4,485,533,752	23,346,972	4,462,186,780	3,707,406,665
13. Title plants less \$ ..... charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	17,013,779	0	17,013,779	17,548,046
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	223,816,346	4,247,888	219,568,458	253,516,504
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	172,000,000	0	172,000,000	150,342,090
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	268,805,950	0	268,805,950	76,879,397
17. Amounts receivable relating to uninsured plans.....	450,413,908	15,277,425	435,136,483	426,964,161
18.1 Current federal and foreign income tax recoverable and interest thereon.....	37,755,449	0	37,755,449	143,732,570
18.2 Net deferred tax asset.....	0	0	0	131,591,297
19. Guaranty funds receivable or on deposit.....	25,223,243	0	25,223,243	30,613,328
20. Electronic data processing equipment and software.....	31,305,267	0	31,305,267	39,235,174
21. Furniture and equipment, including health care delivery assets (\$ ..... ).....	478,444,962	478,444,962	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	380,142,985	0	380,142,985	215,067,194
24. Health care (\$ .....167,429,375 ) and other amounts receivable.....	427,317,287	115,246	427,202,041	378,877,867
25. Aggregate write-ins for other-than-invested assets.....	504,368,703	387,723,467	116,645,236	113,092,278
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	7,502,141,631	909,155,960	6,592,985,671	5,684,866,572
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. Total (Lines 26 and 27).....	7,502,141,631	909,155,960	6,592,985,671	5,684,866,572
<b>DETAILS OF WRITE-INS</b>				
1101. ....	0	0	0	0
1102. ....	0	0	0	0
1103. ....	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Expenses.....	386,255,575	386,255,575	0	0
2502. Non-Bankable checks.....	1,467,892	1,467,892	0	0
2503. State Income Tax Recoverable.....	0	0	0	9,171
2598. Summary of remaining write-ins for Line 25 from overflow page.....	116,645,236	0	116,645,236	113,083,107
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	504,368,703	387,723,467	116,645,236	113,092,278

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**2) Liabilities; see below**

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ _____, reinsurance ceded)	1,275,840,492	0	1,275,840,492	1,009,441,755
2. Accrued medical incentive pool and bonus amounts	0	0	0	0
3. Unpaid claims adjustment expenses	9,677,807	0	9,677,807	8,316,897
4. Aggregate health policy reserves, including the liability of \$ _____ for medical loss ratio rebate per the Public Health Service Act	448,797,319	0	448,797,319	217,222,187
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserves	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	88,416,324	0	88,416,324	87,601,453
9. General expenses due or accrued	1,107,912,893	0	1,107,912,893	1,064,301,124
10.1 Current federal and foreign income tax payable and interest thereon (including \$ _____ on realized capital gains (losses))	0	0	0	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others	23,941,883	0	23,941,883	0
13. Remittances and items not allocated	0	0	0	0
14. Borrowed money (including \$ _____ current) and interest thereon \$ _____ (including \$ _____ current)	71,240,963	0	71,240,963	80,454,251
15. Amounts due to parent, subsidiaries and affiliates	85,514,285	0	85,514,285	73,500,219
16. Derivatives	0	0	0	0
17. Payable for securities	7,869,461	0	7,869,461	1,754,780
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$ _____ authorized reinsurers, \$ _____ unauthorized reinsurers and \$ _____ certified reinsurers)	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ _____) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	7,464,000	0	7,464,000	7,520,000
23. Aggregate write-ins for other liabilities (including \$ _____ current)	397,074,824	0	397,074,824	402,073,528
24. Total liabilities (Lines 1 to 23)	3,523,750,251	0	3,523,750,251	2,952,186,194
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	198,410,758
26. Common capital stock	XXX	XXX	0	0
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	0	0
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	3,069,235,420	2,534,269,620
31. Unassigned funds (surplus)	XXX	XXX	0	0
32. Less treasury stock, at cost:				
32.1 _____ shares common (value included in Line 26 \$ _____)	XXX	XXX	0	0
32.2 _____ shares preferred (value included in Line 27 \$ _____)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	3,069,235,420	2,732,680,378
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	6,592,985,671	5,684,866,572
<b>DETAILS OF WRITE-INS</b>				
2301. Deposits from other organizations	158,734,518	0	158,734,518	156,282,113
2302. Liability for post-retirement benefits	107,575,430	0	107,575,430	104,249,539
2303. Risk Adjustment Payable	130,764,876	0	130,764,876	141,541,876
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	397,074,824	0	397,074,824	402,073,528
2501. 2020 Insurer Fee	XXX	XXX	0	198,410,758
2502. _____	XXX	XXX	0	0
2503. _____	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	198,410,758
3001. Special contingent surplus-individual contracts	XXX	XXX	1,394,479,665	706,698,361
3002. Special contingent surplus-other	XXX	XXX	1,674,755,755	1,827,571,259
3003. _____	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	3,069,235,420	2,534,269,620

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**3) Revenues;**

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	14,793,648	14,898,941
2. Net premium income (including \$ ..... <sup>0</sup> non-health premium income).....	XXX	12,272,315,388	11,611,553,406
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	3,387,882	(64,002,373)
4. Fee-for-service (net of \$ ..... medical expenses).....	XXX	0	0
5. Risk revenue.....	XXX	0	0
6. Aggregate write-ins for other health care related revenues.....	XXX	0	0
7. Aggregate write-ins for other non-health revenues.....	XXX	0	0
8. Total revenues (Lines 2 to 7).....	XXX	12,275,703,270	11,547,551,033
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits.....	0	4,232,819,067	4,316,420,285
10. Other professional services.....	0	219,784,575	169,113,179
11. Outside referrals.....	0	193,286,932	188,535,752
12. Emergency room and out-of-area.....	0	33,669,485	30,580,615
13. Prescription drugs.....	0	682,954,418	699,506,306
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....	0	0	0
16. Subtotal (Lines 9 to 15).....	0	5,362,514,477	5,404,156,137
<b>Less:</b>			
17. Net reinsurance recoveries.....		(4,777,698,746)	(4,701,561,616)
18. Total hospital and medical (Lines 16 minus 17).....	0	10,140,213,223	10,105,717,753
19. Non-health claims (net).....	0	0	0
20. Claims adjustment expenses, including \$ ..... <sup>273,355,633</sup> cost containment expenses.....	0	375,185,928	344,960,254
21. General administrative expenses.....	0	1,625,934,229	1,330,523,114
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only).....	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	12,141,333,380	11,781,201,121
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	134,369,890	(233,650,088)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	0	86,311,821	80,198,037
26. Net realized capital gains (losses) less capital gains tax of \$ ..... <sup>(15,191,388)</sup> .....	0	(15,191,388)	9,252,275
27. Net investment gains (losses) (Lines 25 plus 26).....	0	71,120,433	89,450,312
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ ..... )].....	0	0	0
29. Aggregate write-ins for other income or expenses.....	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	205,490,323	(144,199,776)
31. Federal and foreign income taxes incurred.....	XXX	(147,975,206)	(145,422,689)
32. Net income (loss) (Lines 30 minus 31).....	XXX	353,465,529	1,222,913
<b>DETAILS OF WRITE-INS</b>			
0601. ....	XXX	0	0
0602. ....	XXX	0	0
0603. ....	XXX	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	XXX	0	0
0701. ....	XXX	0	0
0702. ....	XXX	0	0
0703. ....	XXX	0	0
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above).....	XXX	0	0
1401. ....	0	0	0
1402. ....	0	0	0
1403. ....	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....	0	0	0
2901. ....	0	0	0
2902. ....	0	0	0
2903. ....	0	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....	0	0	0

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year	2 Prior Year
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>		
33. Capital and surplus prior reporting year .....	2,732,680,377	2,985,261,366
34. Net income or (loss) from Line 32 .....	353,465,529	1,222,913
35. Change in valuation basis of aggregate policy and claim reserves .....	.0	.0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....9,122,200 .....	96,692,995	145,588,570
37. Change in net unrealized foreign exchange capital gain or (loss) .....	4,314,112	1,259,201
38. Change in net deferred income tax .....	(123,043,436)	(128,420,260)
39. Change in nonadmitted assets .....	8,156,750	(272,658,665)
40. Change in unauthorized and certified reinsurance .....	.0	.0
41. Change in treasury stock .....	.0	.0
42. Change in surplus notes .....	.0	.0
43. Cumulative effect of changes in accounting principles .....	.0	.0
44. Capital Changes:		
44.1 Paid in .....	.0	.0
44.2 Transferred from surplus (Stock Dividend) .....	.0	.0
44.3 Transferred to surplus .....	.0	.0
45. Surplus adjustments:		
45.1 Paid in .....	.0	.0
45.2 Transferred to capital (Stock Dividend) .....	.0	.0
45.3 Transferred from capital .....	.0	.0
46. Dividends to stockholders .....	.0	.0
47. Aggregate write-ins for gains or (losses) in surplus .....	(3,030,907)	427,252
48. Net change in capital and surplus (Lines 34 to 47) .....	336,555,043	(252,580,989)
49. Capital and surplus end of reporting year (Line 33 plus 48)	3,069,235,420	2,732,680,377
<b>DETAILS OF WRITE-INS</b>		
4701. Adjustment to PY Change in Reserves .....	(879,338)	.0
4702. Adjustment to PY Change in Mkt Value of Stocks .....	9,038	.0
4703. Change in Pension/OPER .....	(2,160,607)	427,252
4798. Summary of remaining write-ins for Line 47 from overflow page .....	.0	.0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	(3,030,907)	427,252

4) Expenses; See above

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**IV) Compensation Data<sup>2</sup>:**

**A) Provide the total compensation paid during the reporting year to each of the HSC's current and former officers, directors, trustees, and the five other highest compensated employees who are not an officer, director or trustee by completing the following table (add rows as needed):**

Name & Title	TOTAL COMPENSATION
<b>Officers</b>	
Kevin P. Conlin, Chairman	\$5,150,144
Christopher M. Lepre, Executive Vice President, Commercial Business	\$2,935,530
Mark L. Barnard, Executive Vice President, Government Programs and Operations	\$2,788,328
Gary D. St. Hilaire, President & CEO	\$2,728,120
Douglas R. Simpson, Senior Vice President and CFO	\$2,438,722
Allen J. Karp, Executive Vice President, Health Care Transformation and Management	\$2,182,389
Linda A. Willett, Senior Vice President, General Counsel and Secretary	\$1,967,409
Margaret M. Coons, Senior Vice President, Human Resources	\$1,246,924
Douglas E. Blackwell, Senior Vice President and Chief Information Officer	\$1,906,083
William D. Georges, Senior Vice President and Chief Strategy Officer	\$1,223,445
<b>Five Next Highly Compensated Employees</b>	
Joseph Albano, Vice President, Commercial & Specialty Markets	\$1,070,736
Vincent Alonge, Vice President, Enterprise Operations	\$1,030,326
Vijay Venkatesan, Vice President, Chief Analytics Officer	\$1,020,379
David J. Rosenberg, Vice President, Corporate Finance and Chief Accounting Officer	\$985,699
David Gambino, Vice President, Transformation & Pharmacy	\$945,871

<sup>2</sup>Horizon BCBSNJ submits the compensation paid to Officers and Directors, and the five other highest compensated employees who were employed, appointed, or elected in 2020. Gary D. St. Hilaire became CEO and President on April 6, 2020. Kevin P. Conlin remained as Chair. Margaret M. Coons retired effective June 30, 2020 and Douglas Blackwell retired effective April 30, 2020.

**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

<b>Directors</b>	
John J. Ballantyne	\$77,000
Todd C. Brown	\$197,500
Leonard S. Coleman Jr.	\$133,500
Kevin P. Conlin	\$0
Laurence M. Downes	\$131,500
Leonard G. Feld	\$103,000
Aristides W. Georgantas	\$146,500
Michelle A. Gourdine	\$103,000
Paul A. Juliano <sup>3</sup>	\$31,560
Brian M. Kinkead	\$112,000
Joseph M. Kyrillos	\$92,000
Carlos A. Medina	\$117,500
Joseph M. Muniz	\$77,000
Joanne Pace	\$152,500
Joseph J. Roberts	\$99,500
Gary D. St. Hilaire	\$0

---

<sup>3</sup> Paul A. Juliano was appointed to the Board of Directors on July 30, 2020, replacing Michele A. Brown. Michele A. Brown's director compensation in 2020 was \$77,000.



**New Jersey Department of Banking and Insurance  
Division of Insurance  
Office of Solvency Regulation**

**Health Service Corporation Information Statement  
Pursuant to N.J.S.A. 17:48E-3h (P.L. 2017, c. 100)**

**CERTIFICATION**

I hereby certify on behalf of Horizon Healthcare Services, Inc. dba Horizon Blue Cross Blue Shield of New Jersey that the information submitted in this report pursuant to N.J.S.A. 17:48E-3h is true and correct, and can be relied upon by the Department for the purposes of making its report required by N.J.S.A. 17:48E-3i.

04/28/21

Dated

*Doug Simpson*

\_\_\_\_\_  
Name: Douglas R. Simpson

Title: Executive Vice President and Chief Financial Officer