

To adjust for PDR methodology/calculation change.



**ANNUAL STATEMENT  
FOR THE YEAR ENDING DECEMBER 31, 2024  
OF THE CONDITION AND AFFAIRS OF THE  
Healthier New Jersey Insurance Company**

## **Healthier New Jersey Insurance Company**

(Name)

NAIC Group Code 01202 , 01202 NAIC Company Code 16714 Employer's ID Number 84-3673030  
(Current Period) (Prior Period)

Organized under the Laws of New Jersey, State of Domicile or Port of Entry New Jersey

Country of Domicile \_\_\_\_\_ United States \_\_\_\_\_

Licensed as business type: Life, Accident & Health [  ] Property/Casualty [  ] Hospital, Medical & Dental Service or Indemnity [  ]  
Dental Service Corporation [  ] Vision Service Corporation [  ] Health Maintenance Organization [  ]  
Other [  ] Is HMO, Federally Qualified? Yes [  ] No [  ]

Incorporated/Organized 10/17/2019 Commenced Business 01/13/2020

Main Administrative Office \_\_\_\_\_ 3 Penn Plaza East PP-15D  
(Street and Number)  
Newark, NJ 07105-2248 973-803-0441

(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Primary Location of Books and Records (Street and Number or P.O. Box) 3 Penn Plaza East PP-15D (City or Town, State, Country and Zip Code)

Newark, NJ, US 07105-2248 (City or Town, State, Country and Zip Code), 973-803-0441 (Street and Number) (Area Code) (Telephone Number) (Extension)

Internet Web Site Address \_\_\_\_\_ N/A

Statutory Statement Contact Jordan Greenberg, 973-803-0441  
(Name) (Area Code) (Telephone Number) (Extension)  
jordan\_greenberg@horizonblue.com 973-466-7110  
(E-Mail Address) (Fax Number)

## OFFICERS

Name	Title	Name	Title
Deborah Rittenour #	President and CEO	John William Doll	Secretary
Frank Anthony Melaccio	Interim Treasurer	Mark Leon Barnard	Chair

## OTHER OFFICERS

Patrick Rodney Young \_\_\_\_\_, Vice Chair \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

## **DIRECTORS OR TRUSTEES**

Mark Leon Barnard      Jennifer Gail Velez      Patrick Rodney Young      Annette Catino  
Kyle Christopher Stern      John William Doll

State of ..... New Jersey.....

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County of ..... Essex.....

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the *NAIC Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Jacqueline Bonforte  
Assistant Secretary

Frank Anthony Melaccio  
Interim Treasurer

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_,

a. Is this an original filing? Yes [  ] No [  ]  
b. If no:  
1. State the amendment number 1  
2. Date filed 05/30/2025  
3. Number of pages attached 14