

Glossary of Terms

Allowed Benefit

The maximum dollar amount allowed for covered services, regardless of the provider's actual charge. A provider who participates in a network cannot charge the member more than this amount for any covered service.

Basic/High Deductible Health Plan

The Basic Plan is one of three health plan options offered to Hackensack Meridian *Health* team members and your covered dependents for the 2021 plan year. The Basic Plan is a high deductible health plan (HDHP) that is combined with a health savings account, which allows to you save money, tax free, for your future health care expenses. The Basic/High Deductible health plan (HDHP) has a higher annual deductible and out-of-pocket maximum limit than other plans. Once you meet your annual deductible, your plan will cover 100% of your covered expenses when you use Inner Circle PRIME or Inner Circle providers. BlueCard® further expands your reach by allowing you to take advantage of a nationwide network of providers.

Benefit

Any service or supply covered by the member's health insurance plan or contract.

BlueCard®

When you need care outside of New Jersey, provides access to the nationwide network of Blue Cross and Blue Shield doctors, specialists and hospitals without having to go out of network.

Coinsurance

Coinsurance is the percentage of costs of a covered health care service you pay (20%, for example) after you've met your annual deductible. Let's say your health insurance plan's allowed amount for an office visit is \$100 and your coinsurance is 20%. If you've met your annual deductible, you pay 20% of \$100, or \$20. Horizon BlueCross BlueShield of New Jersey pays the rest. If you haven't met your deductible, you pay the full \$100.

Copayment

A copayment (sometimes called "copay") is a fixed amount (\$20, for example) you pay for a covered health care service after you've paid your deductible. Let's say your health insurance plan's allowable cost for a doctor's office visit is \$100. Your copayment for a doctor visit is \$20. If you've met your annual deductible, you pay \$20, usually at the time of the visit. If you haven't met your deductible, you pay \$100, the full allowable amount for the visit. Copayments can vary for different services within the same plan, like drugs, lab tests and visits to specialists.

Deductible

The deductible is the amount paid out of pocket by the member before Horizon BCBSNJ will pay any expenses. Let's say your health insurance plan includes a \$1,000 annual deductible. This means that you are responsible for the first \$1,000 worth of expenses before your Horizon BCBSNJ begins paying for your expenses.

Flexible Spending Account

A Flexible Spending Account, or FSA, is an arrangement through Hackensack Meridian *Health* that lets you pay for many out-of-pocket medical expenses with tax-free dollars. Allowed expenses include insurance copayments and deductibles, qualified prescription drugs, insulin, and medical devices. A Dependent Care FSA can also be used to help pay for dependent care such as child care and day camp.

You decide how much to put in an FSA, up to a limit set by your employer. You aren't taxed on this money, but if you have money remaining in the account at the end of the year, you may lose some or all of the remaining balance, depending on your employer's arrangement.

Prescription Drug Formulary

A drug formulary or preferred drug list, is a list of prescription drugs, both generic and brand name, used by health insurers and doctors to identify drugs that offer the greatest overall value. The formulary can change from time to time and a member's out of pocket cost is determined by whether a drug is on the formulary, and if so, at what tier.

Global Core®

Global Core provides you with access to doctors and hospitals around the world when you travel. To use Global Core: Before you travel, call Horizon BCBSNJ at **1-844-383-2327** for coverage details, as coverage may vary outside the United States. Always carry your current Horizon BCBSNJ member ID card. If you need care, call the Service Center at **1-800-810-2583 (BLUE)** or collect at **1-804-673-1177**.

Health Savings Account

A Health Savings Account, or HSA, is an arrangement through Hackensack Meridian *Health* that lets you pay for many out-of-pocket medical expenses with tax-free dollars. Allowed expenses include insurance copayments and deductibles, qualified prescription drugs, insulin, and medical devices

You decide how much to put in an HSA, up to a limit set by your employer. You aren't taxed on this money and your HSA funds roll over year over year.

HMH Inner Circle

HMH Inner Circle is a network of doctors, specialists and medical facilities who participate in your Hackensack Meridian *Health* 2021 health plan. Your out-of-pocket costs for covered services will be lower when you see an HMH Inner Circle doctor, health care professional or facility.

HMH Inner Circle PRIME

HMH Inner Circle PRIME is a network of Hackensack Meridian *Health* doctors, specialists and medical facilities. When using HMH Inner Circle PRIME health care professionals, you will not have any out-of-pocket costs for covered services.

In-network Coverage

In-network coverage refers to care delivered by a doctor or other health care professional who participates in the Horizon Managed-Care Network. When you stay in network, you will pay less out of pocket.

OMNIASM Health Plan

The OMNIA Health Plan gives you access to leading doctors, low copays and deductibles. Plus, with Inner Circle PRIME, you'll enjoy the highest level of benefits with no copays or deductibles when you use Hackensack Meridian *Health* facilities, doctors and other health care professionals. As part of this plan, you'll also have access to in-network coverage outside of New Jersey, using the BlueCard network. The OMNIA Health Plan does not include services provided by out-of-network providers.

Out-of-Area Plan

The Hackensack Meridian *Health's* Out-of-Area Plan gives non-New Jersey residents and residents residing in Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Hunterdon, Mercer, Sussex, Warren counties the opportunity to use Inner Circle benefits or get great care with low copays through the Horizon Managed Care network of providers. Plus, you still have access to BlueCard network coverage outside of New Jersey.

Out-of-Network Care

Refers to care provided by a health care provider who does not participate in a Horizon Blue Cross Blue Shield of New Jersey provider network. Using an out-of-network provider will likely result in higher out-of-pocket costs, and certain plans, like the OMNIA Health Plan, do not provide any out-of-network coverage.

Out-of-Pocket Costs

Refers to the costs of health care for which you are responsible. These costs may include copayments, coinsurance and any costs required prior to your annual deductible being met, or for services not covered under your health plan.

Out-of-Pocket Maximum

This is the maximum dollar amount a member will pay out-of-pocket in coinsurance, copays and/or deductibles in a calendar year for covered expenses. Once the out-of-pocket limit is met, the plan pays 100% of the allowed amount for covered services for the rest of the benefit period.