

Platinum Plans		
2019 Platinum Plan	2020 Change	
P FRDM NG 20/40/100 PPO 19 2 P LBTY NG 20/40/100 PPO 19 2	• OOPM from \$2,250 to \$2,500	

New Jersey Small Group 2020 plans with changes



Gold Plans		
2019 Gold Plan	2020 Change	
G FRDM NG 50/50/600/100 EPO 19 G LBTY GT 50/50/600/100 EPO 19 G LBTY NG 50/50/600/100 EPO 19	Deductible from \$600 to \$900OOPM from \$5,900 to \$6,000	
G FRDM NG 25/40/1000/80 PPO 19 G LBTY NG 25/40/1000/80 PPO 19	Specialist Copay from \$40 to \$60OOPM from \$4,800 to \$5,100	
G FRDM NG 30/65/1500/80 PPO 19 G LBTY NG 30/65/1500/80 PPO 19	• OOPM from \$3,750 to \$4,250	
G GDST NG 1500/100 EPO HSA 19	• Deductible from \$1,500 to \$1,700	
G GDST NG 25/50/1250/80 EPO 19	Specialist Copay from \$50 to \$60OOPM from \$3,700 to \$4,200	
G LBTY NG 20/40/1500/70 EPO 19	 PCP copay from \$20 to \$25 Specialist Copay from \$40 to \$60 OOPM from \$5,000 to \$5,300 	



Gold Plans (cont)			
2019 Gold Plan	2020 Change		
G LBTY NG 25/40/1250/80 EPO 19	 Specialist Copay from \$40 to \$60 ER Copay from \$100/Ded/80% coins to \$100/Ded/70% OOPM from \$4,200 to \$4,400 		
G LBTY NG 30/50/1000/80 EPO 19	 Specialist Copay from \$50 to \$60 ER Copay from \$100/Ded/80% coins to \$100/Ded/70% Deductible from \$1,000 to \$1,100 OOPM from \$4,250 to \$4,500 		
G GDST NG 30/60/2000/70 EPO 19	 IP copay from 70% up to \$500 per admit to \$500 per admit/\$5,000 plan year max 		



Silver Plans			
2019 Silver Plan	2020 Change		
S FRDM NG 2500/100 PPO HSA 19	 ER copay from \$100/Ded to \$100/Ded/80% coin OOPM from \$6,650 to \$6,750 		
S FRDM NG 50/75/2500/70 PPO 19	 Plan coins from 70% to 60% IP copay, Minor radiology from 70% after deductible to 60% after deductible OOPM from \$7,500 to \$8,150 		
S GDST NG 25/50/2000/80 EPO HSA 19	IP copay from 80% up to \$500 per admit after deductible to \$500 per admit/\$5,000 plan year max after deductible		
S GDST NG 40/75/2250/50 EPO 19	 Lab copay from \$20 to \$30 Deductible from \$2,250 to \$2,500 OOPM from \$7,400 to \$8,150 		



Silver Plans (cont)			
2019 Silver Plan	2020 Change		
S GDST NG 50/75/2400/70 EPO 19	 Plan coins from 70% to 60% IP copay. Minor radiology, Major radiology (freestanding) from 70% after deductible to 60% after deductible Deductible from \$2,400 to \$2,500 OOPM from \$7,500 to \$8,150 		
S LBTY NG 15/60/2400/90 HMO PA 19	 Lab copay from \$15 after deductible to \$25 after deductible Deductible from \$2,400 to \$2,500 OOPM from \$7,500 to \$8,150 		
S LBTY NG 40/75/2500/50 EPO 19	Lab copay from \$20 to \$30OOPM from \$7,400 to \$8,150		
S LBTY NG 50/75/2500/70 PPO 19	 Plan coins from 70% to 60% IP copay, Minor radiology from 70% after deductible to 60% after deductible OOPM from \$7,500 to \$8,150 		



Bronze Plans			
2019 Bronze Plan	2020 Change		
B GDST NG 10/70/3000/50 EPO HSA 19 B GDST NG 3000/50 EPO HSA 19 B LBTY NG 10/70/3000/50 EPO HSA 19 B LBTY NG 3000/50 EPO HSA 19	 Deductible from \$3,000 to \$3,500 OOPM from \$6,550 to \$6,650 		

New Jersey Small Group 2020 plan eliminations



2019 Plan		2020 Mapped Plan
P GDST GT 10/50/250/90 EPO ADV 19	Platinum	P GDST NG 10/40/100 EPO 20
P FRDM NG 15/45/100 PPO 19	Flatillulli	P FRDM NG 20/40/100 PPO 20 1
2019 Plan		2020 Mapped Plan
G GDST GT 15/60/1500/80 EPO ADV 19	Gold	G GDST NG 30/60/2000/70 EPO 20
G GDST NG 10/50/1000/90 EPO PA 19		G GDST NG 25/50/500/50 EPO 20
G LBTY NG 30/50/70 PPO 19		G LBTY NG 30/65/1500/80 PPO 20
G FRDM GT 50/50/600/100 EPO 19		G FRDM NG 50/50/900/100 EPO 20
G LBTY GT 30/50/1000/80 EPO 19		G LBTY NG 30/60/1100/80 EPO 20
2019 Plan		2020 Mapped Plan
S GDST GT 20/70/2500/50 EPO ADV 19	Silver	S GDST NG 50/75/2500/60 EPO 20
S GDST NG 1750/60 EPO HSA 19		S GDST NG 25/50/2000/80 EPO HSA 20
S GDST GT 50/75/2400/70 EPO 19		S GDST NG 50/75/2500/60 EPO 20
S GDST NG 25/60/2500/90 EPO PA 19		S GDST NG 50/75/2500/60 EPO 20