

# 2019 HMO plans at a glance\*

## New Jersey School Employees' Health Benefits Program

### Active Education Employees

	Aetna HMO	Aetna HMO 1525	Aetna HMO 2030	Aetna HMO 2035
<b>Deductible</b>	\$0	\$0	\$0	\$200 Individual \$500 Family
<b>Out-of-Pocket Maximum</b>	\$6,320 Individual \$12,640 Family Out-of-Pocket Maximum does not include pharmacy**	\$6,320 Individual \$12,640 Family Out-of-Pocket Maximum does not include pharmacy**	\$6,320 Individual \$12,640 Family Out-of-Pocket Maximum does not include pharmacy**	\$6,320 Individual \$12,640 Family Out-of-Pocket Maximum does not include pharmacy**
<b>Health Savings Account (HSA)</b>	N/A	N/A	N/A	N/A
<b>Preventive Care</b>	covered at 100%	covered at 100%	covered at 100%	covered at 100%
<b>PCP or primary doctor office visit</b>	\$10	\$15	\$20	\$20
<b>Specialist office visit</b>	\$10	\$25	\$30 adults / \$20 children	\$35
<b>Emergency Room</b>	\$35	\$75	\$125	\$300
<b>Urgent Care Center</b>	\$10	\$25	\$30 adults / \$20 children	\$35
<b>Hospital Care</b>	\$0	\$0	\$0	20% after deductible

\* This is not a complete list of all covered services. Exclusions and limitations apply to some services. For example, preventive care services may be limited to one per year.

\*\* Pharmacy out-of-pocket maximum for the Aetna HMO plans is \$1,411 Individual/\$2,822 Family.

**Health insurance plans are offered, underwritten and/or administered by Aetna Life Insurance Company (Aetna).**

For the latest information, including plan details and benefit coverage, visit the Aetna Member Handbook.



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