



JANUARY NEW BUSINESS - FAQ's OCTOBER 2019

1. Will January new business be on the Aetna platform?

Yes. January new business will be on the Aetna Platform. Members will call Aetna Care Advocate Team for customer service needs. The new Aetna service number will be on members new ID card.

2. Why is the name changing from Affiliated Physicians & Employers Health Plan to Members Health Plan NJ?

The Plan marketing name change to Members Health Plan NJ is part of a rebranding and marketing effort to align the Plans core values with a name that defines what the Plan is. The Plan is designed for our Employer Members. The Plan is Member Owned, Care Focused and Value Driven. The legal name of the Plan will continue to be the Affiliated Physicians and Employers Master Trust.

3. Did any paperwork change for new business? Are there any updated forms?

New business forms have been updated to include the new branded material for the health plan. Updated materials will be added to the new website www.MembersHealthPlanNJ.com by November 1st, 2019.

4. Will any process with the rate quotes and the Jet Platform change?

No. You will continue the same processes on the Jet system as you do today. In fact, we are creating additional efficiencies and capabilities to the system to help you manage your business.

5. Have any Underwriting Guidelines or eligibility requirements changed for January?

No. There have been no material underwriting guideline or eligibility changes. The underwriting guidelines contain minor changes to include the new brand as well as replace QualCare contact information with Aetna information.

6. If I am a Broker of Record, who will be paying my commissions?

Your commissions will continue to be paid by the Plan through Concord Management Resources (CMR) and will be paid under the same criteria.

7. Who do I contact if I have questions related to my new Business?

If you are an employer, you can contact your broker or our dedicated service team. The contact information for CMR is not changing. Please call (833) 639-2669 or email MEWAsales@concordmgt.com.

8. What Benefit Plans will be offered in January?

There will be 22 benefit plans being offered. The benefit plans being offered for 1/1, 2/1 and 3/1 new business will be plans A, B, D, F, G, H, J, K, L, M, N, O, P, R, S, T, U, V, W, X, Y and Z. The current 6 Prescription Plans and 4 Dental Plans will be offered effective January 1st.

9. Will members be able to receive deductible credits?

Yes, for new groups effective 2/1 and 3/1, deductible credits will be provided where applicable. Deductible Credit or carryover will not be available for groups with an effective date of 1/1 as MHPNJ deductibles are based on a calendar year. For new business, employees will be required to provide their last EOB showing

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the in-network deductible amount met and must provide within the Plans required timeline. An individual EOB is required for each family member for deductible credits to be applied to each individual.

10. Do I need to join one of the sponsoring Association or organizations to access the Health Plan?

Yes. The membership with a sponsoring association (EANJ/MSNJ/BioNJ etc.) is a requirement of the Plans underwriting guidelines.

11. What Aetna services will my Employers/Members have access to under the Aetna Platform?

Members will have access to Aetna's suite of programs and tools offered to the Plan. Some of these tools include, but are not limited to, the following:

- + Aetna One Advocate (A1A) – 24/7/365 Concierge Service
- + Member Engagement Platform
- + Teladoc – Telemedicine
- + Informed Health Line
- + Member website
- + Member mobile experience

12. How long does it take for members to receive their ID cards?

A member will receive their separate medical and prescription ID cards 7-10 Business days from when your group is approved and processed.

13. Will members be able to get a Medical temporary ID Card?

Yes, a member may access their Medical 24-48 hours after final approval and installment. A member can log into and register on the Aetna Member Portal: www.aetna.com

14. Will members be able to get a Prescription temporary ID Card?

Yes, a member may access their Prescription 48-72 hours after final approval and installment. A member can log into and register on the Express Scripts member portal: www.express-scripts.com

15. When will members have access to the Aetna Member Portal?

A member will have access to the Aetna Member Portal within 24-48 hours of being installed and approved. Members can register by going to www.aetna.com and enter the information supplied in the member welcome letter.

16. Will OCA be the HRA/FSA vendor for New Business?

Yes. OCA will continue to be the vendor that will provide HRA/FSA administration for Employer groups. Employers that elect HRA/FSA will pay OCA a setup fee of \$250 and \$250 each year at time of renewal.

17. Will the Plan offer COBRA/NJ Continuation Coverage?

Yes, The Plan offers COBRA/NJ Continuation coverage at no additional charge. For all new business effective 1/1/2020, initial COBRA notification notices will be sent to enrolled eligible members.

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18. Will there be any changes to the out-of-network reimbursement rate for elective services?

Yes. Elective out-of-network services for Physicians services will be paid at 110% of current year Medicare/RBRVS and 140% of current year Medicare/RBRVS for facilities. Please refer to the January Summary Plan Document for detailed information regarding out-of-network services. Go to www.MembersHealthPlanNJ.com under the Medical Benefits tab.

19. How do I find out if my Provider/Hospital or Facility participates in the New Network?

Visit www.MembersHealthPlanNJ.com website and click on either “Employees”, “Employers” or “Brokers” Section then select “Provider Search” Tab which will direct you to the Aetna landing page. You can also contact an Aetna Care Advocate team member at 1-833-982-7368 (TTY: 711) for participating providers.

20. How do I know what network is associated with my Benefit Plan(s)?

- a. AetnaSM Open Access Plans F, H, J, K, O, S, T, U, V, W
- b. Aetna Choice[®] POS II Open Access Plans A, B, D, G, L, P, R
- c. (NJ) Aetna Whole HealthSM- New Jersey- Aetna Select Multi-Tier Plans M, N, X, Y, Z

21. Do members have coverage outside of New Jersey?

The Aetna networks offer coverage outside of New Jersey at no additional cost. It is the members responsibility to verify if a provider is in or out of network.

22. Where can I get more information related to the transition?

The Plan’s website www.MembersHealthPlanNJ.com will provide information specific to the transition. Visit our website and select “Resources” then “FAQ”. If you would like to speak with a Plan Representative, please call or email:

Phone Number: 1-833-639-2669 (833-MEWANOW)

Email: MEWASales@concordmgt.com

Website: www.MembersHealthPlanNJ.com