



Members HealthPlan^{NJ}

Designed for You.

MHPNJ IMPORTANT UNDERWRITING GUIDELINE NOTIFICATION

Your group currently is enrolled in MHPNJ and you may be impacted by recent underwriting guideline changes effective for your upcoming renewal.

Effective 1/1/2021 MHPNJ has made changes to the Plan's Underwriting Guidelines. Please read the information below carefully to determine if you remain eligible for the MHPNJ.

Eligible Employers

A group is eligible to participate in Members Health Plan NJ for coverage if they have at least two (2) **Eligible Employees (one of which must be provided a W-2)**. **Newly hired W-2 employee must be on payroll for a minimum of 4 weeks prior to the effective date.**

Employer must be located in New Jersey.

Eligible Employee

Eligible employee means a full-time employee who works a normal work week of 24 or more hours at its usual place of business and is compensated for such service by a regular periodic wage or salary (**must be at least minimum wage**) that is subject to FICA and federal income tax withholding by the employer. **An individual and his or her legal spouse when the business is owned by the individual or by the individual and his or her legal spouse are NOT Eligible Employees of the Eligible Group.** Partners in partnership, proprietors or owners and independent contractors may be treated like Employees, if they meet all of the Plan's underwriting requirements.

Ineligible Employees

Leased, part time (working less than 24 hours), temporary, non-consecutive seasonal or substitute employees (a seasonal employee as an employee who is hired with the understanding that he/she is not a permanent, year-round employee and who is employed for fewer than 120 working days per tax year), 1099 independent contractors working for multiple entities, uncompensated employees, employees making less than minimum wage, volunteers, inactive owners, directors/trustees, shareholders, officers, outside

consultants, managing members who are not active, investors or silent partners.

- **Individual and spouse when one or both own the business**
- Retirees are not eligible.
- If the employer's employee eligibility criteria definition (large group only) differs from the above definition (more than 24 hours), the employer's actual definition must be provided on the Employers letterhead at the time of new business submission.
- Employees in the waiting period are not included in the count when determining group size.
- Union employees who have collectively bargained for their health plan are excluded as eligible employees for the purpose of health coverage.

IMPORTANT SPONSORSHIP CHANGE NOTICE - ACTION REQUIRED

Your group currently is enrolled in MHPNJ under a Plan affiliation of Medical Professional, Medical Physician or Medical Dental, Greater Monmouth Chamber of Commerce, Howell Chamber of Commerce and Jackson Chamber of Commerce.

Effective 1/1/2021 all employers are now required to join one of the designated MHPNJ Plan Sponsors.

For all Physicians and/or Medical Practices you **MUST** be a member of and Provide proof of membership to one of the below sponsoring entities:

- Medical Society of New Jersey
- IPA of North Jersey
- Trinitas Hospital Medical Staff
- Mountainside IPA
- Northwest Physicians Organization
- The Medical & Dental Staff of Hackensack Meridian Health
- Vista IPA
- CentraState Medical Center

If you are a **medically affiliated company or provide services to the medical community** you have the ability to join the Medical Society of New Jersey as ****Corporate Partner - Friend Level**

***Please note Physicians and/or Medical Practices are **NOT** eligible to join under this affiliation.*

Additional sponsor affiliation options include:

- Employers Association of New Jersey
- New Jersey Chamber of Commerce
- BioNJ

To learn more about the Plan Sponsors [Click Here](#) for a brief summary of Association Sponsors and eligibility criteria as each sponsoring association provides valuable resources and actively serves their employer members in various ways.

If you have additional questions regarding your sponsor options, please contact your broker and they can assist you.

To review a complete summary of the Plans Underwriting Guidelines, please [Click Here](#).

In the event you are not able to provide the required information and documentation to verify your eligibility, your groups coverage will be terminated effective December 31, 2020.

If you have additional questions regarding your eligibility and health plan options, please contact your broker and they can assist you.

**Members
HealthPlan^{NJ}**
Designed for You.

**Questions or Concerns E-mail Us
Today!**

Address: PO Box 5487
Somerset, NJ 08875
Tel: 833-MEWANOW (833-639-2669)