2019 SEH Rate Chart * Horizon Healthcare of New Jersey, Inc. Horizon Healthcare Services, Inc.		Quarterly Base Rates ⁽⁴⁾ (Prior to Application of Territory ⁽⁵⁾ & Age ⁽⁶⁾ Rating Factors) ((Quarterly Base Rate ⁽⁴⁾ x Territory Rating Factor ⁽⁵⁾) x Age Rating Factor ⁽⁶⁾ = Premium per person)				
Plan Name ⁽¹⁾⁽²⁾	Metal Tier ⁽³⁾	1Q2019	2Q2019	3Q2019	4Q2019	
OMNIA Platinum	Platinum	\$463.76	\$447.02	Not Yet Available	Not Yet Available	
POS Platinum 100/60	Platinum	\$524.69	\$553.52			
HMO Platinum	Platinum	\$562.81	\$584.19			
Direct Access Platinum 100/70 BlueCard	Platinum	\$606.54	\$630.95			
OMNIA Gold	Gold	\$394.44	\$383.66			
Advantage EPO Gold 100/80 \$50	Gold	\$459.98	\$452.10			
Advantage EPO Gold 100/80	Gold	\$478.03	\$475.70			
Advantage EPO Gold 100 \$30/\$50	Gold	\$503.68	\$485.31			
Advantage EPO Gold 100 \$25/\$45	Gold	\$523.28	\$501.51			
Advantage EPO Gold 100/80 BlueCard	Gold	\$532.46	\$522.55			
Advantage EPO Gold 100 \$30/\$50 BlueCard	Gold	\$560.99	\$536.62			
Direct Access Gold 100/80/60 BlueCard	Gold	\$507.25	\$539.73			
Advantage EPO Gold 100 \$25/\$45 BlueCard	Gold	\$582.80	\$557.99			
OMNIA Silver HSA ⁽⁷⁾	Silver	\$306.27	\$298.01			
OMNIA Silver	Silver	\$326.01	\$313.61			
Advantage EPO Silver 100/50	Silver	\$391.06	\$385.04			
Advantage EPO Silver 100/70	Silver	\$409.70	\$403.17			
Advantage EPO Silver 100/50 BlueCard	Silver	\$435.63	\$428.41			
Direct Access MyWay HSA Silver 100/70/60 BlueCard ⁽⁷⁾	Silver	\$425.35	\$445.35			
Advantage EPO Silver 100/70 BlueCard	Silver	\$456.36	\$451.36			
OMNIA Bronze HSA ⁽⁷⁾	Bronze	\$269.31	\$262.51			
Advantage EPO HSA Bronze 100 Compatible ⁽⁷⁾	Bronze	\$342.94	\$334.07			
Advantage EPO MyWay HSA Bronze 100 BlueCard ⁽⁷⁾	Bronze	\$377.40	\$371.25			

Territory Rating Factors ⁽⁵⁾		SEH Age Curve (for contracts issued 01/01/2018 or later)				
A) Essex, Hudson, Union	0.9720	Ages	Age Rating Factors ⁽⁶⁾	Ages	Age Rating Factors ⁽⁶⁾	
B) Bergen, Passaic	1.0140	0-14	0.765	40	1.393	
C) Monmouth, Morris, Sussex, Warren	0.9700	15	0.833	41	1.410	
D) Hunterdon, Middlesex, Somerset	1.0110	16	0.859	42	1.427	
E) Burlington, Camden, Mercer	0.9760	17	0.885	43	1.450	
F) Atlantic, Cape May, Ocean, Salem, Cumberland, Gloucester	1.0630	18	0.913	44	1.478	
		19	0.941	45	1.511	
Footnotes		20	0.970	46	1.550	
(1) Plan Names were supplied by the Carrier. Please contact the Carrier		21	1.250	47	1.593	
for explanations of the abbreviations used in the plan names.		22	1.250	48	1.641	
(2) Employers, that qualify as " religious employers " under Federal law, <i>may</i> have		23	1.250	49	1.688	
the option to purchase plans with certain exclusion provisions.		24	1.250	50	1.741	
Contact the Carrier for information about the exclusion provisions, if any.		25	1.250	51	1.792	
(3) Metal Level indicates the actuarial value of the plan.		26	1.250	52	1.847	
Each metal level is designed to cover an expected percentage of the covered charges:		27	1.250	53	1.902	
Bronze 60%, Silver 70%, Gold 80%, and Platinum 90%.		28	1.250	54	1.961	
(4) Base Rate applies to plans newly issued or renewed during the quarter.		29	1.275	55	2.019	
Multiply the Base Rate by the Territory Rating Factor and the Age Rating Factor.		30	1.287	56	2.080	
(5) Territory Rating Factor is based on the employer's principal place of business.		31	1.305	57	2.142	
(6) Age Rating Factor is used to calculate the premium for each person to be covered.		32	1.323	58	2.206	
⁽⁷⁾ These are high deductible health plans and are compatible with Health Savings		33	1.334	59	2.280	
Accounts (HSA). Contact the Carrier for additional information.		34	1.346	60	2.280	
(8) These plans are not available in all counties.		35	1.352	61	2.280	
Contact the Carrier, or your broker, for additional information.		36	1.358	62	2.280	
*For details about plans and coverage options, e.g. HSA,		37	1.363	63	2.280	
please contact the Carrier or your broker directly.		38	1.369	64 and older	2.280	
Premium Calculation		39	1.381			

Premium per person (whether employee or employee's dependents) =

((Base Rate⁽⁴⁾ x Territory Rating Factor⁽⁵⁾) x Age Rating Factor ⁽⁶⁾)

Premium per each employee's family = sum of the premiums for the employee

and the employee's dependents.

Note: For dependent children under age 20 the premium is capped at the sum of the premiums for three children.

Premium per small employer group = sum of the premiums for all employees

and dependents to be covered.