

Garden State Plan (GSP) - NJ Only

BENEFITS-AT-A-GLANCE
**OUT OF STATE PROVIDERS
ARE NOT COVERED**

IN-NETWORK BENEFITS - AETNA WHOLE HEALTH NEW JERSEY NETWORK		COVERAGE
Member Coinsurance		10%, applies only to Emergency Medical Transportation care, Outpatient Private Duty Nursing and Durable Medical Equipment
Deductible		N/A
Out-of-Pocket Maximum¹		\$500 single / \$1,000 family
Emergency Room		\$125 copay ⁴ (Covered In-Network, Out-of-Network and out of State)
PCP Office Visit		\$10 copay
Specialist Office Visit		\$15 copay
Physical Therapy		\$15 copay
Chiropractic Care		\$15 copay (Limited to 30 visits/year)
Inpatient Stay		Covered 100%
Acupuncture		\$15 copay
OUT-OF-NETWORK BENEFITS - STATE OF NJ ONLY		
Member Coinsurance		30% of the out-of-network fee schedule
Deductible		\$350 single / \$700 family
Out-of-Pocket Maximum¹		\$2,000 single / \$5,000 family
PHARMACY ²		
Out-of-Pocket Maximum³		\$1,600 single / \$3,200 family
Generic Drugs		\$5 copay retail (30 day supply) / \$10 copay mail (90 day supply)
Brand Name Drugs		\$10 copay retail (30 day supply) / \$20 copay mail (90 day supply)
Mandatory Generic		Member pays difference in cost between generic and brand, plus brand copayment
Formulary		PBM's closed formulary
Step Therapy (non-grandfathered)		Member must use the most cost-effective, clinically efficacious preferred treatment prior to progressing to alternate therapies

NOTE: With the exception of emergency room care, only providers in the State of NJ are covered under the GSP. All services subject to medical necessity. Benefits for Illustrative Purposes only. GSP utilizes the Aetna Whole Health New Jersey Network.

¹ In-network out-of-pocket maximum includes all medical plan copayments. Out-of-network out-of-pocket maximum includes deductible and coinsurance.

² The GSP include these prescription drug benefits which will be provided through your current Pharmacy Benefit Manager.

³ Pharmacy benefit out-of-pocket maximum is separate from medical plan out-of-pocket maximum.

⁴ Use of the Emergency Room for services rendered that do not meet Prudent Layperson Standard are not covered.

