

**Human Resources Department**  
**Open Enrollment Information**  
**Glossary of Terms**

**Deductibles** – Only applies to the out-of-network portion of the first eligible charges submitted for payment in each calendar year that requires the member to pay.

**Durable Medical Equipment** - Equipment, which is designed and able to withstand repeated use and is customarily used to serve a member with a medical condition, e.g., crutches, etc.

**Coinsurance** - The portion of an eligible charge which is the member's financial responsibility.

**Coordination of Benefits** - The practice of correlating the payments a plan makes with payment provided by other insurance covering the same charges, so that: the plan with primary responsibility pays first, reimbursement does not exceed 100 percent of the actual expenses, and the plan does not pay more than it would if no other insurance existed. SHBP plans do not allow two university employees to cover a dependent that has the same coverage.

Chapter 2, P.L. 2010, effective May 21, 2010, specifically prohibits two members who are each enrolled in SHBP/SEHBP plans from covering each other. Therefore, an eligible individual may only enroll in the SHBP/SEHBP as an employee or retiree, or be covered as a dependent.

In addition, **eligible children** may only be covered by one participating SHBP/SEHBP subscriber.

**Copayment** – A fixed amount an insured is required to pay for a medical expense at the time of the visit.

**Out-of-Pocket Expenses:**

In-network – includes pre-certified eligible durable medical equipment.

Out-of-network – Covers coinsurance for pre-certified charges that are the member's responsibility. It does not include:

Non-certified expenses

Deductibles

Expenses above Reasonable and Customary expenses.

**Pre-certification:**

In network – your physician will do the necessary processing.

Out-of-network – your physician would customarily contact Horizon BCBSNJ. The member is responsible to follow-up with the physician to determine if there are any issues regarding the cost of covered expenses.

**Reasonable and Customary** - The plan makes payments based on reasonable and customary allowance for supplies and services in a specific geographical area. The reasonable and customary allowance is the general level of charges made by others in the area for like services or supplies as determined by the Prevailing Healthcare Charges System (PHCS). This schedule is updated on a semi-annual basis. Reasonable and customary allowances are based on actual charges by physicians in a specific geographical area for specific services.

Please contact your Campus Human Resources Benefits Office at one of the following telephone numbers:

Camden and Stratford (856) 566-6168

Newark (973) 972-5314

Piscataway/New Brunswick (732) 235-9417