TO: ALL MEMBERS OF THE IHC & SEH PROGRAMS
FROM: IHC & SEH PROGRAM BOARDS
RE: IHC & SEH Adoption of Policy Form Amendments
DATE: October 25, 1995

The Individual Health Coverage (“IHC”) Program Board and the Small Employer Health Benefits (“SEH”) Program Board have recently adopted proposed changes to the standardized health benefits plans. Carriers in the individual market will find a copy of the IHC Board’s adoption enclosed. Similarly, carriers in the small employer market will find a copy of the SEH Board’s adoption enclosed.

The Boards expect the respective adoptions to appear in the November 6, 1995 New Jersey Register. The text of the published versions of the adoptions may differ slightly from the copy of the adoption enclosed as the result of editing changes by the Office of Administrative Law. Please refer to the published version, when available. This bulletin and enclosure are intended to provide carriers with as much advance notice of the modifications to the standard plans as possible. As is noted in the enclosed adoptions, the operative date of the adoptions is January 1, 1996. All newly issued plans on or after that date must include the amended text. With respect to in force policies, carriers must use the new text no later than the first anniversary occurring on or after January 1, 1996; however, carriers may choose to incorporate all the changes to all in force policies on January 1, 1996.

The enclosed adoptions must be read in conjunction with the respective rule proposals. Both proposals appear in the August 21, 1995 edition of the New Jersey Register. The IHC Program rule proposal appears at 27 N.J.R. 3008, and the SEH Program rule proposal appears at 27 N.J.R. 3051.

Carriers that would like to receive a computer disk (in Word for Windows 2.0) containing the plans, with all modifications incorporated into the text, should complete and return the attached order form. The disks for each Program’s policy forms are available at a cost of $10. Checks should be made payable to the “IHC Program” or the “SEH Program” as appropriate. If you would like to receive both disks, please include two checks.
If you would like to receive a copy of either the IHC or SEH standard health benefits plans on computer disk (Word for Windows 2.0), please send a check for $10 made payable to either the “IHC Program” or “SEH Program,” as appropriate, to:

IHC & SEH Programs
Policy Form Disks
20 West State Street, 10th Floor
CN 325
Trenton, NJ 08625

___ Enclosed please find a check to the “IHC Program” for $10 for the standard individual policy forms on disk.

___ Enclosed please find a check to the “SEH Program” for $10 for the standard small employer policy forms on disk.

___ Enclosed please find two checks, one to the “IHC Program” and one to the “SEH Program,” of $10 each for both the individual and small employer standard policy forms on disk.

Please send my disks to:

Name: _______________________________
Company: ___________________________
Address: ____________________________
City, State, Zip: _______________________