

Open Enrollment 2027

Roman Sohor
Healthcare
Ombudsperson
CWA Local 1031

Open Enrollment

- *Change your health plan*
 - *Changing your plan in 2027 doesn't affect you from picking a different plan again in 2028*
- *Add or Remove Dependents*
 - *No Qualifying Life Event needed*
 - *May still need to verify dependents*
- *Change Dental Plans*
- *Enroll in FSA*

Catch-Up

- *Summer 2025 saw negotiated changes to our healthcare plans to avoid double-digit premium increases*
 - *Plan rates have been increasing exponentially*
 - *State budget massively cut SHBP funding*
- *Through negotiation we were able to get some funding restored & avoid premium increases*
- *New plans went into effect Summer 2026*

2027 Rate Increases

- *Plans for 2027 were slated to increase by double digits again*
- *Unions stepped up & met with the Sherrill administration*
- *State of NJ has agreed to absorb 100% of the premium increases for employees in Union-negotiated rate plans for 2027*
- *State will begin working on long-term solutions to healthcare costs, first meeting October 16th*
- *No increase in premiums or co-pays for employees in 26 CWA Unity/26 NJ Direct/ 26 OMNIA/LIBERTY PLUS*
- *HMO, High Deductible, & other Chapter 78 Rate Plans will see increases!*

FSA Changes for 2027

- *CWA has delivered on its promise to lobby the State to increase FSA contribution limits to match the IRS maximum*
 - *Current Maximum Allowed for State Workers: \$2500*
 - *Current IRS maximum is \$3400 (2026)*
 - *It is anticipated to be increasing to \$3500 for 2027, Federal Government will not finalize it until November 2026*
 - *Future years will automatically adjust to the IRS maximums*
- *Must enroll annually, does not auto renew*
 - *All PPO plans have a \$110 individual / \$220 deductible*
 - *Use-it-or-lose it*
 - *Pay Co-pays/Co-insurance, Deductibles, Prescriptions, Glasses, Dental, Over-the-Counter health items*

DEDUCTIBLES (As of 7/1/2026)

In-network deductible

Applies to all 26 NJ Direct Plans - Union Negotiated and Direct 10, 15, 1525, 2030

- \$110 individual / \$220 family
 - *Applies to any service without a co-pay*
 - Plan for this expense annually (consider putting at least this much in FSA annually)

Out-of-network deductible:

- \$750 individual / \$1,500 family
- *One “advantage” for Out-of-Network benefits in the Legacy Plans is the possibility (but not guarantee) of slightly higher reimbursement rates for out-of-network services*
 - *Union negotiated plans reimburse at 175% of Center for Medicare and Medicaid Services rates*
 - *Legacy plans reimburse at 90th Percentile of FAIR Health rates*

OTHER CHANGES (July 2026)

Labs and Imaging

- Labs: \$0 copay per visit – no change, still free labs
- Imaging: \$50 copay per visit
- All preventative care and pregnancy related labs and imaging excluded from copay (same as current)

Physical Therapy

20-visit limit for out-of-network physical therapy, no change to in-network PT benefit

AMBULATORY SURGICAL CENTERS (ASCs)

- Applies to all PPO Plans
- Specific designated routine procedures (endoscopy, hernia, carpal tunnel, nerve injections, colonoscopy, etc.) require Prior Authorization from insurance before you schedule the procedure.
- If use an ASC, pay normal copays and coinsurance
- If do not use ASC without an exception below, pay 50% coinsurance (cost of the procedure)
- Exceptions: emergency, medical necessity, or no ASC within 50 miles

CENTERS OF EXCELLENCE PROGRAM - 2027

- Applies to all PPO Plans
 - Horizon & Aetna
 - Both Union Negotiated Rate Plans & Chapter 78 Plans
- Does NOT apply to Tiered Network, HMO, or High-Deductible Plans
- a. Bariatric surgery
- b. Knee replacement surgery
- c. Hip replacement surgery
- d. Spine
- e. Heart surgery
- f. Non-emergent Colonoscopies

CENTERS OF EXCELLENCE PROGRAM

- Begins January 1, 2027
- Prior to having a covered surgery, you must consult with Carrum Health, our COE network provider.
- Carrum will match you with a provider that can perform the procedure
- If you use the Carrum provider, you pay \$0 for the procedure
 - If you use another in-network provider: \$300
 - If you go Out-of-Network, you are subject to all standard OON costs, including balance billing
 - Exceptions for medical necessity & distance (50 miles or greater)

Union Negotiated Rates vs Chapter 78

- *Rutgers, UH & NJIT Employees have access to “Legacy” state health plans at rates set by the “Chapter 78” Law*
 - *Requires employees to pay a percentage of the total cost of the healthcare plan*
- *In 2019, CWA negotiated to bring new plans that employees at other state colleges & state workers have, where employees pay a percentage of their salaries towards health benefits*
 - *These plans can save you thousands of dollars annually in premiums*
 - *Came to RU in 2021, others in subsequent years/contracts*
- *Same networks of providers*
- *Slightly different out-of-pocket costs*
- *2026 Plan changes have significantly reduced the advantages of staying in a legacy plan*

NJ Direct (Union Negotiated) vs NJ Direct15 (Legacy)

- The two most common plan choices
- Same PPO Network
 - Any Blue Cross Blue Shield or Aetna Doctor in All 50 States
 - No referrals required for specialists
- Out-of-Network Coverage
 - Generally, “less generous” OON reimbursement rates on 26 NJ Direct than Legacy Plans
- Same prescription benefit

PRESCRIPTION COSTS – ALL SHBP Plans

Generic 30 Days (Retail)	\$10
Brand 30 Days (Retail)	\$20
Non-Preferred / Specialty 30 Days (Retail)	\$75
Generic 90 Days (Mail Order)	\$10
Brand 90 Days (Mail Order)	\$50
Non-Preferred / Specialty 90 Days (Mail Order)	\$150
GLP-1 for Weight Loss	\$45

- Unchanged for 2027
- Mandatory generics whenever available
- Mandatory Mail Order for Maintenance Drugs
 - Refills by mail required after two refills at a regular pharmacy
 - Filled by the OptumRX Mail Order Pharmacy

26 NJ Direct (Union Negotiated) vs 26 NJ Direct15 (Legacy)

Key Differences Post July 2026

	Union Negotiated	Legacy
Specialist	\$30	\$15
Urgent Care	\$45	\$15
ER (unless admitted)	\$150	\$100
Out-of-Network Reimbursement Rates	175% of Centers for Medicare & Medicaid Services	90 th Percentile of FAIR Health Rates
In Network Co-Insurance Maximum	\$800	\$400

26 NJ Direct (Union Negotiated) vs 26 NJ Direct15 (Legacy)

	Single Coverage	Family Coverage
\$60,000	Union Negotiated: \$2422 Legacy Direct15: \$5356 (+\$600)	Union Negotiated: \$3875 Legacy Direct15: \$9645 (+\$1000)
\$90,000	Union Negotiated: \$3318 Legacy Direct15: \$6745 (+\$800)	Union Negotiated: \$7266 Legacy Direct15: \$15886 (+\$1800)
\$115,000	Union Negotiated: \$3434 Legacy Direct15: \$6943 (+\$900)	Union Negotiated: \$9819 Legacy Direct15: \$19858(+\$2300)