



Individual and Family Plans 2025 Product Overview for Open Enrollment Period

October 9, 2025

Jefferson Health Plans 2025 Individual and Family Plans



There is no sound until the webinar begins.



Webinar will be recorded. Participation in the webinar is an agreement to recording.



All participants phones have been **muted** except for the presenter.



Technical issues: Use chat, select David Kane from panelist from the Webex chat dropdown.



Questions: Please use the **Q&A Panel** when asking questions.

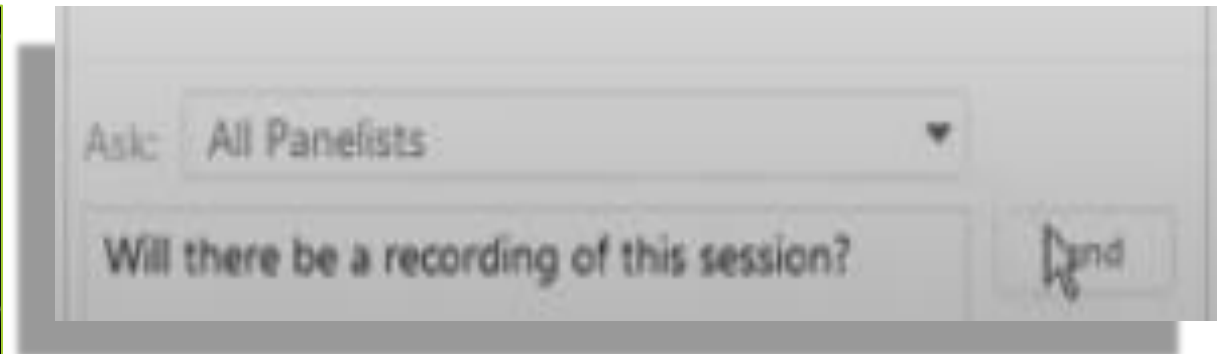
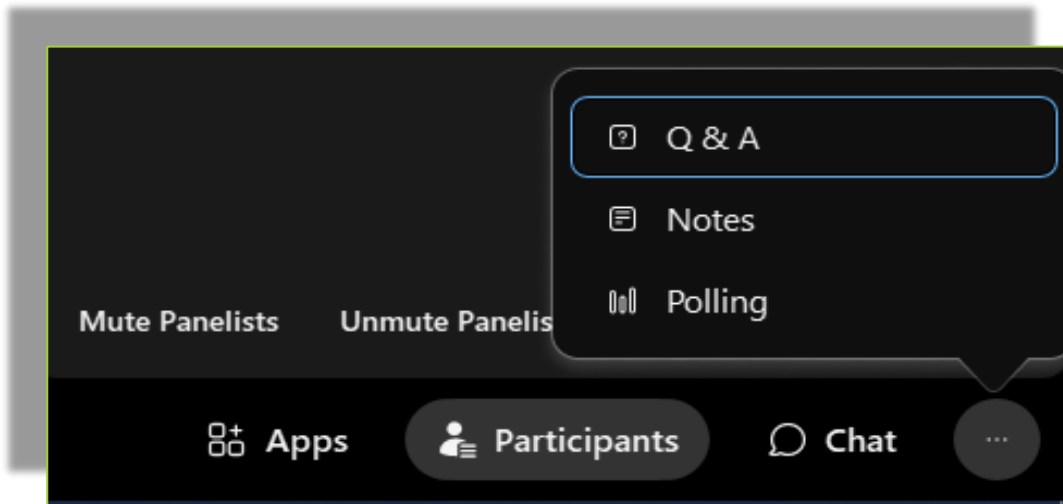


Any questions we are unable to address today, will be answered following the presentation.

Q&A Panel

As an attendee, you can ask questions using Q&A Panel.

1. To open the Q&A panel, click on the ellipses at the bottom right of the screen for 'More Panels' and click on Q&A.
2. Select “All Panelist” from the drop-down menu.
3. Type your question in the message box.
4. Click “Send.”



Agenda

In this presentation we will cover:

- 1 The Individual and Family Plans Jefferson Health Plans offers to our members
- 2 Service/coverage areas
- 3 Tools and Resources available to providers

2025 Product Development: Individual & Family Plans Overview

What is the Affordable Care Act?

- The Patient Protection and Affordable Care Act (also known as the Affordable Care Act, ACA, or "Obamacare") was enacted in 2010 and offers low-cost health insurance to qualified individuals and their families.
- The ACA is a federal law, but similarly to Medicaid, each state administers its own program in accordance with federal requirements.
- Under the Affordable Care Act, states offer health plans through online marketplaces or "exchanges." Across all states, there are four categories of ACA plans: Bronze, Silver, Gold, and Platinum. Jefferson Health Plans is offering Bronze, Silver, and Gold plans.
- PA's exchange is called Pennie. NJ's exchange is called GetCoveredNJ.
- ACA plans can be purchased either directly through Pennie/GetCoveredNJ ("on exchange") or through a broker ("off-exchange"). The benefits for a particular plan are the same regardless of how it was purchased, but a person getting subsidies can only purchase through Pennie.

ACA eligibility

- In order to enroll in an ACA plan offered through a state exchange (Pennie/GetCoveredNJ), a person must:
 - Be a U.S. citizen, U.S. National, or have a qualified immigration status. [Click here for more information.](#)
 - Be a PA/NJ resident.
 - Not be incarcerated*
 - *Returning citizens have a 60-day Special Enrollment Period (SEP) to sign up for a plan through Pennie after they are released.
- Typically, people who qualify for ACA coverage are not eligible for programs such as Medicare, Medicaid, and CHIP. They also don't have health insurance through their job—or the plan offered by their employer does not meet the [ACA's minimum coverage requirements](#).
- While a person with Medicaid or CHIP *may* enroll in an ACA plan, [have to pay full price](#).

Jefferson Health Plans Individual and Family Plans Key Terms



What does On-Exchange and OFF-Exchange mean?

On-Exchange: Member purchases health insurance through Pennie.com.

Off-Exchange: Member purchases health insurance plan directly from insurance provider or broker.



Other Key Considerations

Same benefit packages will be offered to on- and off-exchange members.

Subsidies, or APTC, are available at any metal level ONLY for on-change members.

ONLY on-exchange members are eligible for Cost Share Reductions (CSR).

2025 Product Strategy: ACA Portfolio Update

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Products

- In Pennsylvania: **Launched new PPO portfolio** (Lehigh & Northampton)

Service Area

- **Expanded HMO portfolio** (Delaware, Lehigh, & Northampton)

Major Changes

- **Lowered Lab and X-ray copays** to save members money while getting care
- **Improve diagnostic cost sharing** while maintaining lost cost benefits for member savings

Jefferson Health Plans: ACA Plan Portfolios - Pennsylvania

HMO

- 3 Bronze plans (*1 new plan launch for 2025*)
- 3 Silver plans (*Term'd 3 Off-X plans for 2025*)
- 3 Gold plans (*1 new plan launch for 2025*)

Jefferson Health Plans HMO Portfolio:

3 Bronze Plans:	<ul style="list-style-type: none">• \$0 Deductible• Total• Value
3 Silver Plans:	<ul style="list-style-type: none">• \$0 Deductible• Balanced• Total
3 Gold Plans	<ul style="list-style-type: none">• \$0 Deductible• Total• Value

NEW: PPO




- 3 Bronze plans
- 6 Silver plans
- 3 Gold plans

Jefferson Health Plans PPO Portfolio:

3 Bronze Plans:	<ul style="list-style-type: none">• \$0 Deductible• Total• Value
3 Silver Plans:	<ul style="list-style-type: none">• \$0 Deductible• Balanced• Total
3 Gold Plans	<ul style="list-style-type: none">• \$0 Deductible• Total• Value

Individual & Family Plans (ACA) - 2025 Footprint



-  Existing service area (will continue to only offer HMO product)
-  Expanded service area for both HMO and PPO
-  Expanded service area for HMO

Tools & Resources

Prior Authorization Process Overview

- Providers should obtain prior authorization at least 7 days in advance for elective (non-emergent) procedures and services.
- Requests will be processed according to state and federal regulations.
- Failure to comply with this guideline may result in the delay of medically non-urgent services.
- Providers may be contacted for discharge/transition planning for disenrolled members as in some circumstances, Jefferson Health Plans remains responsible for participating in this planning for up to **six (6) months** from the initial date of disenrollment unless the member chooses a different plan.
- For elective admissions and transfers to non-participating facilities, PCP, referring specialist or hospital must call the **Jefferson Health Plans Inpatient Services Department @ 1-866-500-4571**.

Prior Authorization Submission: Jefferson Health Plans & Evicore



- Services performed in-office
- Short procedure units
- Ambulatory surgery centers
- Clinics
- Hospital outpatient departments.



- Cardiology Studies/Procedures
- Interventional Pain Management
- Joint & Spine Surgery
- Oncology
- Advanced Radiology services
- **Therapy services (PT, OT and ST)***

***Health Partners Plans CHIP does not require prior authorization for therapy services**

Prior authorizations are processed either through our **Provider Portal** or **eviCore**, depending on the type of service. Please refer to our [Prior Authorization Management Tools](#) to determine the appropriate submission type.

Prior Authorization Submission: Pharmacy

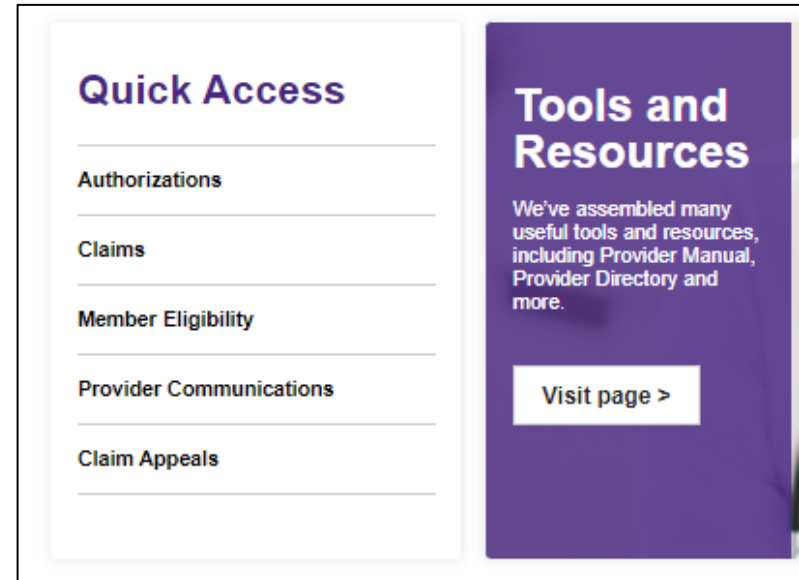
- There are specific medications on the formulary that require prior authorization.
- Drug specific prior authorization forms are available to help expedite the process with specific clinical criteria on our [Prior Authorization](#) webpage.
- To request a prior authorization, contact Jefferson Health Plans' Pharmacy department at **1-866-841-7659**, Monday-Friday, 8 a.m.-6 p.m.
- Requests can also be faxed to **1-866-240-3712**.
- In the event of an immediate need after business hours, please call Member Relations at **1- 800-553-0784**. The call will be evaluated and routed to a clinical pharmacist on-call 24/7.



Provider Relations / Online Tools

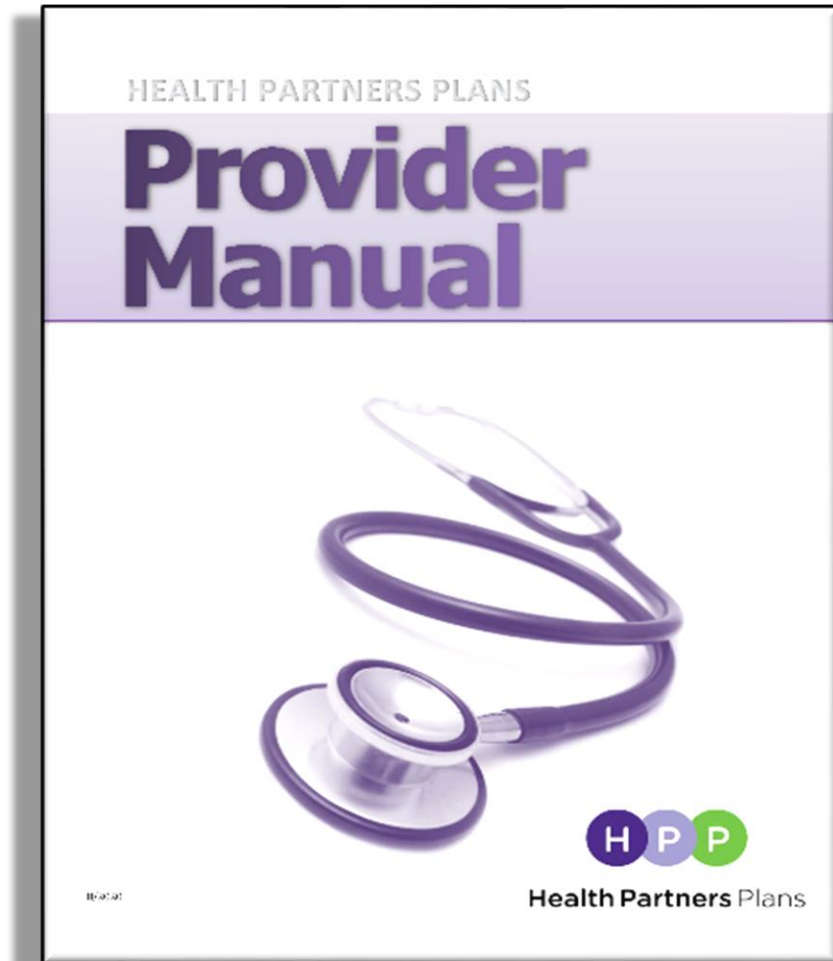
Provider Relations relies on multiple ways of communications to reach our provider network.

- Webinars
- Fax Blasts
- Provider Portal
- Provider Newsletter
- Training & Education
- Provider Relations Representatives
- Provider Portal Provider Communications
- Provider Communication Education Specialists



Provider Relations / Online Tools

- [Welcome Providers](#)
 - [Provider Manual](#)
 - [Training and Education](#)
 - [Provider Portal](#)
 - [Provider Directories](#)
 - [Formularies](#)
 - [Clinical Resources](#)
 - [Plan Information](#)
 - [Provider Newsletters](#)
 - [Quality and Population Health](#)



Upcoming Webinars

- Jefferson Health Plans Innovative Communication Strategies to Close Care webinar on **Tuesday, October 29, 2024**, at 12:00 p.m.

Questions

Contact us via the Jefferson Health Plans Provider Services HelpLine:

- 1-888-991-9023



