

# Special Notice for Producers



## Online Benefits Accumulator Now Available for New Jersey Members

Beginning July 1, 2011, an online benefits accumulator will be available to Oxford New Jersey members. This feature was initially launched less than one year ago for Oxford New York and Connecticut members. We are pleased to extend the online benefits accumulator to our New Jersey members.\*

This enhancement allows members to view their most up-to-date deductible and out-of-pocket balances. With just a few clicks, members can track how their health care dollars are being applied and make informed financial decisions about future medical expenses. **How the online benefits accumulator works for our members:**

1. Members log in to their **oxfordhealth.com** account,
2. Click on the **Benefits & Coverage** tab at the top of the page, and
3. Select the new **My Coverage** option from the left side of the page.

Now, in addition to being able to view their benefits, coverage documents and persons covered, members can get details about their coverage, including their Beginning Limit, Amount Applied and the Remaining Amount for their in-network and out-of-network benefits. Following is a graphic representation of the new feature (for illustrative purposes only).

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- Rare Chronic Care Program
- Cancer Support Program
- Osteoporosis Program
- Chronic Obstructive Pulmonary Disease (COPD) Program

### My Coverage

This is a summary of your coverage as of today, June 10, 2011, and may not include some claims in process.

**Summary:**

**From: 01/01/2011 Thru: 12/31/2011**

		Beginning Limit	Amount Applied	Remaining Amount
<b>Deductible</b>				
	In-network	\$2,500.00	\$0.00	\$2,500.00
	Out-of-network	\$5,000.00	\$175.00	\$4,825.00
Family	In-network	\$5,000.00	\$0.00	\$5,000.00
	Out-of-network	\$10,000.00	\$175.00	\$9,825.00
<b>Out-of-pocket</b>				
	In-network	\$5,000.00	\$0.00	\$5,000.00
	Out-of-network	\$10,000.00	\$175.00	\$9,825.00
Family	In-network	\$10,000.00	\$0.00	\$10,000.00
	Out-of-network	\$20,000.00	\$175.00	\$19,825.00
<b>Coinsurance</b>				
In-network			30%	
Out-of-network			30%	

**Important:** This is only a summary of your coverage, and does not guarantee these amounts. Please read your [Certificate of Coverage](#) for a full description of your Covered Services, exclusions and other terms and conditions of coverage.

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