



November 21, 2012

<<Member First Name>> <<Member Last Name>>
<<Address 1>>
<<Address 2>>
<<City>>, NJ <<ZIP code>>

RE: St. Joseph's Healthcare System's (St. Joseph's Regional Medical Center and St. Joseph's Wayne Hospital) Participation in the Oxford Network

Dear <<Member First Name>> <<Member Last Name>>,

We are committed to providing you with access to comprehensive and affordable health care services. We also want to keep you informed of changes in our network so that you do not incur any unnecessary out-of-network costs.

This letter is meant to provide you with information regarding our agreement with **St. Joseph's Regional Medical Center, in Paterson, New Jersey, and St. Joseph's Wayne Hospital in Wayne, New Jersey (St. Joseph's Healthcare System)**. We have been working diligently with St. Joseph's Healthcare System to extend the hospital's contract with us; however, despite good faith efforts by both parties to negotiate a new contract, we have not yet reached an agreement. While we continue to negotiate with St. Joseph's Healthcare System and are hopeful that we will reach a new agreement, our contract with the hospital **terminated on Nov. 1, 2012**.

How does this impact me?

1. **Through Feb. 28, 2013**, to help minimize any disruption this may cause you and to provide you sufficient time to arrange care at another Oxford participating (network) hospital, care received at St. Joseph's Healthcare System will be considered in-network, in accordance with the four-month cooling off period mandated by the State of New Jersey.
2. **Effective Mar. 1, 2013**, and consistent with our standard policy, care that you receive for an emergency illness, injury or condition will be treated as in-network care at any hospital. However, you may be asked to transfer to a participating (in-network) hospital once your condition stabilizes. Should you decide not to be transferred, additional services will be covered on an out-of-network basis (or denied if you do not have out-of-network coverage). Any non-emergent care that you receive from St. Joseph's Healthcare System, other than Transitional Care (see below), may be covered as out-of-network or denied (if you do not have out-of-network coverage). If you have a plan with out-of-network benefits, higher deductibles and coinsurance may apply. Exceptions include:
 - If you receive an authorization from us prior to Mar. 1, 2013 to receive inpatient or outpatient hospital services at St. Joseph's Healthcare System that will occur on or after Mar. 1, 2013, the authorization will be honored provided Transitional Care has been granted.

Approval for Transitional Care must be obtained in accordance with the terms of your Certificate of Coverage or Summary Plan Description, depending on your plan's funding type.

Members in Commercial Fully Insured Plans¹: If you are receiving an ongoing course of treatment or are hospitalized at St. Joseph's Healthcare System on or beyond Feb. 28, 2013, medically necessary covered services under your plan will be eligible for Transitional Care as follows:

1. **Post-Operative Follow-Up Care:** you may receive medically necessary covered services for up to six months from the date your provider disenrolls.
2. **Oncological or Psychological Treatment (excluding substance abuse):** you may receive medically necessary covered services for up to one year from the date your provider disenrolls.
3. **Pre-Natal Care:** you may receive medically necessary covered services for up to six weeks following a normal, vaginal delivery or six months following a cesarean section.

Members in Self-Funded Plans: Please refer to your Summary Plan Description for information regarding Transitional Care.

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Important: You or your provider must request Transitional Care to be evaluated for it. Please call Customer Service at the telephone number on your health plan ID card for details about Transitional Care, including how to make a request for Transitional Care if you believe it is warranted.¹

As noted in your Certificate of Coverage, Summary Plan Description or other governing member document that applies to your plan, St. Joseph's Healthcare System must agree to abide by the terms of the former agreement (provide covered services and abide by our policies and procedures) and must agree to accept our contracted rate as payment in full.

We will continue good faith efforts to negotiate a new agreement with St. Joseph's Healthcare System and will notify you if we reach a new agreement. However, after Feb. 28, 2013, a primary care physician or specialist should not refer you to St. Joseph's Healthcare System for any treatment or test. Instead, you should be referred to one of the major neighboring hospitals in our network, as listed below. You can also search for one of our participating hospitals on our website, oxfordhealth.com (on the Member home page, click on *Find a Physician or Facility* under *Links & Tools*), or you may call Customer Service at the telephone number on your health plan ID card for assistance with identifying a participating hospital.

Neighboring Hospitals	
Hospital Name	City/County
St. Mary's Hospital	Passaic/Passaic County
Hackensack University Medical Center	Hackensack/Bergen County
The Valley Hospital	Ridgewood/Bergen County
Holy Name Medical Center	Teaneck/Bergen County
Chilton Hospital	Pompton Plains/Morris County

If you have questions, or would like more information about Transitional Care, please call Customer Service at the telephone number on your health plan ID card. If you are hearing impaired and require assistance, please call our TTY/TDD line at 1-800-201-4875. Please call 1-800-303-6719 for assistance in Chinese, 1-800-544-4249 for assistance in Korean, or the telephone number on your health plan ID card for assistance in English and other languages.

If you call Customer Service seeking information about Transitional Care, in order to help us better serve you, please let us know that you received this letter about St. Joseph's Healthcare System's participation in our network and you have a question about Transitional Care.

If your provider is calling us about Transitional Care, the provider should use the following telephone number: 1-800-666-1353, select option 2 and follow the prompts (e.g., self-identify as a participating or nonparticipating provider, select option 3 for referrals and precertifications).

We apologize for any inconvenience this may cause you, and we hope this precautionary notification allows you sufficient time to plan for these changes.

Wishing you the best of health.

Sincerely,

Oxford

¹ This language refers to the Transitional Care benefits of New Jersey fully insured members. If you are a member of a New Jersey fully insured plan, you must refer to the Transitional Care benefit described in your Certificate of Coverage for additional information. If you are not a member of a New Jersey fully insured plan, you must refer to the Transitional Care benefit (may also be referred to as Continuity of Care), if any, described in your Summary Plan Description or other governing member document that applies to your plan. Oxford HMO products are underwritten by Oxford Health Plans (NJ), Inc. Oxford insurance products are underwritten by Oxford Health Insurance, Inc. Administrative services provided by UnitedHealthcare Insurance Company, United HealthCare Services, Inc. or their affiliates.