Get to Know Horizon Blue Cross Blue Shield of New Jersey

Horizon Blue Cross Blue Shield of New Jersey is transforming health care. We’re New Jersey’s largest and most experienced health care insurer, with a member-centric approach to keeping quality up and costs down. Let us show you how we continue to earn the distinction of being New Jersey’s top health insurer every day.

Choice matters, which is why we provide you, as a member, with one of the largest selections of doctors, other health care professionals and hospitals in the state. Our broad network gives you access to the care you need when and where you need it — and our tools and resources help explain the insurance process, helping you to make the best decisions for you and your family.

On a national level, we’re a proud member of the Blue Cross and Blue Shield Association, one of the largest, best-known and most respected names in health insurance. In fact, the original Blue Cross and Blue Shield companies first pioneered the concept of health insurance nearly a century ago — and while health care certainly has changed over the years, the importance of having access to affordable quality health care hasn’t.

This brochure will give you details on the Horizon PPO (Preferred Provider Organization) plan — and help you understand our overall philosophy and, most importantly, Our Promise to you.
Focus on quality

Before being admitted into our network, doctors, other health care professionals, hospitals and ancillary providers go through a thorough credentialing process. Depending on the type of provider, the process verifies that they have active licensure without any restrictions, examines practice history, confirms board certification/eligibility as well as hospital admitting privileges, and ensures that all malpractice insurance requirements are met. We then recredential on a regular basis to ensure these doctors and health care professionals continue to meet our standards. This rigorous evaluation process is just one of the ways we act on our commitment to help ensure that our members have access to high-quality care.

The right care, in the right setting

Horizon BCBSNJ’s Utilization Management (UM) Program evaluates the medical necessity, appropriateness and efficiency of certain services and procedures performed by network health care professionals. It places an extra level of quality assurance on the care members receive, measured against industry benchmarks.

The program covers medical necessity review for services such as inpatient stays, outpatient procedures and durable medical equipment (DME). You can learn about the authorization and appeal processes in your benefits booklet.

In addition, Horizon BCBSNJ offers Case Management and Chronic Care programs to coordinate care and offer education and support for eligible members identified as needing an extra level of attention due to their high-risk and/or chronic condition. If you are eligible to participate, the programs’ nurses will collaborate with you and your doctors and other health care professionals to ensure you have access to appropriate health care services and are following your treatment plan.
As a Horizon PPO member, you have lower out-of-pocket costs when you visit a Horizon PPO Network doctor or a facility within the Horizon Hospital Network. You can also visit any other licensed doctor, though you’ll have higher out-of-pocket costs for that out-of-network care.

If it’s part of your Horizon PPO plan, the BlueCard Program offers you the in-network level of benefits outside of New Jersey when receiving services from doctors, other health care professionals and hospitals that participate with Blue Cross and/or Blue Shield Plans across the country as well as in Puerto Rico and the U.S. Virgin Islands.

With Horizon PPO, you’re not required to choose a Primary Care Physician (PCP) and you have referral-free access to many health care services and programs. You get preventive care benefits, emergency medical care and a number of value-added programs. For in-network care, you have no claim forms to file and virtually no paperwork.

Do I need to choose a PCP?

With Horizon PPO, you are not required to select a PCP or get a referral for specialty care. You can visit any doctor in the Horizon PPO Network or any hospital in the Horizon Hospital Network and receive the in-network level of benefits. However, having a primary doctor can be beneficial in the overall management of your health care and helpful in limiting your out-of-pocket cost sharing.
Get to Know…Our Network

Finding in-network doctors and hospitals

Finding an in-network doctor or facility is quick and easy at HorizonBlue.com/doctorfinder. You can search by doctor, other health care professional or hospital and refine your search by selecting filters for distance, gender and language. You can also view maps and get door-to-door directions to a doctor’s location. You can even create a customized directory for doctors in the specialties you use most often within a specified distance.

If you have a Horizon Vision or Horizon Dental plan, you can also use this tool to find in-network vision and dental care professionals. It’s all available at HorizonBlue.com/doctorfinder.

In network vs. out of network: The choice is clear

Our network offers an expansive selection of doctors, other health care professionals, hospitals and laboratory services, which gives you the choice and convenience you need. Horizon PPO gives you access to in- and out-of-network providers. However, there are financial advantages to staying in network — mainly in the form of lower copayments and coinsurance.

To further help you control costs, you can sign in to Member Online Services at HorizonBlue.com and use the Treatment Cost Estimator tool to get detailed estimates for services covered under your plan. Specific test and treatment costs are provided as well as estimated charges associated with various conditions and procedures. The tool also lists providers’ accreditations and professional and peer assessments.

Coverage wherever you go

If the BlueCard® Program is part of your Horizon PPO plan, you have access to the largest health care network in the nation, linking more than 755,000 participating doctors and nearly 6,800 hospitals to Blue Cross and/or Blue Shield Plans across the country. You also have access to laboratory testing services.

It’s as simple as presenting your Horizon BCBSNJ member ID card to any participating BlueCard doctor, other health care professional or hospital. When using participating Blue Cross and/or Blue Shield doctors, you are only responsible for your office visit copayment at the time of service.

Visit HorizonBlue.com/doctorfinder and choose National Doctor & Hospital Finder or call 1-800-810-BLUE (2583) to locate a participating Blue Cross and/or Blue Shield doctor or hospital. In Puerto Rico and the U.S. Virgin Islands, you can call collect at 1-804-673-1177.

1 The Treatment Cost Estimator is not available to all members.
Get to Know…Our Programs to Help You Get and Stay Healthy

Horizon Pharmacy

The Horizon Pharmacy program offers convenience and savings on prescription medications. If your plan includes Horizon Pharmacy, you can choose from 67,000 retail pharmacies nationwide, including CVS, Walgreens, Rite Aid, Walmart and most independent pharmacies.

If you take maintenance medications for a chronic condition, you can also take advantage of our home delivery pharmacy service, which can provide the additional convenience of a 90-day supply of your maintenance medication delivered right to your door.

Learn more at HorizonBlue.com/pharmacy.

Horizon Dental

Dental health is a vital part of your overall health and well-being. Horizon BCBSNJ recognizes that, and offers comprehensive dental programs that give you quality options at affordable costs. If your benefit offering includes Horizon Dental, you have access to an extensive network of quality dentists covering all specialty areas. You also benefit from your Horizon Dental plan being linked to and coordinated with your Horizon BCBSNJ health plan. Learn more at HorizonBlue.com/dental.

Horizon Vision

Horizon BCBSNJ knows how important it is to get vision care — regular eye exams help maintain eye health and can help detect serious medical conditions, such as diabetes. We also know that members want quality and a variety of choices when shopping for eyewear. If your benefit offering includes Horizon Vision, you can get both the eye care and eyewear you need through our nationwide network of doctors and retailers.

Horizon Wellness

Our easy-to-use and comprehensive wellness program is available at no additional cost to you. We take your health and wellness seriously and believe that wellness is key to happiness. That’s why we make it easier for you to set and achieve your wellness goals. With Horizon Wellness, you have access to:

• My Health Manager: Track your health securely and confidentially with this online tool, which offers tailored assessments, personalized recommendations and educational content, including:
  – Digital coaching and customized tools to help you set goals and measure progress
  – Interactive ways to evaluate your health status and identify health risk factors
  – Secure online storage of your health information that you can access at any time
  – A weight tracker, calorie counter, nutrition help and more

• Healthy Living Discounts: Fitness, healthy eating, lifestyle and personal care savings are all available through Blue365®. Get healthy living discounts from top national and local retailers delivered weekly right to your inbox.

• Online Health Education: Our informative monthly wellness webinars, WebMD® videos and other online resources are designed to empower you to make good decisions about your health.

• PRECIOUS ADDITIONS®: Pregnancy resources including a maternity health coach and an educational welcome kit are designed to assist expectant mothers in having a healthy pregnancy.

¹ This service is not available to all members and some group clients may not offer this service to their employees.
Get to Know…Our Specialty Services

We know everyone’s medical needs are unique, and that’s why we have customized programs for care beyond a doctor’s office visit.

**Horizon Behavioral Health℠1**

If your benefit offering includes Horizon Behavioral Health, you have access to safe and effective care, helping ensure medical and behavioral health services are integrated to better manage all aspects of your health and well-being. We are focused on making sure you get the best care possible — with dedicated 24/7 support to be there when you need us.

**Horizon Care@Home℠**

For members requiring home care products and services, Horizon Care@Home provides quality and convenience while keeping costs under control. The program manages durable medical equipment (DME), prosthetics, orthotics, medical foods, diabetic and other medical supplies, traditional home health services (including speech, physical and occupational therapy at home) and home infusion therapy. The program focuses on the distribution of supplies to help ensure members get what they need, when they need it.

**Horizon CareOnline℠1**

How many times have you felt sick but were too busy to get to the doctor’s office? Or maybe you just felt too ill to drive? If Horizon CareOnline is included under your benefit offering, you can talk with a licensed doctor via video, chat or phone, 24 hours a day, seven days a week, from wherever you are — with no appointment needed.

**Radiology and Cardiology Imaging**

Horizon BCBSNJ works with eviCore healthcare to schedule nonemergency outpatient radiology and diagnostic imaging services such as MRI/MRA, CT/CTA and PET scans, as well as echo stress tests, echocardiograms, nuclear medicine studies and more. After your doctor requests you get one of these services, you simply call eviCore healthcare’s convenient Scheduling Line to set up an appointment at the participating imaging center of your choice.

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1 This service is not available to all members and some group clients may not offer this service to their employees.
Get to Know...Our Online Tools and Resources

Member Online Services

Our website, HorizonBlue.com, features online tools that give you access to plan and claim details — and so much more.

Once signed into Member Online Services, you can:

• View your claim status.
• View your Explanation of Benefits (EOB) statements.
• Sign up to go green and receive your EOBs securely online.
• Update your personal information.
• Enter other health insurance coverage information to ensure proper coordination of benefits.
• Display or print your member ID card.
• Track deductible and out-of-pocket maximum information.
• Review covered benefits.
• Estimate and manage expenses with the Treatment Cost Estimator.
• Rate doctors and see other members’ reviews of them.

Have a question?

You can get important information from our convenient online Frequently Asked Questions (FAQs) tool available at HorizonBlue.com/faqs.

Have a question not covered by any of the FAQs? Sign in to Member Online Services for a live Chat (during business hours), or to use our secure online My Messages tool, where you can ask specific questions that will be responded to within two business days.
Important Information You Should Know

Identity Protection Services

We believe personal information should stay that way — personal. That’s why we offer automatic access to AllClear Identity Repair and the option to enroll in additional coverage called AllClear Credit Monitoring at no cost. No matter where or how identity theft occurs, as an eligible Horizon BCBSNJ member, you are covered†. AllClear Identity Repair ensures that you get help from professionals trained to navigate the complicated process of identity repair.

Visit HorizonBlue.AllClearID.com to learn more about AllClear Identity Repair and AllClear Credit Monitoring.

† Horizon BCBSNJ members enrolled in fully insured and self-insured group health plans, including the State Health Benefits Program (SHBP) and the School Employees’ Health Benefits Program (SEHBP), and consumers enrolled in individual health plans on and off the Health Insurance Marketplace are eligible for identity protection coverage. Members enrolled in coverage through the Federal Employee Program® (FEP®), Medicare Advantage, Medicare Part D and Medicaid are not eligible for identity protection coverage.

All of your health plan details, including limitations and exclusions, are available in your benefits booklet. Included here is some important information to help you understand how your coverage works in certain specific situations.

Alternative therapies are not a covered benefit or a reimbursable service under health or prescription drug plans. Some group health plans cover certain services provided by a certified or licensed chiropractor or acupuncturist. If your contract covers chiropractic care or acupuncture as reimbursable services, these services are not entitled to an additional discount.

Some group health plans may not cover an annual dilated retinal exam (DRE). Please refer to your benefits booklet for specific benefit information. No referral is necessary for this exam if you have been diagnosed with diabetes and the exam is covered under your health plan.

Even when preventive and wellness care services are provided by an in-network doctor, other health care professional or hospital, there may be out-of-pocket costs for those services if and when the main purpose of the office visit was for something other than preventive/wellness care services (or if the doctor bills you separately for the office visit and the preventive care).

Visit HorizonBlue.com/privacy-policy and read our Notice of Information Privacy Practices for detailed information on how we protect and safeguard, as well as use and disclose, Horizon BCBSNJ member information.

Visit HorizonBlue.com/AllClearID to learn more about AllClear Identity Repair and AllClear Credit Monitoring.

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If your health plan includes benefits for out-of-network services or supplies, and you opt for such services or supplies, you generally will have higher out-of-pocket expenses than if you used in-network providers. In addition, out-of-network providers are not contractually required to accept Horizon BCBSNJ’s reimbursement as full payment for the services and may bill you for the balance of the charges above Horizon BCBSNJ’s reimbursement. Learn more about out-of-network reimbursement at HorizonBlue.com/oon.
When You’re Ready to Enroll...

At enrollment, Horizon BCBSNJ is required to collect Social Security Numbers (SSNs) or Medicare Health Insurance Claim (HIC) numbers from members. Horizon BCBSNJ submits this information to the Centers for Medicare & Medicaid Services (CMS) to comply with the Mandatory Insurer Reporting Law (Section 111 of Public Law 110-173). CMS collects this information to properly coordinate Medicare payments with other insurance and/or workers’ compensation benefits and to prevent out-of-turn payments from being made in the future. Please make sure you give this information to your employer at the time of enrollment.

Unless you move your residence outside the designated service area, your choice of a health benefits plan will determine your coverage until the next annual open enrollment period, regardless of the continued availability of a particular health care professional who contracts with Horizon BCBSNJ.

Enrolling is simple — and getting your member ID card is, too

1. Fill out the appropriate forms, online or hardcopy, as directed by the individual(s) in charge of health benefits at your company.

2. We will send your member ID cards after we process your enrollment.

3. If you need to visit a doctor or to be admitted to a hospital before receiving your member ID cards, we offer a few convenient options. Simply register with Member Online Services at HorizonBlue.com and sign in. Once there, you can print your member ID card or, if using a web-enabled mobile device, you can sign in and show an image of your member ID card to doctor office or hospital staff.
Notice of Nondiscrimination

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Horizon BCBSNJ does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Horizon BCBSNJ provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Information written in other languages

If you need these services, contact Horizon BCBSNJ’s Director of Regulatory Compliance at the phone number, fax or email listed below.

If you believe that Horizon BCBSNJ has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Horizon BCBSNJ – Director, Regulatory Compliance
Three Penn Plaza East, PP-16C
Newark, NJ 07105
Phone: 1-800-658-6781
Fax: 1-973-466-7759
Email: ComplianceAndEthicsOffice@HorizonBlue.com

You can file a grievance in person, or by mail, fax or email. If you need help filing a grievance, Horizon BCBSNJ’s Director of Regulatory Compliance is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

Office for Civil Rights Headquarters
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building Washington, D.C. 20201
1-800-368-1019 or 1-800-537-7697 (TDD)

Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.
Get Help in Your Language

If you need help understanding this Horizon Blue Cross Blue Shield of New Jersey information, you have the right to get help in your language at no cost to you. To talk to an interpreter, please call 1-800-355-BLUE (2583) during normal business hours.

Spanish (Español): Si necesita ayuda para comprender esta información de Horizon Blue Cross Blue Shield of New Jersey, usted tiene el derecho de obtener ayuda en su idioma sin costo alguno. Para hablar con un intérprete, sírvase llamar al 1-855-477-AZUL (2985) durante el horario normal de trabajo.

Chinese (中文)：如果您需要幫助來理解這份新澤西州地平線藍十字藍盾 (Horizon Blue Cross Blue Shield of New Jersey) 資料，您有權免費獲得以您的語言提供的協助。欲聯絡翻譯人員，請於上班時間致電 1-800-355-BLUE (2583)。

Korean (한국어): 가입자는 Horizon Blue Cross Blue Shield of New Jersey에 관한 정보를 이해하기 위해 주로 사용하는 언어로 무료로 도움을 받을 권리가 있습니다. 통역사의 도움을 받으려면 정상 업무 시간 동안에 1-800-355-BLUE (2583)로 전화해 주십시오.

Portuguese (Português): Se precisar de ajuda para entender estas informações da Horizon Blue Cross Blue Shield of New Jersey, você tem o direito de receber gratuitamente assistência no seu idioma. Para falar com um intérprete, ligue para: 1-800-355-BLUE (2583) no horário normal de trabalho.

Gujarati (ગુજરાતી): તમને આ નૂં જરૂરી માહિતીનો સમજાવવા મદદગાર વર્ણન લો, તમને તમારી વાતાવરણનો કોઇ પણ અંગ માટ મેળવવાનો અધિકાર છે. કોઈ દૂધાડ્યાથી સાથે વાત કરવા, કૃપા કરીને સામાન્ય વિચારચાળી કાચકો ઈફામિલ 1-800-355-BLUE (2583) પર લેન કરો.

Polish (Polski): Jeżeli potrzebujesz pomocy, aby zrozumieć informacje planu Horizon Blue Cross Blue Shield of New Jersey, masz prawo poprosić o bezpłatną pomoc w języku ojczystym. Aby skorzystać z pomocy tłumacza, zadzwoń pod numer 1-800-355-BLUE (2583) podczas normalnych godzin pracy.

Italian (Italiano): Se vi serve aiuto per capire queste informazioni della Horizon Blue Cross Blue Shield of New Jersey, avete diritto ad assistenza gratis nella vostra lingua. Per parlare con un interprete, siete pregati di telefonare al numero 1-800-355-BLUE (2583) durante le normali ore d’ufficio.

Tagalog (Tagalog): Kung kailangan mo ng tulong sa pag-unawa nitong impormasyon ng Horizon Blue Cross Blue Shield of New Jersey, may karapatan kang humingi ng tulong sa iyong wika nang walang gastos sa iyo. Upang makipag-usap sa isang taga-interpret, mangyaring tumawag sa 1-800-355-BLUE (2583) sa loob ng karaniwang mga oras ng negosyo.
Get Help in Your Language

Russian (Русский язык): Если вам необходима помощь в разъяснении этой информации, предоставленной компанией Horizon Blue Cross Blue Shield of New Jersey, у вас есть право на получение помощи на вашем родном языке бесплатно. Для связи с переводчиком звоните по номеру телефона 1-800-355-BLUE (2583) в обычные рабочие часы.

Haitian Creole (Kreyòl ayisyen): Si ou bezwen èd pou konprann enfòmasyon sou Horizon Blue Cross Blue Shield of New Jersey, ou gen dwa pou jwenn èd nan lang natifinal ou gratis. Pou pale avèk yon entèprèt, tanpri rele nimewo 1-800-355-BLUE (2583) pandan lè nòmal biznis.

Hindi (हिंदी): यदि आपको किसी भी प्रश्न के लिए सहायता की जरूरत है, तो आपके अपने भाषा में सहायता पाने का अधिकार है। किसी दुष्कर्षित से बात करने के लिए, कृपया सामान्य कार्य समाप्त करने के दौरान 1-800-355-BLUE (2583) पर कॉल करें।

Vietnamese (Tiếng Việt): Nếu cần được giúp đỡ để hiểu rõ thông tin này của Horizon Blue Cross Blue Shield of New Jersey, quý vị có quyền được giúp đỡ bằng ngôn ngữ của mình miễn phí. Xin gọi số 1-800-355-BLUE (2583) trong giờ làm việc để nói chuyện với người hỗ trợ dịch.

French (Français): Si vous avez besoin d’assistance pour comprendre ces informations au sujet de Horizon Blue Cross Blue Shield of New Jersey, vous avez le droit d’obtenir de l’aide dans votre langue, sans aucun frais. Pour parler avec un interprète, veuillez appeler le 1-800-355-BLUE (2583) pendant les heures normales de bureau.

Navajo (Diné): Díí New Jersey bít hahoodzo Horizon Blue Cross Blue Shield, t’áá ninizaad k’ehji baa hane’íí bik’i đítíįh bee shiká’ a’ doowol nínízingo éi bee ná’a shoo’t’í doó döod báagh ilíní da. Ata’ halne’é la’ bích’tí’ hadeesdzíí nínízingo t’áá shoqódí 1-800-355-BLUE (2583)íí’ nida’anishgo oolkití bik’ehgo hodííni.”

Arabic (عربي): إذا كنت بحاجة إلى المساعدة في فهم معلومات للحق في الحصول على المساعدة بنabic دون تحمل أي تكلفة. للتكلم مع مترجم، يرجى الاتصال خلال ساعات العمل المذكورة بالرقم (2583) 1-800-355-BLUE.

Urdu (اردو): اگر آپ کو فیجورسی افمارشن کے اس آسانی تیلے رنگ والی ہے تیلے رنگ والی ہے مچھلی کو سمجھنا میں مدد کی ضرورت ہے تو آپ کو اپنی زبان میں بیان کی سمجھی کے مدد حاصل کریں کہ کسی بھی مترجم سے بات کہنے کے لئے، براہ کرم معمول کے کاروباری اوقات میں (2583) 1-800-355-BLUE.
Premium Assistance Under Medicaid and the Children’s Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you’re eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren’t eligible for Medicaid or CHIP, you won’t be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a state listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office, call 1-877-KIDS NOW (543-7669) or visit insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren’t already enrolled. This is called a “special enrollment” opportunity, and you must request coverage within 60 days of being determined eligible for premium assistance. If you have questions about enrolling in your employer plan, contact the Department of Labor at askesba.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of July 31, 2016. Contact your state for more information on eligibility.

<table>
<thead>
<tr>
<th>ALABAMA – Medicaid</th>
<th>FLORIDA – Medicaid</th>
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<tr>
<td>Website: myalhipp.com</td>
<td>Website: flmedicaidtplrecovery.com/hipp</td>
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<tr>
<td>Phone: 1-855-692-5447</td>
<td>Phone: 1-877-357-3268</td>
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<tr>
<th>ALASKA – Medicaid</th>
<th>GEORGIA – Medicaid</th>
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<tr>
<td>The AK Health Insurance Premium Payment Program Website: myakhipp.com</td>
<td>Website: dch.georgia.gov/medicaid</td>
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<tr>
<td>Phone: 1-866-251-4861</td>
<td>- Click on Health Insurance Premium Payment (HIPP)</td>
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<tr>
<td>Email: <a href="mailto:CustomerService@MyAKHIPP.com">CustomerService@MyAKHIPP.com</a></td>
<td>Phone: 404-656-4507</td>
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<tr>
<td>Medicaid Eligibility: dhss.alaska.gov/dpa/Pages/medicaiddefault.aspx</td>
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<th>ARKANSAS – Medicaid</th>
<th>INDIANA – Medicaid</th>
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<tr>
<td>Website: myarhipp.com</td>
<td>Healthy Indiana Plan for low-income adults 19-64</td>
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<tr>
<td>Phone: 1-855-MyARHIP (855-692-7447)</td>
<td>Website: hip.in.gov</td>
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<tr>
<td></td>
<td>Phone: 1-877-438-4479</td>
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<td></td>
<td>All other Medicaid Website: http:indianamedicaid.com</td>
</tr>
<tr>
<td></td>
<td>Phone: 1-800-403-0864</td>
</tr>
<tr>
<td>State</td>
<td>Medicaid Website</td>
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</tr>
<tr>
<td>Colorado</td>
<td>colorado.gov/hcpf</td>
</tr>
<tr>
<td>Iowa</td>
<td><a href="http://dhs.state.ia.us/hipp">http://dhs.state.ia.us/hipp</a></td>
</tr>
<tr>
<td>Kansas</td>
<td><a href="http://kdheks.gov/hcf">http://kdheks.gov/hcf</a></td>
</tr>
<tr>
<td>Kentucky</td>
<td>chfs.ky.gov/dms/default.htm</td>
</tr>
<tr>
<td>New Jersey</td>
<td>state.nj.us/humanservices/dmahs/clients/medicaid</td>
</tr>
<tr>
<td>Louisiana</td>
<td>dhh.louisiana.gov/index.cfm/subhome/1/n/33</td>
</tr>
<tr>
<td>New York</td>
<td>nyhealth.gov/health_care/medicaid</td>
</tr>
<tr>
<td>Maine</td>
<td>maine.gov/dhss/ofi/publicassistance/index.html</td>
</tr>
<tr>
<td>North Carolina</td>
<td>ncdhhs.gov/dma</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>mass.gov/MassHealth</td>
</tr>
<tr>
<td>North Dakota</td>
<td>nd.gov/dhs/services/medicalserv/medicaid</td>
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<tr>
<td>Missouri</td>
<td>dss.mo.gov/mhd/participants/pages/hipp.htm</td>
</tr>
<tr>
<td>Oregon</td>
<td>healthcare.oregon.gov/Pages/index.aspx</td>
</tr>
<tr>
<td>State</td>
<td>Medicaid Website</td>
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<tr>
<td>Montana</td>
<td>Website: <a href="dphhs.mt.gov/MontanaHealthcarePrograms/HIPP">dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</a></td>
</tr>
<tr>
<td></td>
<td>Phone: 1-800-694-3084</td>
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<tr>
<td>Pennsylvania</td>
<td>Website: <a href="dhs.pa.gov/hipp">dhs.pa.gov/hipp</a></td>
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<tr>
<td>Nebraska</td>
<td>Website: [dhhs.ne.gov/Children_Family_Services/Access Nebraska/Pages/accessnebraska_index.aspx](dhhs.ne.gov/Children_Family_Services/Access Nebraska/Pages/accessnebraska_index.aspx)</td>
</tr>
<tr>
<td></td>
<td>Phone: 1-855-632-7633</td>
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<tr>
<td>Rhode Island</td>
<td>Website: <a href="eohhs.ri.gov">eohhs.ri.gov</a></td>
</tr>
<tr>
<td>Nevada</td>
<td>Medicaid Website: <a href="dwss.nv.gov">dwss.nv.gov</a></td>
</tr>
<tr>
<td>South Carolina</td>
<td>Website: <a href="scdhhs.gov">scdhhs.gov</a></td>
</tr>
<tr>
<td>South Dakota</td>
<td>Website: <a href="dss.sd.gov">dss.sd.gov</a></td>
</tr>
<tr>
<td>Washington</td>
<td>Website: <a href="hca.wa.gov/free-or-low-cost-health-care/program-administration/premium-payment-program">hca.wa.gov/free-or-low-cost-health-care/program-administration/premium-payment-program</a></td>
</tr>
<tr>
<td></td>
<td>Phone: 1-800-562-3022 ext. 1547</td>
</tr>
<tr>
<td>Texas</td>
<td>Website: <a href="gethipptexas.com">gethipptexas.com</a></td>
</tr>
<tr>
<td>West Virginia</td>
<td>Website: <a href="dhhr.wv.gov/bms/Medicaid%20Expansion/Pages/default.aspx">dhhr.wv.gov/bms/Medicaid%20Expansion/Pages/default.aspx</a></td>
</tr>
<tr>
<td></td>
<td>Phone: 1-877-598-5820</td>
</tr>
<tr>
<td></td>
<td>CHIP: <a href="health.utah.gov/chip">health.utah.gov/chip</a></td>
</tr>
<tr>
<td>Vermont</td>
<td>Website: <a href="greenmountaincare.org">greenmountaincare.org</a></td>
</tr>
<tr>
<td>Wyoming</td>
<td>Website: <a href="wyequalitycare.acs-inc.com">wyequalitycare.acs-inc.com</a></td>
</tr>
<tr>
<td>Virginia</td>
<td>Medicaid Website: <a href="coverva.org/programs_premium_assistance.cfm">coverva.org/programs_premium_assistance.cfm</a></td>
</tr>
<tr>
<td></td>
<td>Medicaid Phone: 1-800-432-5924</td>
</tr>
<tr>
<td></td>
<td>CHIP Phone: 1-855-242-8282</td>
</tr>
</tbody>
</table>
To see if any other states have added a premium assistance program since July 31, 2016, or for more information on special enrollment rights, contact either:

**U.S. Department of Labor**  
Employee Benefits Security Administration  
dol.gov/ebsa  
1-866-444-EBSA (3272)

**U.S. Department of Health and Human Services**  
Centers for Medicare & Medicaid Services  
cms.hhs.gov  
1-877-267-2323, Menu Option 4, Ext. 61565

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To provide PEACE OF MIND for those who depend on us.

To enrich the LIVES AND HEALTH of our members AND the communities we serve.
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Please consult your benefit booklet or contact your group administrator or Horizon BCBSNJ Member Services for information regarding the specific reimbursement method or fee schedule for out-of-network services applicable to your plan. For additional information on out-of-network benefits, visit HorizonBlue.com/oon.

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