We’ve got you covered

Understanding your Horizon Medicare Advantage NJ DIRECT (PPO) health plan

HorizonBlue.com/shbp
Editor’s Message

Take the opportunity to embrace change and improvement

As we strive for good health, let us have an active mind and body to help enjoy a long, productive life. In this issue of Focus on Health, the first of 2018, you will find plenty of helpful information to use on your journey toward improved health.

Prevention is key to staying healthy. Therefore, take time to schedule your annual checkup. During that doctor’s visit, be sure to have an open conversation about your health status and concerns. A list of questions to ask your doctor is on page 2. You can also find a list of free preventive tests and screenings to discuss with your doctor in this issue.

Turn to page 5 to learn about an update to your pharmacy benefits and for a list of drugs covered under your Part B coverage. You can also learn about a new program available to you - the Medicare Diabetes Prevention Program (MDPP). This program will be available as of April 1, to members at risk for diabetes. See page 8 for more details.

Lastly, you may have an opportunity to participate in the Consumer Assessment of Health Providers and Systems (CAHPS) survey. If you are selected to participate, you can offer your opinion on quality improvement issues. Make your voice heard. Learn more on page 13. If you have any questions, you may reach us by calling Member Services at 1-800-414-SHBP (7427) or (TTY/TDD 711), Monday through Friday, from 8 a.m. to 6 p.m., Eastern Time (ET).

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Be proactive.
Ask your doctor questions

When you go to your doctor, it’s important that you get clear and concise information about your health. Ask your doctor to repeat instructions that might be unclear or puzzling. It’s OK to ask questions so you fully understand what your doctor is telling you.

Here are some questions to ask so you can get the most out of your next visit:

• What is my main health issue or concern?
• What do I need to do?
• Why is it important for me to do this?
• What treatments do I need and why?
• Are there any alternative treatments?
• Does my medication have any side effects?
• Will this medicine interact with medicines I am already taking?

Make sure you ask for your doctor’s notes at the end of your visit. This will help you remember what was discussed and if there are any actions you need to take, any additional tests or follow-up appointments needed or how and when to take new medication.

Raise questions about medical tests

So, your doctor has ordered medical tests. Prior to having the tests, be sure to ask your doctor to explain:

• What will the tests reveal?
• What will the tests cost?
• How long will it take to receive results?
• How will you be notified about the results?

Source: National Institute on Aging
A complex health condition can be difficult to manage. That’s why Horizon Blue Cross Blue Shield of New Jersey offers a Care Management Program.

As a member of Horizon Medicare Advantage NJ DIRECT (PPO), you will be assigned to a Care Manager who will help coordinate services with your health care providers to make sure you receive the best possible care. Care Management is a confidential, voluntary program that is a part of your Horizon Medicare Advantage NJ DIRECT (PPO) plan. It is available to you at no additional cost.

**How it works**

Our Care Management Program is all about you. As a participant, you’ll receive a health assessment that will assist in the development of your individualized Plan of Care. You will receive routine follow-up assessments through your Care Manager, a licensed nurse or social worker or a member of our Care Management team. You will also receive educational materials to help you develop individual health goals with your doctor and other health care providers, as well as help you make informed decisions about your treatment.

**What a Care Manager can do for you**

Your Care Manager works with you, your doctor, pharmacist, family members and any others who may be involved in your care. Your Care Manager will help you manage your health care needs, including scheduling, doctor visits, behavioral health, preventive services and coordinating visits with other health care providers.

**Your Care Manager will work with you and your treating doctor(s) to:**

- Develop and update your Plan of Care with goals that are right for you
- Coordinate health care services so they are received at the most appropriate level and setting to maximize your benefits
- Assist in securing any authorizations you may need before receiving services
- Provide information on community resources and health and wellness programs

If you’d like more information about our Care Management Program, call us at 1-855-742-7861, option 2 (TTY/TDD 711), Monday through Friday, between 8 a.m. and 5 p.m., ET.
Getting help from us when you need it

If you have any questions about your Horizon Medicare Advantage NJ DIRECT (PPO) plan, please call us at 1-800-414-SHBP (7427). Our dedicated Member Services Representatives are available Monday through Friday, from 8 a.m. to 6 p.m., ET. If you have hearing or speech difficulties, call 711 during the same hours.

Our secure Member Online Services is also available to you 24 hours a day, seven days a week. Register at HorizonBlue.com/shbp and sign in to:

- See detailed information about your plan.
- View eligibility and benefits.
- View claim status and Explanation of Benefits (EOB) statements.
- Print or request your member identification (ID) card, or display it on a mobile device.
- Update your other health insurance coverage information.
- Take advantage of health and wellness tools, educational resources and more.
- Use helpful tools from WebMD® to securely store and track your personal health information.
- Use our Chat feature to connect live with one of our Member Services Representatives Monday through Friday, from 8 a.m. to 8 p.m., ET.

Lower your chance of falling

There are things you can do to prevent falls from happening. Exercising and using handrails when you’re in bathrooms, hallways and stairs are just some simple things you can do. You can also follow these tips:

- Get enough sleep and avoid alcohol.
- Slowly get out of chairs and bed.
- Have regular eye and ear tests. If you wear eyeglasses or a hearing aid, use them correctly and make sure that your prescription is up to date.
- Keep floors clear of clutter.
- Keep your home well lit.
- Tell your doctor if your medicine makes you dizzy.
- Seek help immediately if you fall and get hurt. If you do not think you are hurt, be sure to tell your doctor about the fall during your next appointment.
Did you know your Part D coverage is not managed by Horizon BCBSNJ?
As a member of the State Health Benefits Program, your Part D coverage, also called your Medicare prescription drug benefit, is administered by OptumRx®. This Part D coverage is separate from your Horizon Medicare Advantage NJ DIRECT (PPO) plan. If you have questions or concerns about your Part D Rx coverage, please call OptumRx at 1-844-368-8765 (TTY/TDD 711).

If you decide to waive your Part D coverage with OptumRx and enroll in a freestanding Part D plan with another carrier, you cannot be enrolled in a Horizon Medicare Advantage NJ DIRECT (PPO) plan, per the Centers for Medicare & Medicaid Services (CMS) guidelines. For more information, please call the Division of Pensions and Benefits at 1-609-292-7524 (TTY/TDD 711).

Accessing pharmacy benefits under Medicare Part B
As a member of the Horizon Medicare Advantage NJ DIRECT (PPO) plan, you also have a Medicare Part B benefit that covers medically necessary services and supplies. Common medical supplies are covered under the Part B portion of your plan through Prime Therapeutics.

Commonly covered Part B drugs and supplies

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetic supplies</td>
<td>Test strips, lancets</td>
</tr>
<tr>
<td>Immunosuppressant drugs</td>
<td>Drugs used following Medicare-covered organ transplants</td>
</tr>
<tr>
<td>Oral anti-cancer drugs</td>
<td>Certain drugs used for cancer treatment*</td>
</tr>
<tr>
<td>Oral anti-emetic drugs</td>
<td>Drugs used within 48 hours of chemotherapy</td>
</tr>
<tr>
<td>Erythropoietin</td>
<td>Treatment of anemia for people undergoing dialysis</td>
</tr>
<tr>
<td>Vaccines</td>
<td>Influenza, pneumococcal and hepatitis B</td>
</tr>
<tr>
<td>Parenteral nutrition</td>
<td>If permanent dysfunction of digestive tract</td>
</tr>
</tbody>
</table>

*Note: Some oral anti-cancer drugs are covered under your Part D benefits.

How it works
The pharmacy will bill Prime Therapeutics and you will be responsible for member cost share, if applicable. Just provide the pharmacist with the Rx Bin (016499) and PCN (Part B) needed to submit Part B claims. To learn more about this benefit, please call 1-800-414-SHBP (7427) (TTY/TDD 711) to speak to a dedicated Member Services Representative Monday through Friday, from 8 a.m. to 6 p.m., ET.
Is getting organized one of your resolutions for 2018? This is the perfect time to set your health care goals for the year. Your first step should be to stay current with an annual wellness visit, and any necessary screenings and immunizations. Call your doctor to see if you could benefit from having a screening, preventive service or counseling for any of the following:

- Abdominal aortic aneurysm
- Alcohol misuse
- Bone mass measurement (bone density)
- Cardiovascular disease
- Cervical and vaginal cancer
- Colorectal cancer
- Depression
- Diabetes
- Glaucoma
- Hepatitis C
- HIV

- Immunizations: pneumonia, flu, hepatitis B
- Lung cancer
- Mammogram
- Medical nutrition therapy
- Obesity
- Prostate cancer
- Sexually transmitted infections
- Smoking and tobacco cessation
- Welcome to Medicare preventive visit

Time to schedule your annual appointments

Our commitment to quality

At Horizon BCBSNJ, we want to be sure you receive access to quality care. Our Quality Improvement Program (QIP) monitors areas that affect the care our members receive and works to improve the quality of care and services for our members. The care and services our members receive should be appropriate, necessary and properly administered. For information about the QIP and progress toward goals, please call 1-800-414-SHBP (7427) (TTY/TDD 711), Monday through Friday, from 8 a.m. and 6 p.m., ET, and ask for the Quality Department. You may also visit HorizonBlue.com/shbp and select Learn about the Quality Improvement Program from the I Want To menu.
March is National Colorectal Awareness Month

Did you know there are multiple screening options to detect colorectal cancer?

Colorectal cancer, often called colon cancer, occurs in the colon or rectum. Colon cancer usually occurs in adults age 50 or older. Your risk of developing colon cancer increases with age and if you have had colorectal polyps or inflammatory bowel disease.

**Symptoms may include:**
- Blood in or on your stool
- Change in bathroom habits, such as stools that are thinner than usual
- Stomach aches, pains or cramps that occur often
- Unexplained or sudden weight loss

**Colon cancer is treatable and curable if caught early. Screenings for colon cancer include:**

<table>
<thead>
<tr>
<th>Screening</th>
<th>Description</th>
<th>How often?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fecal Occult Blood Test (FOBT)</td>
<td>A lab test that looks for blood in a stool sample</td>
<td>Yearly</td>
</tr>
<tr>
<td>Flexible Sigmoidoscopy</td>
<td>A procedure that uses a tiny camera on a thin tube to view the rectum and lower third of the colon to check for signs of cancer</td>
<td>Every five years</td>
</tr>
<tr>
<td>Colonoscopy</td>
<td>Similar to a flexible sigmoidoscopy, but uses a longer tube to view the entire colon</td>
<td>Every ten years</td>
</tr>
<tr>
<td>CT Colonography (virtual colonoscopy)</td>
<td>A CT scanner is used to take images of the colon</td>
<td>Every five years</td>
</tr>
<tr>
<td>FIT-DNA test</td>
<td>Also referred to as the stool DNA test – a lab test that checks for DNA changes and blood in stool sample</td>
<td>Every one to three years</td>
</tr>
</tbody>
</table>

**Source:** Centers for Disease Control and Prevention, NCOA HEDIS
New Medicare Diabetes Prevention Program

On April 1, the Medicare Diabetes Prevention Program (MDPP) will be available to members who are at risk for diabetes. The MDPP one-year lifestyle intervention includes stress reduction, dietary coaching and moderate physical activity. It consists of at least 16 weekly hour-long sessions for the first six months and monthly core maintenance sessions for the last six months. These sessions are provided whether or not there is weight loss.

To be eligible for the MDPP, members must have:

- A body mass index (BMI) of at least 25 (if not self-identified as Asian) or a BMI of at least 23 (if self-identified as Asian) at the first core session of the program.
- An HbA1c test with a value between 5.7 percent and 6.4 percent, and a fasting plasma glucose of 110 to 125 mg/dL, or a two-hour plasma glucose of 140 to 199 mg/dL (oral glucose-tolerance test) within the 12 months prior to attending the first core session.
- No previous diagnosis of type 1 or type 2 diabetes with the exception of gestational diabetes.
- No end-stage renal disease.

Members who achieve and maintain the minimum weight loss of 5 percent after the 12-month core program are eligible for three-month intervals of ongoing maintenance sessions.

CMS estimates that more than 11 million people, or about 26 percent of people 65 years of age and older in the United States, have diabetes and face higher risks of heart disease, kidney failure, limb amputations and blindness.

Stay tuned for additional information about eligibility and how to enroll. For questions or more information about this program, call Member Services at 1-800-414-SHBP (7427) (TTY/TDD 711), Monday through Friday, from 8 a.m. to 6 p.m., ET.
Are you committed to staying on top of your health and well-being during 2018? Try these helpful tips:

1. **Protect your heart.** Lower your chance of heart attack and stroke. Exercise, choose good nutrition, lower high blood pressure and have your cholesterol checked.

2. **Get vaccinated.** Vaccinations aren’t just for kids. Adults need protection against diseases too. Ask your doctor about vaccines to protect you against shingles, flu and pneumonia, and if previous vaccinations need a booster to continue to offer you protection against other diseases.

3. **Quit smoking.** The benefits are obvious; when you stop smoking you lower your risk of heart disease, cancer, lung disease and other smoking-related illnesses. There are various tools and tips on quitting and staying quit on smokefree.gov.

4. **Choose a healthy lifestyle.** Good habits, like eating nutritious food, keeping a healthy weight, staying active, managing stress and limiting alcohol can all help lower your risk of developing cancers and other diseases.

5. **Exercise regularly.** A brisk walk, a gentle stretch or even yoga or meditation helps lift your mood.

6. **Learn the warning signs of diabetes.** Watch for extreme thirst, frequent urination, increased hunger, tiredness and blurred vision. These may be signs of type 2 diabetes.

7. **Visit your doctor.** Schedule annual appointments and keep up to date on your health screenings.

8. **Take your medications as prescribed.** Share any side effects with your doctor. Do not change your medication before talking with your doctor and do not share medications with others. Call your doctor or 911 if you experience a severe reaction to any medication.

9. **Increase your water intake.** Hydration is good for your mind and body. Aim for six to eight glasses a day.

10. **Have your eyes examined.** If you are age 60 or older, schedule your annual eye exam today.
Horizon Healthy Journey

In 2016, Horizon BCBSNJ created the Horizon Healthy Journey program. Through this program, our goal is to reach out, engage and educate both members and providers on the importance of chronic condition management, medication adherence, timeliness of visits and preventive visits. Some covered services under preventive visits include:

- Annual wellness visit with your Primary Care Physician (PCP)
- Breast cancer screening
- Colorectal cancer screening
- Bone Mineral Density test
- Diabetes care
- Flu vaccine

In addition, as a part of the Horizon Healthy Journey program, we may contact you with helpful information such as:

<table>
<thead>
<tr>
<th>Personal touch</th>
<th>Live calls, health screening reminders, education and chronic disease management</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness</td>
<td>Automated Interactive Voice Response calls, education material and text messages</td>
</tr>
<tr>
<td>Rewards and incentives</td>
<td>Incentive programs that reward members for participating in activities that improve their health or help to prevent injury and illness</td>
</tr>
</tbody>
</table>

Horizon BCBSNJ is pleased to announce we are also working with Mobile Medical Examination Services, Inc. (MedXm) to improve your quality of care. MedXm has a specialized team of licensed, credentialed and professional providers and technicians who may contact you if you’re due for a health screenings such as colorectal cancer screening and diabetes care (A1c, micoralbumin test or eye exam). Please note this is only for eligible members. Eligibility determined by plan.

If you have questions about any of these programs or health screenings, please call the Horizon Healthy Journey line at **1-844-754-2451** (TTY/TDD **711**), Monday through Friday, 8:30 a.m. to 5 p.m., ET.

Today is the day to take care of you

The first step in your health journey is to schedule and keep appointments with your doctor and specialists. During your wellness visit, you should be open with your doctor and address any and all concerns you may have. It is important to speak with your doctor about any recent falls, difficulty or trouble balancing, hearing or vision loss, changes in bathroom habits or urinary incontinence. Your doctor may have resources to help with these sensitive but important health concerns. Identifying and addressing any problem early may prevent it from getting worse.
Caring for the Caregiver

At some point we may find ourselves assuming the role of caregiver for a friend, partner, spouse, parent or child. Being a caregiver can become overwhelming, so much so that we may forget to take care of ourselves. These tips can help you get the support you need while caring for someone with a chronic illness.

Caring for your loved one

• **Learn as much as you can about your loved one’s illness.** The more you know, the less anxiety you’ll have and the more effective you will be.

• **Establish good communications with care providers.** With the patient’s permission, health professionals can have open conversations with loved one’s about treatment options. Do not be afraid to seek a second opinion if you feel it is necessary.

• **Know your options.** Some conditions can be managed at home while some require a hospital or skilled nursing facility.

• **Trust your instincts.** Remember, you probably know your loved one best. Never ignore what doctors tell you, but listen to your gut.

• **Encourage your loved one’s independence.** Caregiving does not mean doing everything for your loved one. Be open to technologies and strategies that allow both you and your loved one to be as independent as possible.

Resources for caregivers

• **Seek support from other caregivers.** Remember you are not alone.

• **Take advantage of available counseling and support offered to caregivers.** Support groups and one-on-one counseling can help you cope with your feelings and can connect you with resources.

• **Other places you can turn to for caregiver support include:**
  1. Family members or friends who will listen without judgment
  2. Your church, temple or other place of worship
  3. National caregiver organizations
  4. Organizations specific to your family member’s illness or disability

• **Consider respite care.** Respite care services may include help with a specific task or having someone provide care while you take time off.

• **Adult day care centers.** These facilities can provide needed breaks during the day and provide you and your loved one welcome diversions and activities.

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Older Americans Month

May marks the United States’ observance of Older Americans Month. The Administration of Aging has announced that the theme for 2018 will be Engage at Every Age. This means that you are never too old, or too young, to take part in activities that can improve your physical, mental and emotional well-being. Participating in activities like physical fitness, word puzzles or even mentoring a young adult are just a few ways you can get engaged.

For more information about Older Americans Month, as well as ways to get engaged and make a difference, visit oam.acl.gov.

Take care of yourself

- **Know your limits.** Be realistic about how much of your time and yourself you can give. Set clear limits, and communicate those limits to the other people involved in the care of your loved one.

- **Stay social.** Make it a priority to visit regularly with other people. Don’t let yourself become isolated.

- **Do things you enjoy.** Laughter and joy can help keep you going when you face trials, stress and pain.

- **Maintain balance in your life.** Don’t give up activities that are important to you, such as your work or your hobbies.

- **Give yourself a break.** Take regular breaks from caregiving, and give yourself an extended break at least once a week.

- **Keep a journal.** Write down your thoughts and feelings. This will give you perspective and serve as a way to release strong feelings.

- **Feed your spirit.** Pray, meditate, exercise or do another activity that makes you feel part of something greater.

- **Watch out for signs of depression and anxiety,** and get professional help if needed.

- **Take care of your own health** so that you can be strong enough to take care of your loved one.

- **Accept offers of help** and suggest specific things people can do to help you.

- **Give yourself credit** for doing the best you can in one of the toughest jobs there is!

Remember, only when we first help ourselves can we effectively help others. Caring for yourself is one of the most important—and one of the most often forgotten—things you can do as a caregiver. When your needs are taken care of, the person you care for will benefit, too.
Taking the Medicare survey can be good for your health

Surveys are a common way of giving important information. The Consumer Assessment of Health Providers and Systems (CAHPS) survey is developed by CMS and sent to members who are randomly selected to participate.

Your experience with Horizon BCBSNJ is important to us. If you receive the CAHPS survey, your answers will be part of the data that helps us improve how we deliver our services.

The survey asks:
• How your health plan is working for you
• How healthy you are, based upon how you manage your everyday life
• How you get the health care resources you need
Stay enrolled in your retiree wellness program

To continue participating in the Horizon Medicare Advantage NJ DIRECT (PPO) plan, there are certain requirements that you must complete. Requirements include:

1. **Have a complete physical exam each year, along with the appropriate tests and screenings as recommended by your doctor.** Submit a completed Annual Physician Certification (APC) to Horizon BCBSNJ by **December 31** each year. Your first annual physical and APC must be completed by **December 31** of the year you retire, unless you retire in September, October, November or December. If you retire or receive our invitation letter in those months, you have until **December 31** of the following year to have your physical exam and submit your first APC.
   - The State Health Benefits Program (SHBP) covers one annual routine wellness physical exam per calendar year. Submit only one APC each year based on the exam.
   - Most routine screenings are covered only when you use in-network doctors and other health care professionals and facilities.
   - You may find APC forms at HorizonBlue.com/retireewellness or by calling Member Services at 1-800-414-SHBP (7427) (TTY/TDD 711).

2. **Retake the health survey each year between January 1 and December 31, preferably after your annual physical.** Note your current weight, blood pressure, blood sugar, cholesterol and the results of your tests and screenings.

3. **If you are eligible, participate in Horizon BCBSNJ’s Care Management Program.** A review of claims data and/or your health survey results may indicate that you are eligible to participate in the Care Management Program. The Horizon BCBSNJ nurses who support this program work with you and your doctor to make sure you get the health information and support you need to take care of a chronic health condition. Information about the program and instructions for contacting a nurse Care Manager will be mailed to you. If you are eligible to participate in the Care Management Program, you must do so to maintain your enrollment in the SHBP Retiree Wellness Program.

**Noncompliance with program requirements**

If you are terminated from the SHBP Retiree Wellness Program for noncompliance or if you did not complete a health survey by the deadline in your SHBP Retiree Wellness Program invitation letter, you may enroll in the SHBP Retiree Wellness Program for the following calendar year by completing a health assessment between **January 1** and **October 31** of the current year.
Do you reside outside of New Jersey?

Tips for seeing a provider outside of New Jersey

A new year can bring with it many questions about insurance coverage. For members living outside of New Jersey—full time or seasonally—specific questions or concerns may arise. This series of articles will answer many of your questions.

Horizon BCBSNJ continually educates providers about the benefits available to Horizon Medicare Advantage NJ DIRECT (PPO) members. However, some providers may need additional education to understand the out-of-network PPO benefits. If you experience this situation, please call Member Services at 1-800-414-SHBP (7427) (TTY/TDD 711), Monday through Friday, from 8 a.m. to 6 p.m., ET. You may also remind the provider of the following benefits:

• All Horizon Medicare Advantage NJ DIRECT (PPO) members are eligible to see providers in the Blue Cross Blue Shield network of providers. If the provider’s office is participating in the BLUE Network of the state the member resides in, they are considered In Network (INN). As stated on the back of the member ID card, all claims should be submitted to the local BLUE office in the state where the services were rendered. For example, providers should submit claims to Florida Blue for Florida residents.

• All Horizon Medicare Advantage NJ DIRECT (PPO) members are allowed to see providers who accept traditional Medicare. If the provider is not in the BLUE Network, but accepts traditional Medicare, Medicare Advantage NJ DIRECT (PPO) members can utilize their Out of Network (OON) benefits at no additional cost. These providers would also submit claims to the local BLUE office in the state where the services were rendered.

Need help with appointments?

With the National Doctor & Hospital Finder, locating a new provider is simple. Visit HorizonBlue.com/shbp and click the Find a Doctor tab, located on the right side of the homepage.

• Choose Find Doctors Outside of NJ
• The National Doctor & Hospital Finder requires you to enter your location (by zip code) and your plan (NJN).
• Select a provider by name or a specialty, such as a Cardiology or Endocrinology.

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You can then refine your results, such as miles from your address, languages spoken. You will have an option to Create Directory, which can be emailed or printed.

If you prefer to call us, you may request a list of local providers by contacting Member Services at 1-800-414-SHBP (7427) (TTY/TDD 711), Monday through Friday, between 8 a.m. and 6 p.m., ET. Be sure to verify your correct address with Member Services.

Helpful travel tips
Warmer weather may mean increased travel for many members. When traveling, we’d like to make sure our member’s health care is as seamless and routine as it is when they are home. Whenever traveling within the United States, be sure to notify your Care Manager so you both can review what you will need while you’re away and any care you’ll need can be coordinated with your providers. If you will be traveling out of the country, please log onto bcbsglobalcore.com for valuable information you can use while traveling abroad, such as finding a doctor and filing a claim. Please note, when traveling outside the United States, coverage is only provided if you experience a medical emergency.

If you do not currently have a Care Manager but are interested in the program, please contact the Horizon Medicare Advantage NJ DIRECT (PPO) Care Management Department between 8 a.m. and 5 p.m., ET, at 1-855-742-7861, option 2 (TTY/TDD 711) for further assistance.

Have a question about claims?
Many provider issues regarding claim reimbursement are preventable. You may remind providers to:

• Submit claims to the local Blue office. See the back of your member ID card for details.
• Include prefix NJN before the member 3HZN ID number on claims for accurate claims processing.

If you experience difficulties in having your claims paid, please call our Member Services Department at 1-800-414-SHBP (7427) (TTY/TDD 711), Monday through Friday, between 8 a.m. and 6 p.m., ET. Members can also call the Care Management Department at 1-855-742-7861, option 2 (TTY/TDD 711), Monday through Friday, between 8 a.m. and 5 p.m., ET, for further assistance.
Getting help in your language

ATTENTION: If you speak Spanish, language assistance services, free of charge, are available to you. Call 1-800-414-7427 (TTY/TDD 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-414-7427 (TTY/TDD 711).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-414-7427（TTY/TDD 711）。

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-414-7427 (TTY/TDD 711) 번으로 전화해 주십시오.

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-414-7427 (TTY/TDD 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-414-7427 (TTY/TDD 711) 번으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-414-7427 (TTY/TDD 711).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-414-7427 (телетайп 711).

APENDIX: If you speak Hindi, the call center can provide services in your language. Call 1-800-414-7427 (TTY/TDD 711).

ATANTSA: If you speak Afaari, there are language services available to you. Call 1-800-414-7427 (TTY/TDD 711).

THIET: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-414-7427 (TTY/TDD 711).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-414-7427 (ATS 711).

خباردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت مین دستیاب بین کال کریں 1-800-414-7427 (TTY/TDD 711).
Notice of Nondiscrimination

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate against nor does it exclude people or treat them differently on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

Horizon BCBSNJ provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and information written in other languages.

Contacting Member Services
Please call Member Services at 1-800-414-7427 (TTY/TDD 711) or the phone number on the back of your member ID card, if you need the free aids and services noted above and for all other Member Services issues, including:

- Claim, benefits or enrollment inquiries
- Lost/stolen ID cards
- Address changes
- Any other inquiry related to your benefits or health plan

Filing a Section 1557 Grievance
If you believe that Horizon BCBSNJ has failed to provide the free communication aids and services or discriminated on the basis of race, color, gender, national origin, age, or disability, you can file a discrimination complaint also known as a Section 1557 Grievance. Horizon BCBSNJ’s Civil Rights Coordinator can be reached by calling the Member Services number on the back of your member ID card or by writing to the following address:

Horizon BCBSNJ – Civil Rights Coordinator
PO Box 820
Newark, NJ 07101

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)

OCR Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

Para ayuda en español, llame a 1-800-414-7427 (TTY/TDD 711).
Member rights and responsibilities

As a Horizon Medicare Advantage NJ DIRECT (PPO) member, you have rights. These include the right to receive information about Horizon BCBSNJ’s services, policies and procedures, products, networks, appeals procedures, coverage limitations and the information you need to understand your benefits.

You also have responsibilities. These include reading and understanding member materials, including your member rights and responsibilities and other materials that explain your coverage. You also need to provide, to the best extent possible, information about your health that Horizon BCBSNJ, its network doctors and other health care professionals need to know to properly care for you.

Your member rights and responsibilities can be found in your Horizon Medicare Advantage NJ DIRECT (PPO) Evidence of Coverage and on our website at HorizonBlue.com/shbp, under I Want To. A printed copy of your member rights and responsibilities is also available upon request by calling 1-800-414-SHBP (7427) (TTY/TDD 711).