

How your benefits work

Selecting your Horizon NJ Health doctor

You can choose a personal Horizon NJ Health doctor, known as a Primary Care **Provider** (PCP).

Use the Horizon NJ Health Provider Directory to find a doctor near you.

An authorized person acting for you may help you choose a doctor. If you did not select a PCP on your enrollment form, we will select one for you based on where you live and your age. If you would like to change your PCP, call Member Services or sign in at horizonNJhealth.com. Member Services can also help you find a doctor in your area.

Provider Directory

Horizon NJ Health has a large network of doctors and other health care professionals that provide quality health care services to our members. This list is called the Provider Directory. All types of providers are listed, including doctors, hospitals, laboratory services, pharmacies, general dentists, dental specialists and more. There are three different ways to view the Provider Directory:

1. **Online at horizonNJhealth.com** – updated daily, our *Doctor & Hospital Finder* lets you search for a provider by location, specialty, name and other fields. All types of providers are listed, including doctors, hospitals, laboratory services, pharmacies, general dentists, dental specialists and more.
2. **County-specific provider directory** – updated monthly, this directory is mailed to new members. It lists PCPs, general dentists and dental specialists, hospitals, pharmacists and other commonly needed providers in and around a member's county.

3. **Printed Provider Directory** – updated twice a year, this book lists all specialists, hospitals, pharmacists and other providers.

If you need to find a dentist who treats children ages 0-6, the "NJ Smiles Directory" is listed at horizonNJhealth.com, or you can ask a Member Services Representative at **1-844-444-4410 (TTY 711)**.

All versions of the Provider Directory include information such as office hours, languages spoken and local public transportation services. To get a copy of a printed directory, call Member Services.

Information about your provider, including your PCP and specialist, can be found when you search our *Online Doctor & Hospital Finder* at horizonNJhealth.com/findadoctor. There you can see:

- Provider's name, office location and phone number
- Specialty
- Professional qualifications
- Languages spoken

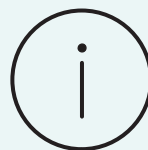
To find additional information regarding a provider, including the medical school attended and residency completion, visit one of the following websites:

NJ Division of Consumer Affairs:
njconsumeraffairs.gov

American Board of Medical Specialties:
abms.org

Words to know

Provider: A person or location (such as your PCP, hospital or dentist) that gives medical or dental care





The role of your PCP

Call your doctor's office first – 24 hours a day, seven days a week – whenever you need medical care. Your doctor will know how to help. Most non-emergency health care services must be planned through your Horizon NJ Health PCP.

Your health services are covered 24 hours a day, seven days a week. Horizon NJ Health covers services by PCPs, **specialists**, dentists, dental specialists, certified nurse midwives, certified nurse practitioners, clinical nurse specialists, physician assistants and independent clinics in Horizon NJ Health's network. Your PCP may sometimes ask other health care providers to help give you timely care.

What if I cannot reach my doctor or dentist right away?



There could be times – maybe at night or on weekends – when your doctor or dentist is not in the office. You should still call your doctor's or dentist's office. Your doctor or dentist has made arrangements to help you even if the office is closed.

Questions and answers about your doctor and dentist

Q. If I have Medicare and NJ FamilyCare, do I need to see my Horizon NJ Health PCP?

A. For most health services, you can see your Medicare doctors as long as they accept patients who have Original Medicare.

There are health services that Medicare does not cover, but NJ FamilyCare does. These include but are not limited to:

- Dental services (including treatment by dental specialists)
- Vision services
- Hearing services
- Incontinence supplies
- **Personal care assistant** services (agency or Personal Preference Program)
- Medical day care

MLTSS members may also be eligible for certain MLTSS services. These can include but are not limited to:

- Home delivered meals
- Personal Emergency Response System
- Home based supportive care
- Chore services

Words to know

Care Manager: Your Care Manager will be your main contact in the MLTSS program. He or she will work with you, your PCP and with input from your caregiver, to develop a Plan of Care to get the MLTSS services you need.

Specialist: A doctor or dentist who has been specially trained in a certain field of medicine, like a cardiologist, Ob/Gyn or orthodontist.



How your benefits work *(continued)*

Q. What if I want to change my doctor or dentist?

A. You can change your PCP at any time*. Member Services can help you choose a new doctor and will send you a new Horizon NJ Health member ID card with the new doctor's name and phone number. You can also request to change your PCP through **horizonNJhealth.com**.

If you want to change your dentist, you may select one from our list of participating providers at **horizonNJhealth.com**. Simply click *Need a Doctor* and select *Dentist*, or call Member Services at **1-844-444-4410** (TTY **711**).

Sometimes, Horizon NJ Health reserves the right to deny a request to change to a new doctor. Situations where Horizon NJ Health may deny a request include:

- If a PCP asks that a member not be included on his or her list of patients
- If a PCP has too many patients to take any more

Creating a positive, healthy relationship with your doctor is important. If your PCP believes that he or she cannot do this with a member, they may ask that the member be changed to another PCP. Other times in which a PCP may ask that a member be changed to another doctor include:

- If they cannot solve conflicts with the member
- If a member does not follow health care instructions, which stops the doctor from safely or ethically proceeding with the member's health care services
- If a member has taken legal action against the PCP

*Unless the panel is full or you are in a Provider Lock-in Program.

Q. How do I know if I should go to a doctor or dentist for care?

A. Dental treatment usually involves services performed on the teeth or performed to fix or replace teeth, such as fillings, root canals, extractions (removing teeth), dentures and crowns (caps).

Medical treatment most often involves services not directly involving the teeth, such as treatment for broken jaws or removal of cysts and benign or malignant tumors in the mouth.

If you are unsure, you can also call Member Services for help at **1-844-444-4410** (TTY **711**).

Q. What if I need to see a specialist?

A. There may be times when your PCP decides to send you to a participating specialist. If you have a condition that needs ongoing care from a participating specialist (such as kidney disease or HIV) or you have a life-threatening or disabling condition or disease, the specialist may be able to act as your PCP and specialty care provider. Your Care Manager can help you with this request.

Q. What if my condition requires care from a doctor who does not participate with Horizon NJ Health?

A. Horizon NJ Health has thousands of doctors and specialists throughout New Jersey in our network. If we do not have a doctor to care for your condition, we will work with your PCP or dentist to make sure you get the care you need. You may also get special approval from Horizon NJ Health for an out-of-network doctor if your medical condition requires it. Your doctor will need to contact Horizon NJ Health and talk to our Authorization Unit. **If you use an out-of-network doctor without approval from Horizon NJ Health, you will have to pay for those services on your own.**



Q. What if I want a second opinion?

A. You can ask for another doctor's opinion for any medical, dental, mental health, substance use disorder or surgical diagnosis. Talk to your PCP or dentist about a second opinion. He or she will make all of the arrangements, or you may call Member Services for help finding another doctor.

Q. How do I reach my Care Manager or get answers about my care plan?

A. You can call our multilingual Member Services team anytime at **1-844-444-4410 (TTY 711)**. Your Care Manager is available Monday through Friday, from 8 a.m. to 5 p.m., Eastern Time (ET). At other times, a Care Manager is on call and available to assist you 24 hours a day, seven days a week. You may also call to leave a message for your Care Manager, if preferred. When leaving a message, please be sure to give enough detail for us to understand why you are calling. We will return your call within one business day.

Q. What if I have questions about authorizations for MLTSS-covered services?

A. If you have any questions about how to get covered services authorized or if you are not sure whether a service is covered, Member Services is available to assist you 24 hours a day, seven days a week at **1-844-444-4410 (TTY 711)**. A Service Plan of Care (SPOC) is developed between members and their Care Manager and needed services are authorized based on the member's SPOC.

Q. What if I have questions about MLTSS eligibility requirements?

A. Eligibility for MLTSS services is based on multiple pieces of information, including your financial status and also including how well a person can perform Activities of Daily Living (ADLs) for example; bathing, dressing, toileting. Our multilingual MLTSS Member Services staff is ready to help people who want to know if they could be eligible for

these services and start the process to refer for an in-person assessment. You can call anytime at **1-844-444-4410 (TTY 711)**.

The State of New Jersey, Division of Aging Services, Office of Community Choice Options (OCCO), makes all final clinical eligibility decisions. The County Welfare Agency (CWA) determines financial eligibility.

Make an appointment right away

Soon after you become a member, you should see your PCP. A baseline physical will let your doctor measure your health, review your health history and help prevent future health problems. It is also important to complete all treatment that your dentist recommends. We will encourage your PCP's office to contact you to schedule the appointment if you do not schedule one. Your PCP's office should schedule appointments for routine visits within 28 days of your request.

Now is a good time to schedule a dental exam. Children and adults should get a dental exam and have their teeth cleaned at least twice a year. If you need assistance in locating a dentist for you or your child, call Member Services at **1-844-444-4410 (TTY 711)**.

If you need to see your PCP before you get your member ID card, call Member Services. A representative will help make arrangements for you to see your PCP.

Regular checkups are important



Regular medical, behavioral health and dental exams and tests can help find problems before they start. They can also help find problems early. Your age, health and family history, lifestyle choices (like what you eat, how active you are and whether you smoke) and other factors impact what services and screenings you need and how often you need them.



Very important: Keep your appointments!

When you are sick or injured and need care, call your doctor right away for an appointment. Sometimes, it can take a while to get an appointment, so do not delay in calling to schedule one.

Showing up for every doctor's appointment is the only way your doctor and dentist can make sure that you are getting the quality care you deserve. Your doctor has saved time to see you. If you cannot keep an appointment, call and let your doctor or dentist know right away, or at least 24 hours in advance. That way, your doctor can use the time to help another patient. You should make every effort to be on time to your appointment.

When you are sick or injured and need care, call your doctor or dentist right away for an appointment. Sometimes, it can take a while to get an appointment, so do not delay in calling to schedule one.

Appointment availability

- **Emergency services:** When you show up at an emergency care site, you will be seen immediately.
- **Urgent care:** Within 24 hours of calling, your doctor will see you. Urgent care is when you need immediate medical attention but your concern is not life-threatening.
- **Symptomatic acute care:** You will be seen within 72 hours. Having the flu is an example of this type of care.
- **Routine care:** Checkups for illness, such as diabetes or high blood pressure, are available within 28 days.
- **Specialist care:** Care can be received within four weeks for routine care or within 24 hours if it is an emergency.

- **New member physicals:** Appointments should be made within 90 days of initial enrollment for children, and 180 days of initial enrollment for adults.
- **Routine physicals:** Physicals needed for school, camp, work, etc. are scheduled within four weeks.
- **Prenatal care:** If you have a positive pregnancy test, your first appointment will be scheduled within three weeks. Your appointment should be scheduled within your first trimester. If you are identified as having a "high-risk" pregnancy, your appointment will be within three days. During a woman's first and second trimester, appointments are available within seven days of the request. Appointments are available within three days during the third trimester of pregnancy.
- **Lab and radiology services:** Appointments are available within three weeks for routine care and 48 hours for urgent care. Your results will be available within 10 business days of receipt, or 24 hours for urgent care.
- **Dental care:** Routine care is available within 30 days, urgent care within three days and emergency care within 48 hours.
- **Behavioral health care:** Appointments are available within 10 days for routine care and 24 hours for urgent care. If you have an emergency, you will be seen immediately when you get to your behavioral health office or facility.

When you get to the doctor's office on time for your appointment, you should not have to wait longer than 45 minutes.

Remember:

- If you or your child is sick, your doctor will see you the same day in most cases.

