



CARRIER NAME: HORIZON PO 1219

FORMALLY LOCAL 54

CARRIER CODE: BL008

ADDITIONAL PREFIXES

UXI EMP, HPU, F4S

	BlueCross BlueShield	HORIZON DIRECT ACCESS	UNITE HERE HEALTH
Member Name [REDACTED]			
Member ID Number UXI [REDACTED]			
GROUP NUMBER 76141-0000			
CONTRACT TYPE FAMILY			
BC/BS PLAN CODES 280/780			
			

PCP OFFICE VISITS	\$20
*SPECIALIST WITH REFERRAL	\$40
EMERGENCY ROOM	\$200
OP HOSPITAL SURGERY	\$200
FREE STANDING X-RAY/ULTRA	\$50
OP HOSPITAL X-RAY/ULTRA	\$150
FREE STANDING IMAGING	\$100
OP HOSPITAL IMAGING	\$350
<i>*Specialist copay without referral \$75.</i>	

		www.horizonblue.com/nationalaccounts
Hospitals or Providers: File claims with local Blue Cross and/or Blue Shield Plan.		
Members: See your plan document for covered services. Possession of this card does not guarantee eligibility for benefits.		
Horizon Blue Cross Blue Shield of New Jersey is an independent licensee of the Blue Cross and Blue Shield Association. Horizon BCBSNJ provides administrative services only and does not assume any financial risk for claims.		
For Member Use Only		
Atlantic City Fund Office:		1-888-437-3480
Provider Locator:		1-800-810-2583
Davis Vision:		1-800-999-5431
Behavioral Health:		1-866-248-4094
Dental (Benecare*):		1-800-843-4727
For Medical Provider Use Only		
Utilization Management:		1-866-899-0626
Provider Services:		1-888-456-7910
Advanced Radiology Precert:		1-866-496-6200
<i>*Visit uhh.org to add specialist referrals.</i>		
UNITE HERE HEALTH contracts directly with Benecare.		
Claim Filing Instructions:		
HORIZON BCBSNJ		
PO BOX 1219		
NEWARK, NJ 07101-1219		