

Horizon NJ TotalCare (HMO D-SNP) offered by *Horizon Blue Cross Blue Shield of New Jersey*

Annual Notice of Changes for 2025

Introduction

You are currently enrolled as a member of our plan. Next year, there will be some changes to our benefits and coverage rules. This *Annual Notice of Changes* tells you about the changes and where to find more information about them. To get more information about benefits, or rules please review the *Evidence of Coverage*, which is located on our website at [Medicare.HorizonBlue.com/2025EOCDSNP](https://www.Medicare.HorizonBlue.com/2025EOCDSNP). Key terms and their definitions appear in alphabetical order in the last chapter of your *Evidence of Coverage*.

Additional resources

- This document is available for free in Spanish.
- You can get this Annual Notice of Changes for free in other formats, such as large print, braille, or audio. Call 1-800-543-5656 (TTY 711), 8am–8pm: 7 Days October–March & Monday–Friday April–September. The call is free.
 - Your preferred language and/or format request is captured at the time of enrollment and we will keep your language/preference on file for future requests. You can also make a standing request for materials to be in Spanish and/or in a particular format. This will be sent to you by mail or other available methods. You have the option to change your preference at any time by calling Member Services at 1-800-543-5656 (TTY 711), 8am–8pm: 7 Days October–March & Monday–Friday April–September. The call is free.
- Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-800-543-5656. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.
- 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-800-543-5656。我们的中文工作人员很乐意帮助您。这是一项免费服务。

OMB Approval 0938-1444 (Expires: June 30, 2026)



If you have questions, please call NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), 8am–8pm: 7 Days October–March & Monday–Friday April–September. The call is free. For more information, visit **[HorizonBlue.com/Medicare](https://www.HorizonBlue.com/Medicare)**.

- 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-800-543-5656。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。
- Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil saaming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-800-543-5656. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.
- Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime desanté ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-800-543-5656. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.
- Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-800-543-5656 sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.
- Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-800-543-5656. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.
- 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-800-543-5656 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.
- Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-800-543-5656. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.
- إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا 1-800-543-5656. لي سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.
- हमारे सवास य या दवा की योजना के बारे में आपके किसी भी पर न केजवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। क दुभाषिया परापत करने के लिए, बस हमें 1-800-543-5656 पर फोन करें। कोई वयकतकत जो हिनदी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।
- È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

numero 1-800-543-5656. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

- Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-800-543-5656. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.
- Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-800-543-5656. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.
- Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-800-543-5656. Ta usługa jest bezpłatna.
- 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-800-543-5656にお電話ください。日本語を話す人 者が支援いたします。これは無料のサービスです。



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

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A. Disclaimers

- ❖ Horizon NJ Health has a Medicare contract and a contract with the State of New Jersey Medicaid Program to offer Horizon NJ TotalCare (HMO D-SNP), an HMO Medicare Advantage Dual Eligible Special Needs plan. Enrollment in Horizon NJ TotalCare (HMO D-SNP) depends on contract renewal. Products are provided by Horizon NJ Health. Communications are issued by Horizon Blue Cross Blue Shield of New Jersey in its capacity as administrator of programs and provider relations for all its companies. Both are independent licensees of the Blue Cross Blue Shield Association. The Blue Cross® and Blue Shield® names and symbols are registered marks of the Blue Cross Blue Shield Association. The Horizon® name and symbols are registered marks of Horizon Blue Cross Blue Shield of New Jersey. © 2024 Horizon Blue Cross Blue Shield of New Jersey. Three Penn Plaza East, Newark, New Jersey 07105.

B. Reviewing your Medicare and NJ FamilyCare (Medicaid) coverage for next year

It is important to review your coverage now to make sure it will still meet your needs next year. If it doesn't meet your needs, you may be able to leave our plan. Refer to **Section D** for more information on changes to your benefits for next year.

If you choose to leave our plan, your membership will end on the last day of the month in which your request was made. You will still be in the Medicare and NJ FamilyCare programs as long as you are eligible.

If you leave our plan, you can get information about your:

- Medicare options in the table in **Section E2**.
- NJ FamilyCare services in **Section E2**.

This section is continued on the next page.



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B1. Information about Horizon NJ TotalCare (HMO D-SNP)

- Horizon NJ TotalCare (HMO D-SNP) is a health plan that contracts with both Medicare and Medicaid to provide benefits of both programs to members.
- Coverage under Horizon NJ TotalCare (HMO D-SNP) is qualifying health coverage called “minimum essential coverage.” It satisfies the Patient Protection and Affordable Care Act’s (ACA) individual shared responsibility requirement. Visit the Internal Revenue Service (IRS) website at www.irs.gov/Affordable-Care-Act/Individuals-and-Families for more information on the individual shared responsibility requirement.
- When this *Annual Notice of Changes* says “we,” “us,” “our,” or “our plan,” it means Horizon NJ TotalCare (HMO D-SNP).

B2. Important things to do

- **Check if there are any changes to our benefits that may affect you.**
 - Are there any changes that affect the services you use?
 - Review benefit changes to make sure they will work for you next year.
 - Refer to **Section D1** for information about benefit changes for our plan.
- **Check if there are any changes to our prescription drug coverage that may affect you.**
 - Will your drugs be covered? Can you use the same pharmacies? Will there be any changes such as prior authorization, step therapy or quantity limits?
 - Review changes to make sure our drug coverage will work for you next year.
 - Refer to **Section D2** for information about changes to our drug coverage.
- **Check if your providers and pharmacies will be in our network next year.**
 - Are your doctors, including your specialists, in our network? What about your pharmacy? What about the hospitals or other providers you use?
 - Refer to **Section C** for information about our *Provider and Pharmacy Directory*.

This section is continued on the next page.



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

- **Think about your overall costs in the plan.**
 - How do the total costs compare to other coverage options?
- **Think about whether you are happy with our plan.**

If you decide to stay with Horizon NJ TotalCare (HMO D-SNP):

If you want to stay with us next year, it's easy – you don't need to do anything. If you don't make a change, you automatically stay enrolled in Horizon NJ TotalCare (HMO D-SNP).

If you decide to change plans:

If you decide other coverage will better meet your needs, you may be able to switch plans (refer to **Section E2** for more information). If you enroll in a new plan, or change to Original Medicare, your new coverage will begin on the first day of the following month.

C. Changes to our network providers and pharmacies

We have not made any changes to our network of providers and pharmacies for next year.

However, it's important that you know that we may make changes to our network during the year. If your provider leaves our plan, you have certain rights and protections. For more information, refer to **Chapter 3** of your *Evidence of Coverage*.

Please review the 2025 *Provider and Pharmacy Directory* to find out if your providers or pharmacy are in our network. An updated *Provider and Pharmacy Directory* is located on our website at HorizonNJHealth.com/findadoctor. You may also call Member Services at the numbers at the bottom of the page for updated provider information or to ask us to mail you a *Provider and Pharmacy Directory*.

It's important that you know that we may also make changes to our network during the year. If your provider leaves our plan, you have certain rights and protections. For more information, refer to **Chapter 3** of your *Evidence of Coverage*.

D. Changes to benefits for next year

D1. Changes to benefits for medical services

We're changing our coverage for certain medical services next year. The table on the next page describes these changes.



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	2024 (this year)	2025 (next year)
OTC (Over-the-Counter) Benefit	Up to \$2,880 per year (\$720 per quarter) combined OTC Benefit and OTC Catalog Allowance using your Horizon EXTRA Benefits Card.	Up to \$2,940 per year (\$245 per month) combined OTC Benefit and OTC Catalog Allowance using your Horizon EXTRA Benefits Card.
Special Supplemental Benefits for the Chronically Ill (SSBCI) – Combined Allowance	<p>Up to \$3,520 per year (\$880 per quarter) combined benefit for members who qualify for Special Supplemental Benefits for the Chronically Ill (SSBCI) using your Horizon EXTRA Benefits Card. Eligible members can choose how to use their combined allowance.</p> <p>*Gasoline is not included in the Utility Benefit. Tobacco and alcohol are not permitted for the Healthy Food Benefit.</p>	<p>Up to \$3,540 per year (\$295 per month) combined benefit for members who qualify for Special Supplemental Benefits for the Chronically Ill (SSBCI) using your Horizon EXTRA Benefits Card. Eligible members can choose how to use their combined allowance.</p> <p>*Gasoline is not included in the Utility Benefit. Tobacco and alcohol are not permitted for the Healthy Food Benefit.</p> <p>The benefits mentioned are a part of a special supplemental program for the chronically ill. Not all members qualify. To be considered for these benefits, you must meet the CMS definition of chronically ill and have been diagnosed with one or more specific chronic or more specific chronic conditions, including but not limited to, cardiovascular disorders, chronic heart failure (CHF), diabetes, chronic lung disorders (asthma), and high</p>
This section is continued on the next page.		



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<p>Special Supplemental Benefits for the Chronically III (SSBCI) – Combined Allowance (continued)</p>		<p>blood pressure/hypertension and, have a higher risk of hospitalization or other adverse health outcomes, and/or participate in the Horizon Care Management Program. Other chronic conditions, eligibility, and coverage criteria may apply.</p>
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D2. Changes to prescription drug coverage

Changes to our *List of Covered Drugs*

An updated *List of Covered Drugs* is located on our website at HorizonBlue.com/DSNP. You may also call Member Services at the numbers at the bottom of the page for updated drug information or to ask us to mail you a *List of Covered Drugs*.

The *List of Covered Drugs* is also called the “*Formulary*.”

We made changes to our *List of Covered Drugs*, which could include removing or adding drugs, changing drugs we cover and changes to the restrictions that apply to our coverage for certain drugs.

Review the *List of Covered Drugs* to **make sure your drugs will be covered next year** and to find out if there are any restrictions.

Most of the changes in the *List of Covered Drugs* are new for the beginning of each year. However, we might make other changes are allowed by Medicare and/or the state that will affect you during the plan year. We update our online *List of Covered Drugs* at least monthly to provide the most up to date list of drugs. If we make a change that will affect a drug you are taking, we will send you a notice about change.

If you are affected by a change in drug coverage, we encourage you to:

- Work with your doctor (or other prescriber) to find a different drug that we cover.
 - You can call Member Services at the numbers at the bottom of the page or contact your Care Manager to ask for a *List of Covered Drugs* that treat the same condition.

This section is continued on the next page.



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- This list can help your provider find a covered drug that might work for you.
 - Work with your doctor (or other prescriber) and ask us to make an exception to cover the drug.
 - You can ask for an exception before next year, and we'll give you an answer within 72 hours after we get your request (or your prescriber's supporting statement).
 - To learn what you must do to ask for an exception, refer to **Chapter 9** of your *Evidence of Coverage*, call Member Services at the numbers at the bottom of the page.
 - If you need help asking for an exception, contact Member Services or your Care Manager. Refer to **Chapters 2 and 3** of your *Evidence of Coverage* to learn more about how to contact your Care Manager.
 - Current formulary exceptions are approved for 12 months from the approval date and can extend into the next calendar year. Please refer to your approval letter for exact dates of your formulary exception approval.
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E. Choosing a plan

E1. Staying in our plan

We hope to keep you as a plan member. You do not have to do anything to stay in our plan. If you do **not** change to another Medicare plan or change to Original Medicare, you automatically stay enrolled as a member of our plan for 2025.

E2. Changing plans

Most people with Medicare can end their membership during certain times of the year. Because you have NJ FamilyCare, you may be able to end your membership in our plan any month of the year.

In addition, you may end your membership in our plan during the following periods:

- The **Annual Enrollment Period**, which lasts from October 15 to December 7. If you choose a new plan during this period, your membership in our plan ends on December 31 and your membership in the new plan starts on January 1.

This section is continued on the next page.



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- The **Medicare Advantage (MA) Open Enrollment Period**, which lasts from January 1 to March 31. If you choose a new plan during this period, your membership in the new plan starts the first day of the next month.

There may be other situations when you are eligible to make a change to your enrollment. For example, when:

- you moved out of our service area,
- your eligibility for NJ FamilyCare or Extra Help changed, **or**
- you recently moved into or are currently getting care in an institution (like a skilled nursing facility or long-term care hospital). If you recently moved out of an institution, you can change plans or change to Original Medicare for two full months after the month you move out.

Your Medicare services

You have four options for getting your Medicare services listed below any month of the year. You have an additional option listed below during certain times of the year including the **Annual Enrollment Period** and the **Medicare Advantage Open Enrollment Period** or other situations described in **Section E2**. By choosing one of these options, you automatically end your membership in our plan.

This section is continued on the next page.



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

<p>1. You can change to:</p> <p>Another plan that provides your Medicare and most or all of your Medicaid benefits and services in one plan, also known as an integrated dual-eligible special needs plan (D-SNP)</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>For Program of All-inclusive Care for the Elderly (PACE) inquiries, call 1-855-921-PACE (7223).</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-792-8820 (TTY: 711). Their website can be found at www.nj.gov/humanservices/doas/services/q-z/ship/. For more information or to find a local SHIP office in your area, please visit www.nj.gov/humanservices/doas/services/q-z/ship/. <p>OR</p> <p>Enroll in a new integrated D-SNP plan directly, or through a broker or agent contracted with the new D-SNP plan.</p> <p>You will automatically be disenrolled from our plan when your coverage with the new D-SNP plan begins.</p> <p>Your NJ FamilyCare (Medicaid) coverage will also be shifted to the new D-SNP, and will be covered through that new plan.</p>
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If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

<p>2. You can change to:</p> <p>Original Medicare with a separate Medicare prescription drug plan</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-792-8820 (TTY: 711). Their website can be found at www.nj.gov/humanservices/doas/services/q-z/ship/. For more information or to find a local SHIP office in your area, please visit www.nj.gov/humanservices/doas/services/q-z/ship/. <p>OR</p> <p>Enroll in a new Medicare prescription drug plan.</p> <p>You will automatically be disenrolled from our plan when your Original Medicare coverage begins.</p> <p>Your NJ FamilyCare (Medicaid) enrollment will automatically be changed to our NJ FamilyCare plan, Horizon NJ Health. If you wish to change to a different NJ FamilyCare plan instead, please call NJ FamilyCare at 1-800-701-0710 (TTY: 711).</p>
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<p>3. You can change to:</p> <p>Original Medicare without a separate Medicare prescription drug plan</p> <p>NOTE: If you switch to Original Medicare and do not enroll in a separate Medicare prescription drug plan, Medicare may enroll you in a drug plan, unless you tell Medicare you don't want to join.</p> <p>You should only drop prescription drug coverage if you have drug coverage from another source, such as an employer or union. If you have questions about whether you need drug coverage, call the State Health Insurance Assistance Program (SHIP) at 1-800-792-8820 (TTY: 711). Their website can be found at www.nj.gov/humanservices/doas/services/q-z/ship/.</p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-792-8820 (TTY: 711). Their website can be found at www.nj.gov/humanservices/doas/services/q-z/ship/. <p>You will automatically be disenrolled from our plan when your Original Medicare coverage begins.</p> <p>Your NJ FamilyCare (Medicaid) enrollment will automatically be changed to our NJ FamilyCare plan, Horizon NJ Health. If you wish to change to a different NJ FamilyCare plan instead, please call NJ FamilyCare at 1-800-701-0710 (TTY: 711).</p>
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<p>4. You can change to:</p> <p><u>Any Medicare health plan during certain times of the year including the Annual Enrollment Period and the Medicare Advantage Open Enrollment Period or other situations described in Section E.</u></p>	<p>Here is what to do:</p> <p>Call Medicare at 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.</p> <p>If you need help or more information:</p> <ul style="list-style-type: none">• Call the State Health Insurance Assistance Program (SHIP) at 1-800-792-8820 (TTY: 711). Their website can be found at www.nj.gov/humanservices/doas/services/q-z/ship/. <p>OR</p> <p>Enroll in a new Medicare health plan.</p> <p>You will automatically be disenrolled from our plan when your coverage with the new plan begins.</p> <p>Your NJ FamilyCare (Medicaid) enrollment will automatically be changed to our NJ FamilyCare plan, Horizon NJ Health. If you wish to change to a different NJ FamilyCare plan instead, please call NJ FamilyCare at 1-800-701-0710 (TTY: 711).</p>
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Your NJ FamilyCare services

For questions about how to get your NJ FamilyCare services after you leave our plan, contact NJ FamilyCare at 1-800-701-0710 (TTY: 711). Ask how joining another plan or returning to Original Medicare affects how you get your NJ FamilyCare coverage.

F. Getting help

F1. Our plan

We're here to help if you have any questions. Call Member Services at the numbers at the bottom of the page during the days and hours of operation listed. These calls are toll-free.



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.

Read your *Evidence of Coverage*

Your *Evidence of Coverage* is a legal, detailed description of our plan's benefits. It has details about benefits for 2025. It explains your rights and the rules to follow to get services and prescription drugs we cover.

The *Evidence of Coverage* for 2025 will be available by October 15. An up-to-date copy of the *Evidence of Coverage* is available on our website at [Medicare.HorizonBlue.com/2025EOCDSNP](https://www.Medicare.HorizonBlue.com/2025EOCDSNP). You may also call Member Services at the numbers at the bottom of the page to ask us to mail you an *Evidence of Coverage* for 2025.

Our website

You can visit our website at [HorizonBlue.com/Medicare](https://www.HorizonBlue.com/Medicare). As a reminder, our website has the most up-to-date information about our provider and pharmacy network (*Provider and Pharmacy Directory*) and our *List of Covered Drugs (Formulary)*.

F2. State Health Insurance Assistance Program (SHIP)

You can also call the SHIP. In New Jersey the SHIP is called the State Health Insurance Assistance Program (SHIP). SHIP can help you understand your plan choices and answer questions about switching plans. SHIP is not connected with us or with any insurance company or health plan. SHIP has trained counselors in every county and services are free. The SHIP phone number is 1-800-792-8820 (TTY: 711). For more information or to find a local SHIP office in your area, please visit www.nj.gov/humanservices/doas/services/q-z/ship/.

F3. Office of the Insurance Ombudsperson

The Ombudsperson Program can help you if you have a problem with our plan. The ombudsperson's services are free and available in all languages. The Ombudsperson Program:

- works as an advocate on your behalf. They can answer questions if you have a problem or complaint and can help you understand what to do.
- makes sure you have information related to your rights and protections and how you can get your concerns resolved.
- is not connected with us or with any insurance company or health plan. The phone number for the Ombudsperson Program is 1-800-446-7467 (TTY: 711).

F4. Medicare

To get information directly from Medicare, call 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit [HorizonBlue.com/Medicare](https://www.HorizonBlue.com/Medicare).

Medicare's Website

You can visit the Medicare website (www.medicare.gov). If you choose to disenroll from our plan and enroll in another Medicare plan, the Medicare website has information about costs, coverage, and quality ratings to help you compare plans.

You can find information about Medicare plans available in your area by using Medicare Plan Finder on Medicare's website. (For information about plans, refer to www.medicare.gov and click on "Find plans.")

Medicare & You 2025

You can read the *Medicare & You 2025* handbook. Every year in the fall, this booklet is mailed to people with Medicare. It has a summary of Medicare benefits, rights and protections, and answers to the most frequently asked questions about Medicare. This handbook is also available in Spanish, Chinese, and Vietnamese.

If you don't have a copy of this booklet, you can get it at the Medicare website (www.medicare.gov/Pubs/pdf/10050-medicare-and-you.pdf) or by calling 1-800-MEDICARE (1-800-633-4227), 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048.

F5. NJ FamilyCare (Medicaid)

You are enrolled in both Medicare and in Medicaid. The Medicaid program in New Jersey is also called **NJ FamilyCare**. If you have questions about your NJ FamilyCare (Medicaid) coverage, call the NJ Department of Human Services, Division of Medical Assistance and Health Services at 1-800-701-0710 (TTY:711).

F6. Quality Improvement Organization (QIO)

Our state has an organization called Livanta. This is a group of doctors and other health care professionals who help improve the quality of care for people with Medicare. Livanta is not connected with our plan. The phone number is 1-866-815-5440, Monday through Friday 9:00 a.m. to 5:00 p.m. TTY users should call 1-866-868-2289. Contact Livanta for help with:

- questions about your health care rights
- making a complaint about the care you got if you:
 - have a problem with the quality of care,
 - think your hospital stay is ending too soon, **or**
 - think your home health care, skilled nursing facility care, or comprehensive outpatient rehabilitation facility (CORF) services are ending too soon.



If you have questions, please call Horizon NJ TotalCare (HMO D-SNP) at 1-800-543-5656 (TTY 711), Monday through Friday, 8 a.m. to 8 p.m. The call is free. **For more information**, visit HorizonBlue.com/Medicare.