

## HORIZON BLUE CROSS BLUE SHIELD OF NEW JERSEY APPEALS/PREDETREMINATION

For All Horizon Blue Cross Blue Shield of New Jersey Contracts and Covered Members Enrolled Through the Blue Card Program  
(Professional Provider Claim Billing Submission Reference)

PREFIX OR SUFFIX	APPEALS / PREDETREMINATION
YHC, YHI, YHJ, YHK, YHS, YHU, JGA, JGD, JGG	PO Box 10129 Newark, NJ 07101-3129
R, 8-digits and PPO logo Federal Employee Program (including behavioural health claims)	PO Box 656 Newark, NJ 07101-0656
FMA, FMR, NCH, YHF, YHN, HIF, HSG, HWA, HWW and all other National Accounts	PO Box 247 Newark, NJ 07101-0247
HSE, NFW, YHD, YHG, YHM, YHP, YHT, YHV and all other point of service members	PO Box 10129 Newark, NJ 07101- 3129
ATT, AT&T members	PO Box 54 Newark, NJ 07101-0054
JGE, JGB, JGH, YHQ, YXH Horizon Direct Access members	PO Box 10129 Newark, NJ 07101- 3129
YHA NJ State Health Benefits Program (SHBP)	PO Box 10129 Newark, NJ 07101- 3129
NJPNJ State Health Benefits Program (SHBP)	PO Box 10129 Newark, NJ 07101- 3129
YHR, All Medigap	PO Box 10129 Newark, NJ 07101- 3129
DEH, DMM, DTP, NGM General Motors / Delphi Auto	
All BlueCard (out- of-state) claims BlueCard Services Team	BlueCard Claims PO Box 1301 Neptune, NJ 07754- 1301
For all claims processed by Magellan Behaviour Health	
For questions about the Horizon Health and Wellness Education Program (Disease Management Programs)	
Please send all pre-existing documentation to:	

POWERED BY : BOSS