

Horizon BCBS of New Jersey Business Process Update From Michael Considine, Director of Sales-Major Accounts Markets

As a follow-up to the communication sent last week, Michael Considine, Director of Sales-Major Accounts Markets has released an update on the status of group enrollment.

Please see below the official statement from Michael Considine:

As I stated in my last email I want to continue to keep you updated on where we are in the process of enrolling our groups in this post ACA environment.

December Early Renewals

We are almost completed with the processing of our December early renewals. We are finalizing those groups that decided to make a plan change rather than go to a mapped plan. For instance, we mapped HMO to EPO for the purpose of processing. If a group decided that they did not want an EPO we would have had to process manually. This is what we are finalizing. It is important to note that claims will need to be reprocessed for those that wanted to change plans from what they were mapped into. If they went from an HMO to an EPO, the impact would be minimal. If the benefit went from Direct Access to an EPO there would be more claims that would need to be reprocessed. We will be handling the reprocessing of claims so there is no need for our members to contact us. We will be making all necessary changes automatically and systemically.

January Conversions

We have completed the lion's share of January 1st conversions. There are relatively low numbers that still are being processed manually due to either errors that were found when transmitted via the Broker Portal or for those groups that wanted a plan of benefits other than what we mapped them to in the soft conversion process which in many instances had to be handled manually. In addition, we are working on January 15th and later effective dates. We have made solid progress here. Please keep in mind that claims for the same reason as noted for December will have to be reprocessed and we are working that work as we speak. Impacted members will receive an EOB after the adjustments are completed. Similarly, providers will receive updated vouchers as

adjustments are completed. In addition, the providers will also be notified about this issue via a portal communication. There should be no reason for the member or provider to call to initiate a claim adjustment.

As of today we are targeting February 7th as the date when all January 1st business will be completed processed.

Prime/Pharmacy

As you are aware we had an issue whereby members and dependents on occasion were not carried over during the conversion process to Prime. We made a systemic fix to correct this. This should be resolved moving forward. We are still completing the manual uploading of members and dependents that did not transfer over to Prime. If there are any immediate eligibility concerns please continue to contact us.

Bill Blocks

As groups have been processed correctly bill blocks have been removed and have been generated. You should be hearing from your groups that they have received a bill. Due to the bill blocks retro premium will be billed as part of the next bill.

Once again, I would like to thank you and your teams for supporting us during this extraordinary time. It has been a challenge but we have made great progress and look forward to returning to business as usual from a timeliness and quality perspective.

Thank you,

Mike Considine
Director of Sales - Major Account Market

We appreciate your patience as we continue to work diligently for you to provide the service your clients expect.

If you have any questions or concerns, please contact brokersupport@martinins.com.



Any Questions or Feedback?
Please contact Jessica Martin
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