

## YMCA Discount for Horizon Blue Cross Blue Shield of New Jersey members

- Offer Details:
  - YMCA members with a Horizon ID card will receive:
    - **A 15% discount on a monthly Y membership.**
    - **Waived initiation fee for new Y members (estimated at up to \$100)**
  - This promotional discount will be valid from date of Horizon membership verification through 12/31/24. Note: the discount offer may continue into 2025 dependent on Horizon + YMCA partnership extension, in which case members would need to re-verify Member ID card to reclaim 2025 discount.
  - This discount offer cannot be combined with any other YMCA discounts
  - Horizon members can continue to take advantage of the Horizon *bFit* incentive program at participating Ys. For more details about *bFit*, visit <https://www.horizonblue.com/members/health-programs/horizonbfit>.
    - Note: not all Horizon members have access to this program.
  - See [www.horizonblue.com/ymca](http://www.horizonblue.com/ymca) for more information.
- To Redeem:
  - To apply the discount and/or waived initiation fee, members need to simply present their Horizon card at a participating Y in New Jersey.
    - Y employees should visually inspect the Horizon Member ID card, however should not photocopy or take a picture of the card for records.
    - Please note: Horizon's membership cards display the primary cardholder's name only. In some instances, a member's name may not match the name on the card, however the discount should still be applied. For example, a spouse may present their ID card with their partners name on it.
- Below are samples of the Horizon ID Cards that may be presented for the YMCA discount. Content may vary slightly (i.e. logos, plan name, etc) depending on the plan/employer. Note: members can also show this card digitally via the Horizon Blue App.

**Horizon**  

Member Name: [REDACTED] PRIMARY CARE: \$15.00  
 PREVENTIVE CARE: \$0.00  
 SPECIALIST: \$15.00  
 EMERGENCY ROOM: \$50.00

Member ID Number: **NJX3HZN** [REDACTED]

GROUP NUMBER: **00-93500**  
 CONTRACT TYPE: **FAMILY**  
 EFFECTIVE DATE: **07/01/2023**  
 BCBS PLAN CODES: **280/780**



[www.horizonblue.com/help](http://www.horizonblue.com/help)  
 Deductible Information:  
 RN SED SF: \$1,233.00  
 OM SED SF: \$10,000.00

**Horizon** 

Hospitals or Providers: File claims with local Blue Cross and/or Blue Shield Plan. Members: See your Member's Handbook for covered services. Possession of this card does not guarantee eligibility for benefits.

Horizon Blue Cross Blue Shield of New Jersey, an Independent Company of the Blue Cross and Blue Shield Association, provides administrative services only and does not guarantee any financial result.

Member Services: 1-800-414-7427 (DHBP)  
 Behavioral Health Services: 1-888-991-5378  
 Wellness Program: NJ.gov/mywell

**For Provider Use Only**  
 Provider Services: 1-800-824-1110  
 Utilization Management: 1-888-566-2263  
 Advanced Radiology: 1-888-496-6206  
 Behavioral Prescription: 1-888-991-6378

**For Member Use Only**  
 SUBMITTING CLAIM FORMS  
 Medical Services in NJ: P.O. Box 800, Newark, NJ 07101-0800  
 Mental Health/Behavioral Health Services  
 Horizon Behavioral Health P.O. Box 7000, Newark, NJ 07101-0700

The actual health insurance plan contract can be found at [www.njdirect.com](http://www.njdirect.com) or Member Handbook for each plan.

**Braven Medicare**

**Braven**  **Braven Medicare Choice (PPO)**

Member Name: **J D DOE JR** PRIMARY CARE: \$0  
 SPECIALIST: \$30  
 EMERGENCY ROOM: \$100

Member ID Number: **B7U3HZN12345678** CMS-H0885-001

GROUP NUMBER: **00-12345** RXBIN: **016499**  
 EFFECTIVE DATE: RXPCN: **PPOBH**  
 BCBS PLAN CODES: **280/780** RXGRP: **RXBRVN**  
 ISSUER (80840): RXID: **3HZN12345678**

BravenHealth.com  