



Women's Health and Cancer Rights Act of 1998

Important Notice

In October 1998, Congress enacted the Women's Health and Cancer Rights Act of 1998. This notice explains some important provisions of the Act. Please review this information carefully.

As specified in the Women's Health and Cancer Rights Act, a plan participant or beneficiary who elects breast reconstruction in connection with a mastectomy is also entitled to the following benefits:

- Reconstruction of the breast on which the mastectomy was performed,
- Surgery and reconstruction of the other breast to produce a symmetrical appearance, and
- Prostheses and treatment of physical complications at all stages of the mastectomy, including lymphedemas.

Health plans must determine the manner of coverage in consultation with the attending physician and the patient. Coverage for the breast reconstruction and related services may be subject to deductibles and co-insurance amounts that are consistent with those that apply to other benefits under this plan.



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Under federal legislation, annual notification of this benefit is required to all members.

In 1998, the federal government enacted a law that mandates certain health coverage for breast reconstructive surgery in any health program that provides medical and surgical benefits for mastectomies. This law is known as the Women's Health and Cancer Rights Act.

If a covered person is receiving benefits in connection with a mastectomy and elects to have breast reconstruction along with that mastectomy, the policy must provide in a manner determined in consultation with the attending physician and the patient, coverage for the following:

- All stages of reconstruction of the breast on which the mastectomy was performed;

- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prosthesis and physical complications at all stages of the mastectomy, including lymphedema.

These benefits will be provided subject to deductibles and coinsurance to the same extent as for any other illness under your coverage.

All other features and benefits of this program remain the same and are not impacted by this annual notification.



HorizonBlue.com



Getting information about your health benefits

Horizon Blue Cross Blue Shield of New Jersey is committed to helping you understand your health benefits. Visit HorizonBlue.com to learn more about:

Getting care, including:

- How to get primary care, specialty care and hospital and behavioral health services
- How to get care after hours
- How and when to get emergency care or call **911** or your local emergency response system
- How and when to change from a pediatric doctor to an adult-care doctor

Your benefits and coverage, including:

- How to find which services are included in your plan
- How to find information about getting care outside of your plan's coverage area
- Where to find your copayment, deductible and coinsurance information
- How to submit a claim for covered services
- How to submit a complaint or an appeal

Horizon BCBSNJ programs, including:

- Our pharmaceutical management procedures
- How Horizon BCBSNJ evaluates new medical technology for inclusion as a covered benefit
- Our Chronic Care and Case Management programs, and how to enroll
- How to contact our Utilization Management Department, including after-hours contact information; how coverage decisions are made and the availability of external review rights
- Our Quality Improvement program and how we work to improve the quality of care and services provided to our members

Your member rights, including:

- Your rights and responsibilities as a Horizon BCBSNJ member
- How to get help in another language

If you do not have access to the Internet, you can call Member Services at the number on the back of your member ID card to get a free copy of this information.

Horizon Blue Cross Blue Shield of New Jersey complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, gender, national origin, age, disability, pregnancy, gender identity, sex, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

Spanish (Español): Para ayuda en español, llame al **1-855-477-2985**.

Chinese (中文): 如需中文協助，請致電 **1-800-355-2583**。