



# **ADVOCARE PAYOR PLAN GUIDE 2026 – NJ & PA ONLY**

*Plan Participation by Payor – Published by Advocare Payor Relations*



## Aetna

### **Aetna Premier Care Network and Aetna Aexcel: Plans are either PAR Tier 1 or Not Tiered Plan and Must Have OON Benefits**

#### **PCP's Primary Care & Peds PAR & Tier 1**

Cardiothoracic Surgery.....Not Tiered OON  
Cardiology.....Not Tiered OON  
Gastroenterology.....Not Tiered OON

General Surgery.....Not Tiered OON  
Neurology.....Not Tiered OON  
Neurosurgery.....Not Tiered OON  
Orthopedics.....Not Tiered OON  
Otolaryngology/ENT.....Not Tiered OON

OB/GYN.....Not Tiered OON  
Plastic Surgery.....Not Tiered OON  
Urology.....Not Tiered OON  
Vascular Surgery.....Not Tiered OON

### **Aetna HMO, PPO, and POS Plans:**

Aetna HMO.....PAR  
Aetna Open Access (HMO).....PAR  
Aetna Elect Choice.....PAR  
Aetna OA Elect Choice.....PAR  
Aetna Select.....PAR

Aetna Open Choice(PPO).....PAR  
Aetna POS.....PAR  
Aetna Managed Choice.....PAR  
Aetna Health Network Only.....PAR  
Aetna OA Managed Choice.....PAR

Aetna Choice POS.....PAR  
Aetna Choice POS II.....PAR  
Aetna Health Network Option.....PAR  
Aetna OA Select.....PAR

### **Aetna Medicare Advantage Plans**

Aetna Medicare FIDE (HMO-D-SNP).....PAR  
Aetna Medicare Signature (RPPO).....PAR  
Aetna Medicare Enhanced Extra (PPO).....PAR  
Aetna Medicare Enhanced (PPO).....PAR  
Aetna Medicare Enhanced Advantage (PPO).....PAR  
Aetna Medicare Eagle Giveback (PPO).....PAR  
Aetna Medicare Prime (PPO).....PAR  
Aetna Medicare Prime Giveback (PPO).....PAR  
Aetna Medicare Prime Extra (PPO).....PAR  
Aetna Medicare Enhanced Extra (PPO).....PAR  
Aetna Medicare Elite (PPO).....PAR  
Aetna Medicare Signature (PPO).....PAR  
Aetna Medicare Elite (HMO).....PAR  
Aetna Medicare Signature Extra (HMO).....PAR  
Aetna Medicare Prime (HMO-POS).....PAR  
Aetna Medicare Signature (HMO).....PAR  
Aetna Medicare Eagle Giveback (HMO).....PAR  
Aetna Medicare Enhanced (HMO-POS).....PAR

### **Aetna HTC for Virtua & Lourdes Hospital Employees:**

All Advocate Providers (EFF 2/1/24) .....Tier 1

### **Aetna HTC for Atlantic Health Employees:**

All Advocate Providers .....Tier 1

### **Aetna PEBTF plan:**

Pennsylvania Providers Only.....PAR

### **Advocate providers also participate in the following plans via the Aetna Contract:**

- First Health Network
- Aetna Signature Administrators
- Meritain Health Plans
- Coventry Health

### **Aetna Better Health – Pennsylvania (provider must be participating in PA Medicaid/Promise)**

CHIP Only ..... PAR

## AmeriHealth

### AmeriHealth Advantage/Local Value Network:

AmeriHealth Advantage/Local Value...PAR      Hospital Advantage Plan..... PAR      Local Value EPO/HMO Network .....PAR  
Pediatric/Internal Med = Tier 2  
All other types = Tier 3

### AmeriHealth Regional Preferred Network:

#### Platinum

IHC EPO Regional Preferred.... . PAR      IHC HMO Regional Preferred ....PAR      IHC POS Plus Regional Preferred ...PAR

#### Silver

IHC EPO H.S.A Regional Preferred...PAR      IHC EPO Regional Preferred .....PAR      IHC HMO Regional Preferred .....PAR  
IHC POS Plus Regional Preferred ....PAR

#### Gold

IHC EPO H.S.A Regional Preferred ...PAR      IHC EPO Regional Preferred .....PAR      IHC HMO Regional Preferred .....PAR

#### Bronze

IHC EPO H.S.A Regional Preferred ...PAR      IHC EPO Regional Preferred .....PAR

**AmeriHealth Value Plus Plans** .....PAR

**AmeriHealth Medicare Advantage PPO plans** (*Ultimate, Enhanced, Core*) .....PAR

**AmeriHealth Administrators**.....PAR

**Amerihealth Advantage NJ**.....**PAR/Tier 1**

## Cigna

Cigna Choice Fund Open-Access Plus.....PAR      Cigna Healthcare PPO.....PAR      Cigna HMO...PAR  
Cigna Indemnity.....PAR      Cigna Local Plus.....PAR      Cigna Network...PAR  
Cigna Network Open Access.....PAR      Cigna Open Access Plus...PAR      Cigna POS Open Access...PAR  
Cigna HMO Open Access.....PAR      Cigna POS/EPO/PPO...PAR      Cigna + Oscar....PAR  
Cigna Tiered Plans (Advocare Tier 2)...PAR      **Cigna Connect (EPO-PA ONLY)...NON-PAR**

## Cigna Medicare Advantage HealthSpring & Bravo (HCSC)

HealthSpring True Choice PPO (H7849-149).....PAR  
Healthspring Preferred HMO (H3949-054).....PAR  
HealthSpring Preferred HMO (H3949-052).....PAR  
HealthSpring Preferred Savings HMO (H3949-053).....PAR  
HealthSpring Preferred Plus HMO (H3949-030).....PAR  
HealthSpring TotalCare Plus HMO D-SNP (H3949-009).....PAR

## Clover

Clover Health Choice.....PAR      Clover Health Choice Premier ...PAR      Clover Health Choice Value.....PAR  
Clover Health Classic.....PAR      Clover Health Value.....PAR      Clover Health Valor.....PAR

## Emblem Health/GHI

Emblem Health/GHI (no Qualcare logo on card) .....PAR upon request  
**this is not a standard Payor - Care Center must reach out to Enrollment/Credentialing directly to become PAR with this payor.**

Emblem Health NYCE PPO NJ(with UHC logo on back) .....PAR  
Emblem Health HIP HMO (with Cigna Shared Admin logo on front) ..... PAR

## Horizon Blue Cross Blue Shield of New Jersey

☑ = patients must have a PCP assigned on policy or specialist copay will apply to all services

\* = Horizon HMO (and any alpha Prefix SNJ) must see PCP or another MD/DO not an NP

### Direct Access Products:

|                                             |                                      |                                  |
|---------------------------------------------|--------------------------------------|----------------------------------|
| ☑ Horizon Advantage Direct Access....PAR    | ☑ Horizon Direct Access/HAS/HRA..PAR | ☑ Garden State Health Plan...PAR |
| ☑ Horizon Direct Access Value Select....PAR | ☑ NJ DIRECT 10&15.....PAR            | ☑ NJ DIRECT 1525.....PAR         |
| ☑ NJ DIRECT 2030.....PAR                    | ☑ NJ DIRECT 2035.....PAR             | ☑ NJ DIRECT HD1500.....PAR       |
| ☑ NJ DIRECT HD4000.....PAR                  | ☑ NJ DIRECT Zero.....PAR             | ☑ NJ Educators Health Plan...PAR |

### HMO/EPO Products:

|                                                                     |                                     |                         |
|---------------------------------------------------------------------|-------------------------------------|-------------------------|
| ☑ Horizon Advantage EPO Bronze/Silver/Gold.....PAR                  | ☑ Horizon Advantage EPO ERA.....PAR | ☑ * Horizon HMO.....PAR |
| ☑ * Horizon HMO 1525/2030/2035.....PAR                              | ☑ * Horizon HMO Access.....PAR      |                         |
| ☑ Horizon Patient Centered Advantage EPO/Gold/Silver/Bronze.... PAR |                                     |                         |

☑ **Horizon Omnia Plans: NOTE all lab testing MUST be performed by contracted laboratory, in office testing not covered**

Advocare is a Tier 1 Provider

Omnia RWJBarnabas Health.....Inner Circle

Omnia Atlanticare EPO.....Inner Circle

Omnia Hackensack Meridian Health.....Tier 1

### Horizon POS, PPO, & Indemnity Products

|                                          |                                           |                                        |
|------------------------------------------|-------------------------------------------|----------------------------------------|
| Basic Blue Plan A.....PAR                | BCBS Service Benefit Plan.....PAR         | ☑ NJ Educators Health Plan.....PAR     |
| BlueCard PPO.....PAR                     | Comprehensive Health Plan.....PAR         | Comprehensive Major Medical....PAR     |
| Federal Employee Program(FEP).....PAR    | Horizon Advantage PPO.....PAR             | Horizon Basic Health Plan A.....PAR    |
| Horizon Basic Plan A/50.....PAR          | Horizon Comprehensive Plan.....PAR        | ☑ Horizon EPO.....PAR                  |
| Horizon High Deductible Plan C & D ..PAR | Horizon High Deductible PPO Plan D....PAR | Horizon MSA Plan C&D.....PAR           |
| Horizon My Way HRA & HAS.....PAR         | Horizon PPO.....PAR                       | Horizon Traditional Plan B,C,D.....PAR |

### Braven Medicare Advantage Products

**Braven Medicare Plus (HMO).....NONPAR**

**Braven Medicare Group (HMO/POS).....NONPAR**

**Braven Medicare Access Group (HMO/POS)....NONPAR**

Braven Medicare Choice (PPO) .....PAR

Braven Medicare Freedom (PPO).....PAR

Braven Medicare Group(PPO).....PAR

## Highmark (PA Only)-NON-Contracted effective 1/1/2023. All claims should go to Horizon BCBS Out of Area

Premier Blue Shield Network (PPO).....PAR

## HealthPartners (Rebranded as Jeff Health EFF 11/2023)

Must be participating with PA Medicaid.....PAR

## Horizon NJ Health of New Jersey

\*Must be participating with NJ Medicaid\*

Horizon NJ Health (Plans A through D) .....PAR

Horizon NJ Health TotalCare (HMOSNP).....PAR

(must be participating with BOTH Horizon NJ Health and NJ Medicare to participate with HNJB Total Care)

## Humana Military (Formerly Tricare)

|                         |                        |                               |
|-------------------------|------------------------|-------------------------------|
| ChampVA.....PAR         | Tricare.....PAR        | Tricare for Life(PPO).....PAR |
| Tricare Prime.....PAR** | Tricare Select.....PAR |                               |

\*\*Tricare Prime – Referrals required, PCP must be designated as a PCM (Primary Care Manager)

## IBC/Keystone/Independence Administrators

|                                          |                                |                                     |
|------------------------------------------|--------------------------------|-------------------------------------|
| <u>IBC/Keystone Tiered Plans.....PAR</u> |                                |                                     |
| Penn Care Network PA/NJ = Tier 2         | Grand View Health.....Tier 3   | CHOP Preferred Care CDHP.....Tier 2 |
| Temple Care Advantage = Tier 2           | Personal Choice PPO.....Tier 1 | 1199C Keystone HMO/POS.....Tier 2   |

|                                               |                                                           |
|-----------------------------------------------|-----------------------------------------------------------|
| <u>IBC Drexel Preferred PPO.....PAR</u>       | <u>Independence Administrators Jefferson Plan.....PAR</u> |
| IBC Drexel Preferred PPO NJ Provider = Tier 2 | Jefferson Choice / Select / HDHP plans.....Tier 1         |
| IBC Drexel Preferred PPO PA Provider = Tier 1 | Jefferson First plan.....Tier 2                           |

### Independence Administrators Main Line Health PPO.....PAR

Providers with Admin Privileges at Main Line Health = Tier 1

All Non-Admitting Providers = Tier 3

### Keystone Proactive.....PAR

Pediatric & Internal Medicine Providers = Tier 2

All Other Providers = Tier 3

### IBC/KHPE Value Network.....PAR

### Independence Administrators.....PAR

### Personal Choice PPO.....PAR

Tier 1

### Keystone 65 (must be PAR with Medicare).....PAR

Focus RX (HMO-POS)

Basic RX (HMO)

Essential RX (HMO-POS)

Select RX (HMO)

Preferred RX (HMO)

Liberty (HMO)

Select Medical Only (HMO)

Preferred Medical Only (HMO)

### Personal Choice 65 (must be PAR with Medicare).....PAR

Achieve RX (PPO)

Plus RX (PPO)

65 RX (PPO)

Medical Only (PPO)

## Jefferson Health Plans

PPO Plans ONLY .....PAR

## Keystone First (Pennsylvania Only)

Keystone First Medicaid (Must be participating with PA Medicaid).....PAR

Keystone First CHIP.....PAR

## MagnaCare (Brighton Health Group) – PAR unless otherwise indicated

## Qualcare

Emblem Health/Humana & GHI..... only PAR through Qualcare

*(meaning if the patient presents with a card that has the Qualcare logo on it, you are par with these plans)*

Qualcare HMO.....PAR

Qualcare Open-Access.....PAR

Qualcare POS.....PAR

Qualcare PPO.....PAR

Oscar Health through Qualcare/Cigna.....PAR

## United Healthcare/Oxford

**Customized & Tiered Plans – Must check UHC Portal for individual Provider Tier, provider tiers & copays may vary**

UnitedHealthcare All Savers .....PAR

UMR.....PAR

Choice Plus Network.....PAR

Golden Rule.....PAR

APWU Health Plans.....PAR

Veterans Affairs Network.....PAR

GEHA Plans.....PAR

Oxford Freedom Plans.....PAR

Oxford Liberty Plans.....PAR

UnitedHealthcare Choice & Choice Plus.....PAR

UnitedHealthcare Navigate.....PAR

UHC Chioce Plus Emblem Health NYCE PPO NJ .....PAR

UnitedHealthcare Select Plus.....PAR

UnitedHealthcare Charter.....PAR

UnitedHealthcare Options PPO.....PAR

UnitedHealthcare Open-Access.....PAR

UnitedHealthcare PPO.....PAR

UnitedHealthcare Select.....PAR

The Empire Plan PPO (NYSHIP w/UHC logo on back) .....PAR

UnitedHealthcare Options PPO(UH SharedService).....PAR

Surest (Tiered plan-must check UHC for Tier).....PAR

UnitedHealthcare Nexus ACO.....PAR

United Healthcare Community Plans (**Pennsylvania ONLY**) .....PAR

**Oxford Metro.....NONPAR**

**Oxford Garden State POS.....NONPAR**

**UnitedHealthcare Indemnity....NONPAR**

**All UnitedHealthcare Medicare Plans.....NONPAR**

**UnitedHealthcare Community Plans (NJ ONLY) .....NONPAR**

**UnitedHealthcare Compass Plans.....NONPAR**

## US Family Health Plan (USFHP) PAR unless otherwise indicated

## Wellpoint (Formerly Amerigroup)

Wellpoint NJ Family Care (Plans A through D) .....PAR

Wellpoint Medicare Advantage Dual HMO-SNP.....PAR

## Advocare Agreements

**Claims Watcher:** Advocare Currently has agreements with Claims Watcher. Claims Watcher must be listed on the patients' card in order to verify Advocare participation.

**Agreement Letter:** Advocare also has an agreement with Imagine 360 for Weisman Children's & Voorhees Pediatric Facility Insurance, members should present Advocare agreement letter.