

EMPIRE PLAN REPORT



New York State Health Insurance Program (NYSHIP)
For Active Employees, Retirees, Vestees, Dependent Survivors
and their Dependents enrolled through Participating Agencies with Empire Plan Benefits and Young Adult Option Enrollees

Read and Save

this Report for important information about benefit changes.

In This Report

- 1 Young Adult Option Coverage
- 2 NYS Continuation of Coverage; Annual Deductible; Hearing Aid Benefits; Immunization Coverage
- 3 Future Moms Program; Specialty Pharmacy Program;
- 4-5 Half Tablet Program; Reminders

Special Section

NYSHIP General Information Book and Empire Plan Certificate Amendments

- 6 Annual Notice

Copayments

See pages 253 and 254 of your *Empire Plan Certificate Amendments* for a complete list of your 2010 copayments.



NYSHIP Changes

Young Adult Option Coverage

As the result of a change in NYS Insurance Law, effective January 1, 2010, unmarried young adults through age 29 are eligible for NYSHIP health insurance coverage under the "Young Adult Option."

The Young Adult Option does not change NYSHIP's maximum age criteria for dependent coverage available to enrollees, but allows the adult child of an enrollee who meets the established criteria to purchase individual health insurance coverage through NYSHIP when the young adult does not otherwise qualify as a NYSHIP dependent. Either the young adult or his/her parent may enroll the young adult in the Young Adult Option, and either may elect to be billed for the NYSHIP premium. The cost of the Young Adult Option is the full share Individual premium. Refer to the Amendment on page 219 for eligibility criteria and other additional details.

A young adult is entitled to the same health insurance coverage as his/her parent provided the young adult lives, works or resides in New York State or the insurer's service area.

There is an initial open enrollment period for the Young Adult Option throughout

2010. Beginning in 2011 there will be a 30-day annual open enrollment period. Additionally, a young adult may enroll when NYSHIP eligibility is lost due to age or when a young adult is newly eligible because of a change in circumstances, such as loss of employer-sponsored health benefits.

The Young Adult Option application, rates and FAQs are available on the Department's web site at: <https://www.cs.state.ny.us/youngadultoptionpa/index.cfm>. Or contact the parent's Health Benefits Administrator at his/her Participating Agency for information and to enroll.

Changes to NYSHIP eligibility for adult children resulting from the recently enacted Federal Health Care Reform will take effect January 1, 2011. Details regarding eligibility criteria and the cost of this coverage are subject to Federal regulations, which have not yet been issued. Information will be mailed to enrollees and posted to our web site when it becomes available.

New York State: Supplemental Continuation of Coverage

Effective January 1, 2010, The Empire Plan adopted New York State legislation to allow enrollees who have exhausted their federal Consolidated Omnibus Budget Reconciliation Act (COBRA) coverage to extend NYSHIP coverage for an additional 18 months under the state's continuation of coverage law.

Under the new legislation, if you lose COBRA coverage because you have reached the end of your 18 or 29 month continuation period, you may request additional coverage under the New York State Insurance Law that will extend coverage until the earlier of:

- 36 months (combined length of COBRA and New York State coverage);
- The end of the period in which premiums were last paid;
- The date the enrollee becomes entitled to Medicare benefits; or
- The date New York State no longer provides group health care coverage to any of its enrollees.

Enrollees will have 60 days from the later of the end of their COBRA continuation period or receipt of notice of eligibility to apply in writing for the New York State Continuation of Coverage. The cost of coverage continuation will be the full premium cost for individual coverage plus a two percent administrative fee.

Benefit Changes

2010 Annual Deductible and Coinsurance Maximum for Basic Medical and Non-Network Mental Health and Substance Abuse Practitioner Services

Annual Deductible: \$375
Coinsurance Maximum: \$1,033

For calendar year 2010, The Empire Plan annual deductible for services performed and supplies prescribed by non-participating or non-network providers is \$375 for you, \$375 for your enrolled spouse/domestic partner and \$375 for all covered dependent children combined.

You must meet the deductible before benefits are paid for your claims. The annual deductible for the Basic Medical Program and the non-network portion of the Mental Health and Substance Abuse Program cannot be combined with each other or with the Managed Physical Medicine Program annual deductible for non-network services.

Effective January 1, 2010, the coinsurance maximum (out-of-pocket expense) is \$1,033 for you, \$1,033 for your enrolled spouse/domestic partner and \$1,033 for all covered dependent children combined. After each coinsurance maximum is reached, you will be reimbursed 100 percent of the reasonable and customary amount, or 100 percent of the billed amount, whichever is less, for covered services. You will still be responsible for any charges above the reasonable and customary amount and for any penalties under the benefits management programs.

Enhanced Hearing Aid Benefits through EPIC Hearing Service Plan

The Empire Plan has enhanced its hearing aid benefit for enrollees and eligible dependents with the addition of the Hearing Service Plan (HSP), provided by EPIC Hearing Healthcare. The EPIC HSP is a voluntary program that offers nationwide access to hearing aids and services. The Program's review process assures you are receiving all appropriate tests and services as well as the most

appropriate technology for the best price. Although your hearing aid benefit maximum remains unchanged, the EPIC HSP offers you and your eligible dependents an additional option in utilizing your hearing aid benefit. The EPIC HSP coordinates access to quality hearing care professionals throughout the State of New York and the nation and allows for direct billing to the Plan, up to the maximum benefit, so enrollees do not have to pay any upfront costs for hearing aids. Any amount over the maximum benefit is your responsibility.

The EPIC HSP provides the following:

- Hearing aid professionals available in all 50 states
- Access to all major hearing aid manufacturers
- Prices are never marked up from wholesale
- Hearing aid price lists are provided to enrollees and dependents upon request
- All hearing aids carry an extended three-year warranty, include the first year's supply of batteries and have a 45-day, no risk trial period in New York State

If you would like to learn more about the EPIC HSP, or if you need assistance in locating an HSP provider, please call toll free 866-956-5400.

Immunization Coverage

Immunizations have become a topic of interest this year because of the Novel H1N1 (swine flu) virus. As a result, it is very important that Empire Plan enrollees understand their coverage for immunizations.

There is no copayment under the Participating Provider Program for routine well-child care for children up to age 19 including pediatric examinations, immunizations and the cost of oral and injectable substances when administered according to pediatric care guidelines. The H1N1 vaccine is included in the vaccines offered to children under pediatric care guidelines. Coverage is also available under the Basic Medical Program subject to deductible and coinsurance.

Adult immunizations are covered when provided by a participating provider. You pay only a copayment for influenza (including the H1N1 vaccine), pneumonia, measles-mumps-rubella (MMR), varicella (chickenpox) and tetanus immunizations. Female enrollees and dependents age 19 through 26 years pay a copayment for human papilloma virus (HPV) immunization for cervical cancer prevention, and Empire Plan enrollees and dependents age 55 or older are covered for the Shingles (Herpes Zoster) vaccine. If an immunization is not identified as covered it will not be considered for reimbursement. Adult immunizations are not covered under the Basic Medical Program.

IMPORTANT! Vaccines dispensed or administered by the pharmacy are not covered by The Empire Plan.

Specialty Pharmacy Program

Effective April 1, 2010, The Empire Plan will add a Specialty Pharmacy Program to your Prescription Drug coverage. The Specialty Pharmacy Program will offer enhanced services to individuals using specialty drugs and change how you obtain those drugs under the Prescription Drug Program. Most specialty drugs will only be covered when dispensed by The Empire Plan's designated specialty pharmacy, Accredo, a subsidiary of Medco.

Accredo was selected to administer this Program because of its proven experience with providing services that help promote superior clinical outcomes. Accredo will ensure that specialty medications are utilized based on U.S. Food & Drug Administration (FDA) and best practice guidelines.

Specialty drugs are used to treat complex conditions and usually require special handling, special administration, or intensive patient monitoring. The major drug categories covered under the Program include, but are not limited to, drugs for Rheumatoid Arthritis, Cancer, Multiple Sclerosis, Human Growth Hormones, Deep Vein Thrombosis and

The Empire Plan Future Moms Program

This voluntary program is offered to Empire Plan enrollees at no additional cost and provides support and information designed to help you have a smooth pregnancy, a safe delivery and a healthy child. If you're pregnant, or hope to be in the near future, you know there's nothing more important than safeguarding your health and the health of your baby.

When you enroll in Future Moms, you'll be contacted by a Nurse Coach, a registered nurse, who will walk you through a health assessment over the phone. If you're not currently experiencing any health concerns, your Nurse Coach will simply arrange to check back with you periodically. But, if you need assistance in dealing with health issues, your Nurse Coach will schedule more frequent calls to check on your progress. Your Nurse Coach can also arrange for a free phone consultation with a specialist to answer your questions. Registered nurses are available 24 hours a day 7 days a week to answer your questions.

If you are interested in the Future Moms Program, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose Empire BlueCross BlueShield to enroll in the program.

Anemia (medications used to treat diabetes are not considered specialty medications). When Accredo dispenses a specialty medication, the applicable mail service copayment will be charged.

The Program will provide enrollees with enhanced services that include disease and drug education, compliance management, side-effect management, safety management, expedited, scheduled delivery of your medications at no additional charge, refill reminder calls and all necessary supplies such as needles and syringes applicable to the medication.

Enrollees currently taking drugs included in this Program will receive a letter, prior to April 1, 2010, describing the Program in more detail. When enrollees begin therapy on one of the drugs included in the Program, a letter will be sent describing the program and any action necessary to participate in it.

The complete list of specialty drugs included in the Specialty Pharmacy Program will be available April 1, 2010 on the Department of Civil Service website at <https://www.cs.state.ny.us>. Each of these drugs can be ordered through the Specialty Pharmacy Program using the Medco mail order form sent to the following address:

Medco by Mail
P.O. Box 6500
Cincinnati, OH 45201-6500

To request mail service envelopes, refills or to speak to a specialty-trained pharmacist or nurse regarding the Specialty Pharmacy Program, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447), choose The Empire Plan Prescription Drug Program, and ask to speak with Accredo, 24 hours a day, seven days a week.

Continued on page 4

The Empire Plan Half Tablet Program

Some recent articles have questioned the safety and efficacy of pill splitting programs. In most, the conclusion is that pill splitting programs are safe and save the patient money if the medications are clinically determined to be safe for splitting. The Empire Plan Half Tablet Program offered by The Empire Plan and administered by UnitedHealthcare provides many safeguards to mitigate against any possible safety questions.

The Empire Plan requires the following clinical criteria for medications to qualify for the Half Tablet Program:

- Each drug accepted for the Half Tablet Program must be approved by UnitedHealthcare's National Pharmacy and Therapeutic Committee.
- Medications must have a wide margin of safety so that minimal differences in tablet sizes, after splitting, will not disturb the efficacy of the medicine.
- Tablets must be able to be split relatively evenly without crumbling.
- Medications must remain chemically stable after splitting.
- Capsules, liquids, topical medications and certain coated tablets do not qualify.

You should only participate in the program if your doctor determines that pill splitting is appropriate for you.

For an updated list of the medications eligible for the Half Tablet Program go to <https://www.cs.state.ny.us> and select Benefit Programs in the left hand navigation on the home page. Follow the prompts to NYSHIP Online then choose Find a Provider. Scroll to the Medco links and click on Empire Plan Half Tablet Program. If you have other questions, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose The Empire Plan Prescription Drug Program.

Reminders

Dependent Verification

Enrollees with family coverage are required to submit documentation of eligibility for each of their dependents covered under NYSHIP to Budco Health Service Solutions, the vendor contracted to perform the Dependent Eligibility Verification Project, no later than January 15, 2010. If you do not respond to their request for documentation, or do not submit adequate documentation, or because you submitted incomplete documentation, your dependent was removed from coverage retroactively to February 1, 2009. The date for removal from coverage was February 24, 2010.

To reinstate coverage for any eligible dependents removed from coverage, you must provide proof of eligibility directly to the Department of Civil Service.

If you have questions, please visit the Department of Civil Service web site at www.cs.state.ny.us/nyshipeligibilityproject or call 1-888-358-2192 Monday through Friday 9:00 a.m. to 7:30 p.m. Eastern Time. The toll free telephone number will be available through June 30, 2010.

The Empire Plan At A Glance and Copayment Cards

In late November 2009, the January 1, 2010 *Empire Plan At A Glance* along with January 1, 2010 Copayment Cards and the 2010 Flexible Formulary List were mailed to your home. These are important pieces to understand your 2010 benefits; be sure to read them and keep them handy. If you need additional copayment cards, contact your agency Health Benefits Administrator.

Reimbursement of the Medicare Part B Income-Related Monthly Adjustment Amount (IRMAA) for Medicare-Primary Enrollees

Medicare Law requires some people to pay a higher premium for their Medicare Part B coverage based on their income. If you and/or any of your enrolled dependents are Medicare-primary and received a letter from the Social Security Administration (SSA) requiring the payment of an Income-Related Monthly Adjustment Amount (IRMAA) in addition to the standard Medicare Part B premium for 2009, you are eligible to be reimbursed for this additional premium by your Agency. **Note: If your 2007 adjusted gross income was less than or equal to \$85,000 (\$170,000 if you filed taxes as married filing jointly) you are NOT eligible for any additional reimbursement this year.**

To claim the additional IRMAA reimbursement, eligible enrollees are required to apply for and document the amount paid in excess of the standard premium. Contact your Agency Health Benefits Administrator for information on how to apply, a list of the documents required or questions on IRMAA.

Continued on page 5

Continued from page 4

The 2010 Census

The census is a count of everyone living in the United States. This includes people of all ages, races, ethnic groups, both citizens and non-citizens. Census questionnaires will be mailed in March 2010.

It's Easy - The questionnaire contains only a few simple questions and takes just a few minutes to answer and return, postage free, by mail.

Safe - The Census Bureau protects information that identifies respondents and their households for 72 years.

And Important - It determines the annual distribution of \$300 billion of government funding for critical community services and generates thousands of jobs across the country. Participation ensures New Yorkers get their fair share of government funding, census jobs and Congressional seats.

Annual Notice of Mastectomy and Reconstructive Surgery Benefits

The Empire Plan covers inpatient hospital care for lymph node dissection, lumpectomy and mastectomy for treatment of breast cancer for as long as the physician and patient determine hospitalization is medically necessary. The Plan covers all stages of reconstructive breast surgery following mastectomy, including surgery of the other breast to produce a symmetrical appearance. The Plan also covers treatment for complications of mastectomy, including lymphedema. Protheses and mastectomy bras are covered.

Call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select UnitedHealthcare if you have questions about your coverage for implants, breast forms or other protheses related to breast cancer treatment.

Empire Plan Benefits Management Program requirements apply. See your *Empire Plan Certificate* and *Empire Plan Reports*.

The *Empire Plan Report* is published by the Employee Benefits Division of the State of New York Department of Civil Service. The Employee Benefits Division administers the New York State Health Insurance Program (NYSHIP). NYSHIP provides your health insurance benefits through The Empire Plan.



State of New York
Department of Civil Service
Employee Benefits Division
Albany, New York 12239
518-457-5754 (Albany area)
1-800-833-4344
(U.S., Canada, Puerto Rico, Virgin Islands)
www.cs.state.ny.us

State of New York
Department of Civil Service
Employee Benefits Division
P.O. Box 1068
Schenectady, New York 12301-1068
www.cs.state.ny.us

SAVE THIS DOCUMENT




Information for the Enrollee, Enrolled Spouse/Domestic Partner
and Other Enrolled Dependents

PA Empire Plan Report – January 2010

CHANGE SERVICE REQUESTED

**Please do not send mail or
correspondence to the return
address. See page 5 for
address information.**

It is the policy of the State of New York Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on the Department of Civil Service web site (www.cs.state.ny.us). Click on Benefit Programs, then NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. New York State and Participating Employer Retirees and COBRA Enrollees: Contact the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

 This Report was printed using recycled paper and environmentally sensitive inks.

PA0175

EPR-PA-Empire Plan-10-1

