Mental Health and Substance Abuse Program for the Empire Plan, Excelsior Plan
Student Employee Health Plan RFP, Excelsior Benefit Card

THE EXCELSIOR PLAN
AN EMPIRE PLAN OPTION

NYSHIP
New York State Health Insurance Program

03749 - 000001
JOHN SAMPLE
123 MAIN ST.,
ANYTOWN, NY 12345

THE EXCELSIOR PLAN

NYSHIP
New York State Health Insurance Program

759078997
JOHN SAMPLE

$30 Office Visit $100 Emergency Room

THE EXCELSIOR PLAN

NYSHIP
New York State Health Insurance Program

VOID

**For enrollee services, precertification & provider relations, please call:**
**1-877-7-NYSHIP**
**(1-877-769-7447)**

Submit medical provider claims in accordance with your participating provider agreement.
UnitedHealthcare®
Group# UH0712959

All other non-hospital providers call 1-877-769-7447 for information about eligibility, benefits and claims submission.

Administered by the New York State Department of Civil Service.

**Providers:** This card represents but does not guarantee enrollment in the New York State Health Insurance Program (NYSHIP) for Government Employees.

**Submit hospital, skilled nursing facility and hospice claims to your local Blue Cross and/or Blue Shield Plan.** Hospital and related services provided by Empire HealthChoice Assurance, Inc., a licensee of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

PPO HOSPITAL ONLY BLUE CROSS PLAN 393 **Blue Cross Prefix: YLS**

- Attached is your Excelsior Plan benefit card(s). If you have family coverage and our records indicate that your dependent(s) resides at an address different from your address, a separate card with the name(s) of that dependent(s) will be mailed to the other address.
- This carrier holds two benefit cards. If you have individual coverage, you will receive one card. The second card will be blank. If you have family coverage, you will receive up to two carriers and four cards in this envelope.
- Each card may contain up to five names. Additional dependents will appear on a separate card, mailed in the same envelope. Check to be sure that all names are listed on the card(s).
- If you have questions, contact your current or former (if retiree) agency.

IMPORTANT NOTICE: The Excelsior Plan benefit card with the name of the individual receiving the service must be presented to the doctor or other health care provider (including pharmacies, if applicable) before receiving services. If you do not bring the card, services may be denied.

Receipt of the benefit card(s) does not mean that coverage is in effect. Do not use your card before coverage begins or after coverage ends. It is insurance fraud to knowingly use the card to obtain services when coverage is not effective. If it was determined later that you were not eligible for benefits at the time services were provided, you may be responsible for any amount paid on your behalf.

042712000001