



NEW
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The Empire Plan

Special Report

Information about your NYSHIP
benefits effective January 1, 2019.



Empire Plan Special Report

March 2019 • PE Retiree

New York State Health Insurance Program (NYSHIP) for Retirees, Vesteers and Dependent Survivors enrolled in The Empire Plan through Participating Employers (PE), their enrolled Dependents, Preferred List and COBRA Enrollees and Young Adult Option Enrollees with their Empire Plan benefits

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Changes Effective January 1, 2019

This *Report* describes changes affecting your NYSHIP Empire Plan coverage that took effect on January 1, 2019. These changes were negotiated by State employee unions and were administratively extended to retirees of Participating Employers. They include:

- Copayment changes (page 2)
- New out-of-network deductible and coinsurance maximum amounts (page 3)
- Elimination of the New to You prescription drug requirement (page 4)

Empire Plan Changes

Copayments and Changes Effective January 1, 2019

The following new copayments and changes took effect for services provided under the Medical/Surgical, Hospital and Mental Health and Substance Abuse Programs. New copayment cards for 2019, which were included in your 2019 *At A Glance* publication that was mailed to your home in December 2018, reflect these changes.

Medical/Surgical, Hospital and Mental Health and Substance Abuse Programs		
Program	In-network Benefit	Copayment
Medical/Surgical	Office visit, office surgery, radiology, diagnostic laboratory testing, physical therapy, chiropractic treatment, occupational therapy, convenience care clinic visit	\$25
	Urgent care center visit	\$30
	Ambulatory surgical center visit	\$50
	Licensed ambulance service	\$70
Hospital	Outpatient physical therapy	\$25
	Urgent care center visit, outpatient services for diagnostic radiology or diagnostic laboratory tests	\$50
	Outpatient surgery	\$95
	Emergency department visit	\$100
Mental Health and Substance Abuse	Mental health professional visit, outpatient services, outpatient substance use treatment	\$25
	Emergency department visit	\$100

Skilled nursing facility visits will be covered up to 120 days. Each day of care in a skilled nursing facility counts as one-half benefit day of care. This applies to Plan-primary enrollees and dependents only.

2019 Combined Annual Deductible

The Empire Plan has a combined annual deductible for some non-network services, including Basic Medical Program expenses, non-network expenses under the Home Care Advocacy Program and outpatient, non-network expenses under the Mental Health and Substance Abuse Program. **(Note:** Your out-of-pocket costs are higher for non-network services received from a non-participating provider.) The combined annual deductible must be satisfied before expenses are considered for reimbursement.

Combined Annual Deductible		
	2018	2019
Enrollee	\$1,000	\$1,250
Enrolled Spouse/ Domestic Partner	\$1,000	\$1,250
Enrolled Dependent Children, Combined	\$1,000	\$1,250

2019 Combined Annual Coinsurance Maximum

The Empire Plan has a combined annual coinsurance maximum for some non-network services. The coinsurance amounts incurred for non-network Hospital Program coverage, Basic Medical Program coverage and non-network Mental Health and Substance Abuse Program coverage count toward the combined annual coinsurance maximum.

Copayments to Medical/Surgical Program participating providers and to Mental Health and Substance Abuse Program network practitioners also count toward the combined annual coinsurance maximum. **(Note:** Copayments made to network hospital facilities do not count toward the combined annual coinsurance maximum.)

Once the combined annual coinsurance maximum is met, you will be reimbursed at the network level of benefits for services covered under the Hospital Program and 100 percent of the usual and customary rates for services covered under the Basic Medical Program and Mental Health and Substance Abuse Program. You are responsible for paying all charges in excess of the usual and customary rate.



Combined Annual Coinsurance Maximum		
	2018	2019
Enrollee	\$3,000	\$3,750
Enrolled Spouse/ Domestic Partner	\$3,000	\$3,750
Enrolled Dependent Children, Combined	\$3,000	\$3,750

2019 Flexible Formulary

The Empire Plan uses a Flexible Formulary for prescription drugs. A copy of the 2019 Flexible Formulary was mailed to your home with the 2019 Empire Plan *At A Glance* in December. You can also find the most up-to-date version of the formulary on NYSHIP Online. Be sure to check there, or have your doctor do so, to ensure that you have the most current information.

To access the list, go to www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Using Your Benefits and then 2019 Empire Plan Flexible Formulary.

2019 Medicare Rx Formulary

For Medicare-primary enrollees, Empire Plan Medicare Rx uses a Formulary of Medicare Part D drugs and a secondary list of additional (non-Part D) drugs that are covered as a part of a supplemental benefit. A copy of the 2019 Empire Plan Medicare Rx Abridged Formulary was mailed to your home in November 2018. For a complete list of all the drugs covered under Empire Plan Medicare Rx, go to www.empireplanrxprogram.com. Select SilverScript and then Documents, and choose the 2019 Comprehensive Formulary.

2019 Maximum In-network Out-of-Pocket Limit

In accordance with the Patient Protection and Affordable Care Act, **effective January 1, 2019**, the maximum out-of-pocket limit for covered, in-network services under The Empire Plan changed to \$7,900 for Individual coverage and to \$15,800 for Family coverage. A portion of the maximum is allocated to the Hospital, Medical/Surgical and Mental Health and Substance Abuse Programs, combined, and the balance applies to the Prescription Drug Program, as specified below. Your out-of-pocket costs, such as copayments for covered in-network services, will not exceed the limit. Once you reach the limit, network benefits are paid in full.

2019 Maximum Out-of-Pocket Limit		
	Prescription Drugs	All Other Covered In-network Services, Combined
Individual Coverage	\$2,750*	\$5,150
Family Coverage	\$5,500*	\$10,300

* Does not apply to Medicare-primary enrollees.

If you have any questions about your maximum out-of-pocket limit for prescription drugs, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 4 for the Prescription Drug Program. If you have any questions about your limit for all other covered in-network services, press or say 1 for the Medical/Surgical Program.

Elimination of New to You Prescription Drug Requirement

Effective January 1, 2019, the 30-day quantity limit for maintenance medications required by the New to You Program has been eliminated. You are now able to get up to a 90-day supply without having to fill two prescriptions at a 30-day quantity first. The removal of this requirement gives you and your doctor greater flexibility in managing medications prescribed for your conditions and helps lower out-of-pocket expenses.

If you have any questions about how this change affects your medications, you may call The Empire Plan's toll-free number at 1-877-7-NYSHIP (1-877-769-7447) and press or say 4 for the Prescription Drug Program.

Quest Diagnostics Joins Network

Effective January 1, 2019, Quest Diagnostics joined The Empire Plan as an in-network laboratory provider. Quest has 6,000 in-network patient locations nationwide. LabCorp also remains an in-network option.

You can use UnitedHealthcare's online Empire Plan provider directory to find a Quest location near you. Go to www.cs.ny.gov, and select Retirees and then Health Benefits. Choose your group and plan, then select Find a Provider from the NYSHIP Online homepage, and scroll to the Medical/Surgical Program.

If you have any questions about Quest or need assistance finding a lab, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program.

New Number for Diabetic Supplies Pharmacy

The Empire Plan Diabetic Supplies Pharmacy has a new toll-free number. The vendor for the pharmacy is still Edgepark Medical Supplies, but you must now contact them at **1-800-321-0591** to place an order. Shipping by FedEx and regional carriers on all orders is available at no cost to you, including Saturday deliveries.

For more information about diabetic supply benefits, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program and then press or say 3 for the Home Care Advocacy Program.

Reminders

Medicare Part B IRMAA Reimbursement

Federal 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 2018, you are eligible to be reimbursed for this additional premium by NYSHIP.

Applying for IRMAA Reimbursement

To receive IRMAA reimbursement for 2018, you must provide all of the following:

1. A completed, signed application (see below for instructions on how to access the application).
2. A copy of the SSA notice you and/or any of your Medicare-primary enrolled dependents received dated November 2017 (or during 2018 if newly eligible for Medicare) that states your 2018 monthly Medicare Part B premium including IRMAA.
3. Proof of payment of the Medicare Part B premium. Acceptable documents include a copy of the 2019 form SSA-1099 that you and/or your Medicare-primary enrolled dependent received from SSA, or proof of direct payments and billing statements for all premiums paid directly to the Centers for Medicare and Medicaid Services (CMS) in 2018.

Note: NYSHIP will not reimburse you for any IRMAA costs associated with Medicare Part D.

IRMAA Reimbursement Application

You can access the application at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Medicare and then IRMAA Reimbursement Request Application.

Reimbursement Payments

All reimbursements for IRMAA are issued as refund checks from the New York State Office of the State Comptroller. All IRMAA reimbursement checks, including those reimbursements for eligible dependents, are issued in the name of the NYSHIP enrollee and sent to the mailing address of record on

your enrollment file. Due to the volume of requests for IRMAA reimbursement, you can expect the process to be complete within 90 to 120 days from receipt and acceptance of all required IRMAA documents.

If you have any questions regarding the process of applying for IRMAA reimbursement, contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344. You can also refer to the Reimbursement Notice of Medicare Part B Income-related Monthly Adjustment Amount (IRMAA) located on NYSHIP Online. Go to www.cs.ny.gov, select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Medicare.

* The Income-related Monthly Adjustment Amount (IRMAA) for 2018 is assessed by the Social Security Administration (SSA) to individual income tax filers with a Modified Adjusted Gross Income (MAGI) in 2017 of more than \$85,000 per year and married income tax filers with a MAGI of more than \$170,000 per year.

New Address for MHSA Appeals

The Mental Health and Substance Abuse (MHSA) Program, administered by Beacon Health Options, Inc., has a new address for appeals submissions. Appeals sent to the old address will be forwarded for a period of time, but please make sure to use the following address to ensure timely handling:

**Beacon Health Options
Appeals Dept.
P.O. Box 1851
Hicksville, NY 11802**

Updated Reporting On Series

The *Reporting On* publications have recently been revised and updated. Each publication describes some of The Empire Plan's unique programs and benefits. The series includes, *Reporting On Asthma*, *Reporting On Center of Excellence Programs*, *Reporting On Diabetes*, *Reporting On Home Care Advocacy Program*, *Reporting On Network Benefits*, *Reporting On Prenatal Care*, *Reporting On Prescription Drugs* and *Reporting On Smoking Cessation*.

The *Reporting On* series is available online at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Using Your Benefits and then Publications, and scroll down to Reporting Ons.

Protecting Your Privacy

Keeping your health information private is important to NYSHIP. The NYSHIP Notice of Privacy Practices describes the policies and practices that NYSHIP has in place to safeguard your protected health information, as required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

The Notice is available at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select HIPAA Privacy Information. In addition to the Notice, you will find the *HIPAA Authorization Form* (EBD-543), which must be submitted before the Employee Benefits Division (EBD) can release private information to someone acting upon your behalf.

If you would like a paper copy of the Notice or forms, call EBD at 518-457-5754 or 1-800-833-4344 Monday through Friday from 9 a.m. to 4 p.m. Eastern time. If you believe your privacy rights have been violated, you may file a complaint with the Department of Civil Service. You can access the *HIPAA Complaint Form* online or contact the Department's HIPAA Complaint Officer at 518-473-2624 to request a paper copy.

Keep Your Enrollment Record Up to Date

Letting you know when Empire Plan phone numbers and addresses change is important. But it's just as important for you to keep us up to date with changes in your life.

Remember to inform the Employee Benefits Division of any changes to your enrollment record (address, adding or deleting dependents, marital status changes) in a timely manner. In some cases, deadlines apply (see your *General Information Book* for more information).

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 on the other breast to produce a



symmetrical appearance. The Plan also covers treatment for complications of mastectomy, including lymphedema. Prostheses and mastectomy bras are covered.

Call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program if you have questions about your coverage for implants, breast forms or other prostheses related to breast cancer treatment.

Empire Plan Benefits Management Program requirements apply. See your *Certificate* for more information.

Empire Plan Certificate and Amendments

The updated *Empire Plan Certificate* for active employees and retirees of Participating Employers will be mailed to you and available online later this year. The *Certificate Amendments* will be available online only. The *Certificate* provides an in-depth description of Empire Plan benefits and will also include the benefit changes for 2019.

Once it's available, you can access a copy of the *Certificate* at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Using Your Benefits and then Publications.

Contact Information

Call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the appropriate program.	
PRESS OR SAY 1	Medical/Surgical Program: Administered by UnitedHealthcare Representatives are available Monday through Friday, 8 a.m. to 4:30 p.m. Eastern time. TTY: 1-888-697-9054 P.O. Box 1600, Kingston, NY 12402-1600 Claims submission fax: 845-336-7716 Online: nyrmo.optummessenger.com/public/opensubmit
PRESS OR SAY 2	Hospital Program: Administered by Empire BlueCross BlueShield Administrative services are provided by Empire HealthChoice Assurance, Inc., a licensee of the BlueCross and BlueShield Association, an association of independent BlueCross and BlueShield plans. Representatives are available Monday through Friday, 8 a.m. to 5 p.m. Eastern time. TTY: 1-800-241-6894 New York State Service Center, P.O. Box 1407, Church Street Station, New York, NY 10008-1407 Claims submission fax: 888-367-9788 Online: www.empireblue.com/forms/
PRESS OR SAY 3	Mental Health and Substance Abuse Program: Administered by Beacon Health Options, Inc. Representatives are available 24 hours a day, seven days a week. TTY: 1-855-643-1476 P.O. Box 1850, Hicksville, NY 11802 Claims submission fax: 855-378-8309 Online: www.achievesolutions.net/achievesolutions/en/empireplan/Home.do
PRESS OR SAY 4	Prescription Drug Program: Administered by CVS Caremark Representatives are available 24 hours a day, seven days a week. TTY: 711 Customer Care Correspondence, P.O. Box 6590, Lee's Summit, MO 64064-6590 Claims submission: P.O. Box 52136, Phoenix, AZ 85072-2136
PRESS OR SAY 5	Empire Plan NurseLineSM: Administered by UnitedHealthcare Registered nurses are available 24 hours a day, seven days a week to answer health-related questions.

New EBD Walk-in Hours

If you need to discuss your health insurance benefits with an Employee Benefits Division (EBD) representative, please be aware that walk-in consultation hours are now Monday through Friday from 9 a.m. to 3 p.m., as time permits. You can still schedule a personal consultation from 9 a.m. to 4 p.m.

To make an appointment, call 518-457-5754 or 1-800-833-4344. The New York State Department of Civil Service is located in Core 1 of the South Swan Street building at the Empire State Plaza. Directions to EBD are available at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select About Us, and scroll down to Location.

The *Empire Plan Report* is published by the Employee Benefits Division of the New York State 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.



NYSHIP
New York State
Health Insurance Program

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

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

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NYSHIP
New York State
Health Insurance Program

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

PE Retiree Empire Plan Special Report – March 2019

Address Service Requested

**Please do not send mail
or correspondence to the
return address. See address
information on page 7.**

It is the policy of the New York State 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 NYSHIP Online at www.cs.ny.gov. Visit NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency websites. If you need an auxiliary aid or service to make benefits information available to you, please contact your Health Benefits Administrator.

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Claims Deadlines

If The Empire Plan is your primary insurer and you have used a nonparticipating provider or out-of-network pharmacy, the last day to submit your 2018 claims is April 30, 2019 (120 days after the end of the calendar year). If The Empire Plan is your secondary insurer, you must submit claims by April 30, 2019, or within 120 days after your primary health insurance plan processes your claim, whichever is later.

You may submit claims later if it is not reasonably possible to meet these deadlines (for example, due to illness); however, you must provide documentation.

Nonparticipating provider claim forms are available online at www.cs.ny.gov. Select Retirees and then Health Benefits, and choose your group and plan. From the NYSHIP Online homepage, select Forms, and scroll to the appropriate Program. You can also call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and choose the appropriate Program.

Where to Submit Claims

You can submit claims for services from the following Programs to the corresponding address below.

Medical/Surgical Program – The Empire Plan Basic Medical Program, the Home Care Advocacy

Program (HCAP) and non-network physical medicine services:

UnitedHealthcare
P.O. Box 1600
Kingston, NY 12402-1600

Mental Health and Substance Abuse Program – Non-network mental health and substance use services:

Beacon Health Options
P.O. Box 1850
Hicksville, NY 11802

Prescription Drug Program – Prescriptions filled in 2018 at non-network pharmacies or without using your benefit card:

CVS Caremark
P.O. Box 52136
Phoenix, AZ 85072-2136

Empire Plan Medicare Rx – Prescriptions filled in 2018 at non-network pharmacies or without using your benefit card:

CVS Caremark
P.O. Box 52066
Phoenix, AZ 85072-2066

Mail completed claim forms with supporting bills, receipts and, if applicable, a Medicare summary notice or statement from your other primary insurer by April 30, 2019.