



NEW  
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STATE

## The Empire Plan

### Special Report

Information about your new NYSHIP  
benefits, effective January 1, 2019.



# Empire Plan Special Report

September 2018 • DC-37

New York State Health Insurance Program (NYSHIP) for Employees of New York State represented by District Council 37 (DC-37), their enrolled Dependents, COBRA Enrollees with their Empire Plan benefits and Young Adult Option Enrollees

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# Negotiated Changes Effective January 1, 2019

This *Report* describes changes affecting your NYSHIP Empire Plan coverage that will take effect on January 1, 2019, as a result of the recently ratified contract between the State of New York and DC-37. They include:

- Copayment changes (page 3)
- Elimination of New to You prescription drug requirement (page 4)
- New out-of-network deductible amount (page 4)

## Changing Your Health Insurance Option

This publication outlines the negotiated changes to your NYSHIP Empire Plan coverage. You will have the opportunity to change your NYSHIP option for 2019 during the upcoming annual Option Transfer Period. During this time, you may choose The Empire Plan, a NYSHIP-approved Health Maintenance Organization (HMO) serving the area where you live or work or, if you are eligible, the Opt-out Program.

### Option Transfer Period

Information on Option Transfer will be available shortly, including:

- *Planning for Option Transfer*. This flyer describes the requirements and enrollment procedures for several benefits and programs, including NYSHIP health benefits, the Pre-Tax Contribution Program (PTCP), the Opt-out Program and an increased benefit for the Productivity Enhancement Program (PEP). *Planning for Option Transfer* will be mailed to your home address.
- *Health Insurance Choices for 2019*. This guide provides a more detailed comparison of NYSHIP benefits, including The Empire Plan and NYSHIP-approved HMOs, as well as the procedures for changing options. *Choices* will be available on request from your Health Benefits Administrator (HBA) or the Business Services Center (BSC).

- *Health Insurance Choices for 2019 Supplement*. This is a companion document to your *Health Insurance Choices for 2019* booklet. It details The Empire Plan benefits available to NYSHIP enrollees represented by DC-37 for 2019. The *Supplement* will be available on request from your HBA.
- *Rates & Deadlines for 2019*. This is a listing of 2019 biweekly premium contributions for enrollees in The Empire Plan and NYSHIP-approved HMOs, as well as deadlines for making changes during the Option Transfer period. The *Rates* flyer will be mailed to your home address.

These publications will also be available on NYSHIP Online at [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits). Choose your group and plan, if prompted, and then Health Benefits & Option Transfer. You can also request the publications from your HBA.

### How to Change Options

See your HBA or contact the BSC if you wish to change your option. You must submit the completed *Health Insurance Transaction Form* (PS-404) to your HBA by the Option Transfer Period deadline noted in your *Rates* flyer to change your health insurance option or to enroll in the Opt-out Program.

For questions about your benefits, contact your HBA or The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447). Press or say 1 and then choose the appropriate prompt for plan benefit questions.

# Empire Plan Changes

## Copayments and Changes Effective January 1, 2019

The following new copayments and changes will take effect for services provided under the Medical/Surgical, Hospital, Mental Health and Substance Abuse and Prescription Drug Programs. Copayment cards for 2019 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	Office visit	\$25
In-network <b>skilled nursing facility visits</b> will be covered up to 120 days. Each day of care in a skilled nursing facility counts as one-half benefit day of care.		

Prescription Drug Program			
Drug Category	Copayment for up to a 30-day Supply from a Network Pharmacy, the Mail Service Pharmacy or the Specialty Pharmacy	Copayment for a 31- to 90-day Supply from a Network Pharmacy	Copayment for a 31- to 90-day Supply from the Mail Service Pharmacy or the Specialty Pharmacy
Level 1 Drugs or for Most <b>Generic</b> Drugs	\$5	\$10	\$5
Level 2 Drugs, <b>Preferred</b> Drugs or Compound Drugs	\$30	\$60	\$55
Level 3 Drugs or <b>Non-preferred</b> Drugs	\$60	\$120	\$110

**Note:** Certain covered drugs do not require a copayment when using a network pharmacy. For exclusions and exceptions, please see your *At A Glance* publication.



## 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 will be eliminated. You will be 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 will give you and your doctor greater flexibility in managing your medications prescribed for your conditions and help lower out-of-pocket expenses.

If you have any questions about how this will affect 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 Joining Network

**Effective January 1, 2019**, Quest Diagnostics will be joining The Empire Plan as an in-network laboratory provider. Quest has 6,000 in-network patient locations nationwide. LabCorp will also remain an in-network option.

You can use UnitedHealthcare's Empire Plan online provider directory to find a Quest location near you. Go to [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits) and choose your group and plan, if prompted. From the NYSHIP Online homepage, select Find a Provider 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.

Last year, Edgepark became the diabetic supply vendor for Empire Plan enrollees. If you have not placed your first order yet, Edgepark will review your information that is on file with you to verify it is correct. Be sure to sign and return the Patient Authorization form included with your first 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.

## 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 at a non-participating provider.) The combined annual deductible must be satisfied before expenses are considered for reimbursement.

Combined Annual Deductible		
	2018	2019 <sup>1</sup>
Enrollee	\$1,000	\$1,250
Enrolled Spouse/ Domestic Partner	\$1,000	\$1,250
Dependent Children Combined	\$1,000	\$1,250
Reduced Amount for Enrollees <sup>2</sup> in Titles Equated to Salary Grade Six or Below	\$500	\$625

<sup>1</sup> Effective January 1, 2019

<sup>2</sup> And each deductible amount for their enrolled spouse/domestic partner and dependent children combined

## 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 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 <sup>1</sup>
Enrollee	\$3,000	\$3,750
Enrolled Spouse/ Domestic Partner	\$3,000	\$3,750
Dependent Children Combined	\$3,000	\$3,750
Reduced Amount for Enrollees <sup>2</sup> in Titles Equated to Salary Grade Six or Below	\$1,500	\$1,875

<sup>1</sup> Effective January 1, 2019

<sup>2</sup> And each coinsurance maximum amount for their enrolled spouse/domestic partner and dependent children combined

## 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 changes 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.

## 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 to the new address 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**

# Reminders

## Protecting Your Privacy

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

The NYSHIP Privacy Notice is available on our website at [www.cs.ny.gov](http://www.cs.ny.gov). Click on NYSHIP Online and enter your group and plan, if prompted. From the NYSHIP Online homepage, select the HIPAA Privacy Information link at the bottom of the page. In addition to the NYSHIP Privacy Notice, you will also 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 your Health Benefits Administrator 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).

## NYSHIP Online

To find the most up-to-date information about your health insurance coverage, visit NYSHIP Online at [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits). Choose your group and plan to get to the NYSHIP Online homepage. You can bookmark this page to bypass the login screen the next time you sign in.



## Summary of Benefits and Coverage

The *Summary of Benefits and Coverage (SBC)* is a standardized comparison document required by the Patient Protection and Affordable Care Act. It is designed to improve health insurance information so you can better understand your coverage.

To view the *SBC* for The Empire Plan, visit [www.cs.ny.gov/sbc](http://www.cs.ny.gov/sbc) and choose your group. If you do not have internet access, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program to request a copy.

## 2018 Certificate and Amendments

The updated 2018 *Empire Plan Certificate* for employees of New York State represented by DC-37 will be mailed and available online soon. The *Certificate Amendments* will be available online only. The *Certificate* and *Amendments* provide an in-depth description of the benefits provided through The Empire Plan and also include the negotiated benefit changes for 2019.

Once it's available, you can access a copy of the *Certificate* at [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits). Choose your group and plan, if prompted, and from the NYSHIP Online page, 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.

<b>PRESS OR SAY 1</b>	<b>Medical/Surgical Program: Administered by UnitedHealthcare</b> 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: <a href="http://nyrmo.optummessenger.com/public/opensubmit">nyrmo.optummessenger.com/public/opensubmit</a>
<b>PRESS OR SAY 2</b>	<b>Hospital Program: Administered by Empire BlueCross BlueShield</b> 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: <a href="http://www.empireblue.com/forms/">www.empireblue.com/forms/</a>
<b>PRESS OR SAY 3</b>	<b>Mental Health and Substance Abuse Program: Administered by Beacon Health Options, Inc.</b> 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: <a href="http://www.achievesolutions.net/achievesolutions/en/empireplan/Home.do">www.achievesolutions.net/achievesolutions/en/empireplan/Home.do</a>
<b>PRESS OR SAY 4</b>	<b>Prescription Drug Program: Administered by CVS Caremark</b> 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
<b>PRESS OR SAY 5</b>	<b>Empire Plan NurseLine<sup>SM</sup>: Administered by UnitedHealthcare</b> Registered nurses are available 24 hours a day, seven days a week to answer health-related questions.

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](http://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

## SAVE THIS DOCUMENT



**NYSHIP**  
New York State  
Health Insurance Program

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

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### 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/employee-benefits](http://www.cs.ny.gov/employee-benefits). 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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## 2019 Flexible Formulary

The Empire Plan uses a Flexible Formulary for prescription drugs. For 2019, groups that ratified their contract in 2018 will have a separate Flexible Formulary.

A copy of the 2019 Flexible Formulary will be mailed to your home with the 2019 Empire Plan *At A Glance* in December. The version of the formulary on NYSHIP Online represents the most recent updates. Be sure to check there, or have your doctor do so, to ensure that you have the most current information.

Once it's available, you can access the 2019 Flexible Formulary online at [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits). Choose DC-37 and The Empire Plan, if prompted, and from the NYSHIP Online homepage, select Using Your Benefits and then click on the 2019 Flexible Formulary.

## Payment of MHSA Non-network Claims

**Effective March 1, 2018**, enrollees and covered dependents who obtain services from non-network providers under the Mental Health and Substance Abuse (MHSA) Program may opt to have the Plan pay such providers directly. This process is referred to as “assignment of benefits.” To select this option, check the yes box in the section of the claim form labeled “Accept Assignment?” and mail it to:

### Beacon Health Options

**P.O. Box 1850**

**Hicksville, NY 11802**

By receiving MHSA Program services from a non-network provider, your out-of-pocket costs are much higher. If you would like to discuss transitioning to a network provider or have questions, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program.