



DAVID A. PATERSON
GOVERNOR

STATE OF NEW YORK
DEPARTMENT OF CIVIL SERVICE
ALFRED E. SMITH STATE OFFICE BUILDING
ALBANY, NEW YORK 12239
www.cs.state.ny.us

NANCY G. GROENWEGEN
COMMISSIONER

SEHP10-08

MEMORANDUM

TO: Student Employee Health Plan (SEHP)
Health Benefits Administrators
FROM: Employee Benefits Division
SUBJECT: Annual SEHP Benefit Card Distribution
DATE: July 9, 2010


The annual distribution of new SEHP benefit cards will be mailed July 16, 2010 to enrollee homes. All enrollees and dependents will receive their own card.




The new expiration date will be August 31, 2011.

The mail files will be pulled from NYBEAS on July 14, 2010. Anyone added to NYBEAS after that date will receive a card in our normal weekly rolling card mailing for new SEHP enrollees.

Reminder: You may place a Quick Order (QO) for a SEHP package to be mailed directly to your new SEHP enrollee's home address. We will mail all applicable new materials. The package includes a postcard to request an Empire Plan (also for SEHP enrollees) Participating Provider Directory. If you have more than 10 enrollees you would like to send a QO package to, please call EBD Communications for directions on how to send an Excel file.

If you have any questions about the SEHP card distribution, please contact EBD Communications at 518-457-7577. If you have any questions about SEHP benefits, please call your EBD processor.

 Student Employee Health Plan 1-877-7-NYSHIP (1-877-769-7447)	
John Q. Sample 000000000 Effective until 8/31/11 or when coverage ends, whichever is sooner	
Hospital benefits <ul style="list-style-type: none">• \$200 copayment per admission / inpatient hospital stays• \$15 copayment / outpatient hospital visits• \$25 copayment / Emergency Room	Mental Health / Substance Abuse <ul style="list-style-type: none">• \$200 copayment per admission / general acute or psychiatric hospital, clinic, residential treatment center, group home or halfway house• \$10 copayment / outpatient visit
Medical benefits <ul style="list-style-type: none">• \$10 copayment / office visit, laboratory services, chiropractic treatment, PT	Rx benefits <ul style="list-style-type: none">• Network Pharmacy 30 days / Mail Service 90 days*• \$5/\$5* generic• \$15/\$20* preferred brand-name• \$40/\$65* non-preferred brand-name

<small>This card represents but does not guarantee enrollment in the New York State Health Insurance Program. It is insurance fraud for an enrollee or dependent to use the card to obtain services after eligibility for coverage ends.</small>	
 You must call	Toll Free 1-877-7-NYSHIP 1-877-769-7447
Precertification required for: Admission to a hospital or birthing center: Select Empire BlueCross BlueShield. For an emergency admission, call within 48 hours.	
Outpatient MRI, MRA, CT, PET and nuclear medicine tests: Select UnitedHealthcare	
Mental Health and/or Outpatient Substance Abuse Services: Select OptumHealth™	
Home Care and Diabetic Supplies/ Equipment: Select UnitedHealthcare	
Administered by the New York State Department of Civil Service.	
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 BlueCross and BlueShield Plans.	
	 BLUE CROSS PLAN 303
Blue Cross Prefix: YLS	