

EMPIRE

P L REPORT A N

JULY 2000

New York State Health Insurance Program (NYSHIP)
For New York State and Participating Employer Retirees, Vestees, Dependent Survivors
and Enrollees covered under Preferred List Provisions and for their enrolled Dependents
and for COBRA enrollees with their Empire Plan benefits

Summary of Benefit Changes

Read this *Report* for more information.

Effective July 1, 2000

Pre-Admission Testing: No copayment for hospital outpatient pre-admission and/or pre-surgical testing prior to inpatient admissions.

Home Care Advocacy Program (HCAP): You are no longer required to call HCAP before you receive diabetic supplies (except insulin pumps and Medijectors) or ostomy supplies. Contact network suppliers directly to order supplies.

Cardiovascular Risk Reduction Program: The Empire Plan's Cardiovascular Risk Reduction Program identifies patients treated for cardiovascular disease and offers to assign a cardiac nurse to talk with you and your doctor. Your participation is voluntary.

Active Duty: Dependents of enrollees called to active duty will be eligible for up to 12 months of coverage at no cost. Does not apply to COBRA enrollees and some Participating Employers.

Changes Effective before July 1, 2000

Graduating Students: Beginning May 1, 2000, graduating students are eligible for three months of continued NYSHIP coverage following the end of the month in which they complete course requirements for graduation.

Notice Our New Design

We've given the *Empire Plan Report* an updated look. The *Report* has a new banner and new typeface to go along with your January 1, 2000 *NYSHIP General Information Book and Empire Plan Certificate*. Keep this *Report* and any later *Reports* and Amendments with your *Book/Certificate*.

The Empire Plan

Benefit Changes Effective July 1, 2000

Blue Cross Hospital Coverage

No Copayment for Hospital Outpatient Pre-Admission Testing

Beginning July 1, 2000, the \$25 copayment for hospital outpatient pre-admission testing and/or pre-surgical testing is eliminated prior to an inpatient admission.

You continue to pay the \$25 copayment for each visit to the outpatient department of a hospital where you receive one or more of the following covered services: surgery, diagnostic radiology, diagnostic laboratory tests and administration of Desferal for treatment of Cooley's Anemia.

You will not have to pay the \$25 copayment if you are treated in the outpatient department of a hospital and are then admitted at that time as an inpatient.

United HealthCare Medical Coverage

No HCAP Pre-Authorization for Diabetic and Ostomy Supplies

Beginning July 1, 2000, you are no longer required to call HCAP for authorization before receiving diabetic supplies (except insulin pumps and Medijectors) or ostomy supplies. You will be able to contact the HCAP network suppliers directly to order your supplies. You will continue to receive a paid-in-full benefit when you use a network provider.

The new procedure for ordering ostomy and most diabetic supplies:

- The first time you use your Empire Plan benefits for diabetic or ostomy

supplies, call the HCAP network provider at the toll-free number. For diabetic supplies call National Diabetic Pharmacies (NDP) at 1-888-306-7337. For ostomy supplies call Byram HealthCare Centers at 1-800-354-4054. You must provide the network supplier with a copy of the doctor's order for the supplies.

- If you are already receiving diabetic supplies from NDP or ostomy supplies from Byram HealthCare Centers, you can continue to reorder by contacting the supplier directly.
- If you would like names of other HCAP network providers, call HCAP at 1-800-638-9918 to speak to a representative.

If you choose to use a non-network provider for HCAP-covered supplies, the

Continued on page 2

In This Report

This Empire Plan Report announces benefit changes which amend your NYSHIP General Information Book and Empire Plan Certificate.

2 Empire Plan News and Reminders Network Expands

Empire Plan At a Glance

3 NYSHIP Changes

3 NYSHIP and Medicare

5 Keep Coverage Up to Date

6 Visit Our Web Site

lower, non-network benefit under HCAP will apply. You must submit a claim for non-network supplies to United HealthCare.

This change applies only to ostomy supplies and most diabetic supplies. The Empire Plan still requires prior authorization for all other home care needs, such as home nursing services, home infusion therapy, durable medical equipment and other supplies (including insulin pumps and Medijectors). Call HCAP at 1-800-638-9918 to speak with a representative.

Cardiovascular Risk Reduction Program

Effective July 1, 2000, the Empire Plan offers a new comprehensive disease management program focusing on the heart. The program is called Cardiovascular Risk Reduction (CVRR). Empire Plan enrollees and their eligible dependents who have a recent history of angioplasty, open heart surgery, and/or heart attack will be invited to participate in this program, which will be conducted confidentially over the phone. There is no cost to you. Your participation is voluntary.

If you agree to participate, your case will be assigned to a cardiac nurse who is experienced in working with patients to reduce heart disease risk factors. The nurse will consult with your cardiologist to develop a plan of care with the best promise of success. The nurse will talk with you periodically on the phone about heart-healthy diet, exercise, medication, stress management and smoking cessation, if applicable. You will receive, as needed, informational and educational materials developed in conjunction with the American Heart Association.

CVRR is provided by United HealthCare and is administered by CorSolutions, the nation's leading provider of lifestyle change and treatment support programs.

The Empire Plan News and Reminders



New Book/ Certificates Mailed

We mailed the January 1, 2000 *NYSHIP General Information Book and Empire Plan*

Certificate in May. If you did not receive a copy, call the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands). Then, follow up with a written note if you have a new address. Keep this *Empire Plan Report* with your new book. And, remember, you can see the *Book/Certificate* on the New York State Department of Civil Service Web site: <http://www.cs.state.ny.us>. Click on Employee Benefits and Services.

Empire Blue Cross Address Change

Empire Blue Cross and Blue Shield has centralized their incoming mail operations to improve efficiency and streamline processing. Please send claims, appeals and other correspondence to the following address:

Empire Blue Cross and Blue Shield
New York State Service Center
P.O. Box 1407
Church Street Station
New York, NY 10008-1407



Use Your Benefit Card

Remember to keep your New York Government Employee

Benefit Card with you. And make sure your enrolled dependents carry their cards with them.

Present your card before you receive services from:

- Empire Plan/Express Scripts participating pharmacies (*This does not apply to retirees from DC-37 and Civil Service Forum Local 300, CWA-represented employees who retired before 7/1/94, and retirees from certain Participating Employers.*)
- Hospitals
- Empire Plan participating providers

If you or your dependents need a replacement card, contact the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

Participating Provider Network Expands

Empire Plan enrollees in Arizona, North Carolina and South Carolina now may choose from an expanded network of participating providers. Effective July 1, 2000, the number of Empire Plan participating providers has grown by 5,300 in Arizona, 11,300 in North Carolina and 4,700 in South Carolina. These providers are part of United HealthCare's Options Preferred Provider Organization (PPO) network.

Empire Plan enrollees who live in these areas will receive new Participating Provider Directories in the mail. Some of these new providers may not yet be familiar with the

Empire Plan name. Ask if the provider is part of United HealthCare's Options PPO before you receive services. When you use a participating provider, you receive covered services at little or no cost and have no claim forms to file.

You can find Empire Plan providers on the Employee Benefits Division Web site, <http://www.cs.state.ny.us>. Click on Employee Benefits and Services and choose Empire Plan Providers. *The Empire Plan Participating Provider Directory* lists over 80,000 Empire Plan providers. Or, call United HealthCare at 1-800-942-4640.

New York State Health Insurance Program (NYSHIP) Changes

Graduating Dependent Students: Three-Month Extension of Coverage

Beginning May 1, 2000, unmarried dependent students who are age 19 or over but under age 25 and complete course requirements for graduation from a qualified course of study are eligible for three months of continued coverage following the end of the month in which they complete course requirements for graduation.

You must provide verification to the appropriate carrier of the dependent's graduation before claims will be paid.

After the three-month extension period ends, the graduated dependent student may choose either COBRA coverage or a direct-pay conversion contract.

If you have any questions, contact the Employee Benefits Division. Deadlines apply. See your *NYSHIP General Information Book* before coverage ends.

Benefits for Dependents of Enrollees Called to Active Duty

COBRA Enrollees: The following information does not apply to you. Retirees of Participating Employers: Ask your former employer if this benefit applies to you.

Beginning July 1, 2000, if you are a member of an Armed Forces Reserve or National Guard Unit called to active duty by a declaration of the President of the United States or an Act of Congress, you will be entitled to continued NYSHIP enrollment for your covered dependents at no cost to you.

Your dependents who have been covered for at least 30 days before your activation are eligible for this coverage.

Dependents will receive NYSHIP coverage at no cost for up to 12 months, or until the end of active duty status, whichever happens first.

If you or a family member needs information about your health benefits during active duty, call the Employee Benefits Division.

Answers to Your Questions About NYSHIP and Medicare

Must I be enrolled in Medicare when I turn 65?

Under the New York State Health Insurance Program (NYSHIP), you **must** be enrolled in Medicare Parts A and B and entitled to receive Medicare benefits by the first day of the month in which you reach age 65 (or, if your birthday falls on the first of the month, in effect on the first day of the month before your birthday). Be sure to plan ahead. Call Social Security at 1-800-772-1213 three months before your 65th birthday to enroll in Medicare.

Does the Medicare enrollment requirement apply to my spouse or domestic partner?

Yes, the Medicare enrollment requirement applies if your spouse or domestic partner is covered under your NYSHIP policy. A dependent who is covered under the NYSHIP policy of a retiree, vestee, dependent survivor or enrollee covered under Preferred List provisions must also be enrolled in Medicare Parts A and B when first eligible for Medicare coverage that is primary to NYSHIP.

What happens if I don't enroll in Medicare when I am first eligible?

If you or your dependent is not enrolled in Medicare Parts A and B when you are first eligible to enroll, you will be responsible for the full cost of medical services that Medicare would have covered. As soon as you or your dependent becomes eligible for Medicare, your NYSHIP coverage pays secondary to Medicare. NYSHIP pays secondary even if you do not enroll in Medicare or are in a waiting period for Medicare to go into effect.

What does primary coverage mean?

A health insurance plan provides primary coverage when it is responsible for paying health benefits before another group health insurance. Medicare

becomes primary to NYSHIP coverage when you or your dependent is age 65 or older, or regardless of age have been entitled to Social Security Disability for more than 24 months, or regardless of age have end stage renal disease.

I am Medicare primary. When does Medicare pay first for my dependents under my Family coverage?

If you have Family coverage, Medicare becomes primary to NYSHIP for your spouse or other covered dependents as soon as they become eligible for Medicare for any reason. Until then, NYSHIP is primary for the dependent. If your spouse or other dependents are covered under other group health insurance, ask the Empire Plan carriers about primary coverage.

What if I'm working for another employer?

If you are a State retiree who works for an employer other than New York State, Medicare pays primary to NYSHIP whether or not you have health insurance coverage through that other employer's group plan. Medicare also pays primary to NYSHIP if you work for a local government in New York State but keep your NYSHIP enrollment as a State or Participating Employer retiree. Therefore, you must be enrolled in Medicare Parts A and B or you will have a gap in coverage.

What if my spouse or domestic partner is working for another employer?

Even if any of your dependents is working and has coverage through an employer other than New York State, the dependent must be enrolled in Medicare Parts A and B when first eligible. If the dependent does not enroll, NYSHIP will not provide any benefits for services that Medicare would have paid.

Continued on page 4

Must I contact the Employee Benefits Division when my dependent(s) or I enroll in Medicare?

You must notify the Employee Benefits Division in writing if: you or a covered dependent becomes eligible for Medicare benefits because of disability or end stage renal disease regardless of age; your enrolled domestic partner becomes eligible for Medicare regardless of age; you or an enrolled dependent loses eligibility for Medicare; you are a COBRA enrollee and you or your dependent becomes entitled to receive Medicare benefits.

Why did Medicare send me a card when I am not 65?

Social Security will send you a Medicare card if you have qualified for Social Security Disability Insurance (SSDI) for 24 months. Although Social Security allows you to refuse Part B, be sure to accept enrollment in both Medicare Parts A and B. NYSHIP requires you to be enrolled in Parts A and B, regardless of age, when classified by Social Security as disabled for more than 24 months.

Is a \$45.50 Medicare credit "deducted" from my retirement check?

The Medicare credit is **added** to your retirement check. It is not deducted.

Social Security deducts the Medicare Part B premium, which is now \$45.50, from the monthly Social Security check. The State automatically adds the credit to your retirement check as reimbursement for the Medicare Part B premium, unless you receive reimbursement from another source. The same automatic reimbursement applies to spouses who become 65 years old after January 1, 2000.

The reimbursement is not automatic for spouses who became 65 years old before January 1, 2000. The reimbursement also is not automatic for your domestic partner or for any enrollee or covered dependent who is under age 65 and eligible for Medicare due to a disability or end stage renal disease.

Notes About Reimbursement

- If you or your dependent receives reimbursement for the Medicare Part B premium from another source, you must write to the Employee Benefits Division to stop the automatic reimbursement.
- The Medicare reimbursement does not necessarily mean you or your dependent is enrolled in Medicare. It is your responsibility to follow the correct procedure for enrolling in Medicare.
- You must notify the Employee Benefits Division in writing if, for any reason, you or your dependent is no longer eligible for the Medicare premium reimbursement.

Participating Employer enrollees: Ask your former employing agency about continuing NYSHIP with Medicare coverage and about Medicare premium reimbursement.

All enrollees: Read your NYSHIP/ Empire Plan documents for complete information. If you have questions, call the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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
The State Campus, Albany, New York 12239
518-457-5754 (Albany area)
1-800-833-4344
(U.S., Canada, Puerto Rico, Virgin Islands)
Please visit us at our Web site
<http://www.cs.state.ny.us>

Keeping Your Coverage Up To Date

To keep your coverage up to date, you must notify the Employee Benefits Division in the State of New York Department of Civil Service of changes affecting your NYSHIP enrollment. Always include your name and identification number. You must provide notice **in writing** for the situations marked by the . For other situations, you may call 518-457-5754 (Albany area) or 1-800-833-4344 (U.S. outside Albany local calling area, Canada, Puerto Rico, Virgin Islands).

 **Your home address changes**

 **Your phone number changes**

 **Your name changes**

For above situations, also contact your retirement system.

Your Family Unit Changes

-  • You marry, divorce, acquire a domestic partner or terminate a relationship with a domestic partner (include name and Social Security number of spouse/domestic partner and date of event)
-  • You acquire a dependent (include name, date of birth, date the person became your dependent and dependent's Social Security number)
-  • You no longer have any eligible dependents (include date last dependent was eligible)
-  • A dependent loses eligibility (include name, date of birth, date eligibility ends and reason for loss of eligibility)
-  • You no longer wish to provide coverage for a dependent (include dependent's name and date of birth)
-  • You have a disabled dependent (request Form PS-451)
-  • Your spouse/domestic partner or other enrolled dependent dies (include dependent's name and date of death)

Your Status Changes

-  • You or a covered dependent becomes eligible for Medicare benefits because of disability or end stage renal disease although under age 65 (enclose photocopy of your or dependent's Medicare card showing enrollment in Parts A and B)
-  • Your enrolled domestic partner becomes eligible for Medicare regardless of age (enclose photocopy of dependent's Medicare card showing enrollment in Parts A and B)
-  • You or an enrolled dependent loses eligibility for Medicare (because, for example, you are no longer disabled)

-  • If you die, your representative should send a copy of the death certificate so that billings or Medicare reimbursement checks (if any) will end
-  • You are a vestee who becomes eligible to retire
- You are a COBRA enrollee and you or your dependent becomes entitled to receive Medicare benefits

You Have Questions About NYSHIP

- You have questions concerning your family's eligibility for health insurance coverage
- You have questions about changing your type of coverage (Family/Individual)
- You have questions about COBRA
- You have questions about the Dual Annuitant Sick Leave Credit or Deferred Health Insurance

Other

- You would like a list of HMOs participating in NYSHIP (Call United HealthCare or check our Web site for a directory of Empire Plan participating providers)
- You followed an Empire Plan carrier's appeals procedure but still do not agree about covered benefits (You may also contact the State Insurance Department or State Health Department)
-  • You need to correct your enrollment records because, for example, a name is misspelled or birthdate is wrong
-  • You want to change your health insurance option outside the Option Transfer Period (include reason for change and date of move)
- You need to file a coordination of benefits Form PS-600 because you (or a dependent) enrolls in another health insurance plan
-  • You want to cancel your coverage (include reason for canceling and date you want coverage to end)
- You return to State service

State of New York
 Department of Civil Service
 Employee Benefits Division
 The State Campus
 Albany, New York 12239
<http://www.cs.state.ny.us>

SAVE THIS DOCUMENT



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

PRSR STD
 U.S. Postage Paid
 Utica NY
 Permit No. 320

ADDRESS SERVICE
 REQUESTED

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. If you need an auxiliary aid or service to make benefits information available to you, please 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.

EPR-RETIREE-00-1

Visit us on the Web at <http://www.cs.state.ny.us>

Check our newly-designed New York State Department of Civil Service Employee Benefits Division Web site at <http://www.cs.state.ny.us>.
 Click on Employee Benefits and Services for timely information about your Empire Plan Benefits.



Empire Plan Providers
 Link directly to the Participating Provider Directory on the United HealthCare Web site