

EMPIRE PLAN REPORT



January 2011

New York State Health Insurance Program (NYSHIP) for New York State Retirees, Vestees, Dependent Survivors and Enrollees covered under Preferred List Provisions, their enrolled Dependents, COBRA Enrollees with their Empire Plan Benefits and Young Adult Option Enrollees

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Federal Health Care Changes

The federal Patient Protection and Affordable Care Act (PPACA), which will be referred to as “the Act” in this article and throughout this *Empire Plan Report*, requires that we make several changes to The Empire Plan coverage.

The Act required the following changes effective on January 1, 2011:

Eligibility for coverage as a NYSHIP dependent will continue for children up to age 26 regardless of marital or student status. See article on page 2.

Dollar limits on coverage for certain services have been eliminated:

- Routine health exams for active employees and spouses/domestic partners are covered under the Basic Medical Program not subject to deductible or coinsurance; the \$250 calendar year payment limit has been eliminated.
- Routine newborn child care is covered under the Basic Medical Program not subject to deductible or coinsurance; the \$150 payment maximum has been eliminated.
- Non-network services covered under the Managed Physical Medicine Program are no longer subject to a \$1,500 annual maximum benefit.

The Empire Plan, a benefit package for State employees, is considered to be a grandfathered plan. Under the Act, a grandfathered health plan is permitted to preserve certain basic health coverage that was already in effect when the Act was signed into law on March 23, 2010.

Being a grandfathered health plan means that the plan may delay implementation of certain features of health care reform that apply to nongrandfathered health plans. For example, the requirement for the provision of preventive health services without any cost sharing does not need to be included under a health care plan until the plan is no longer grandfathered. However, grandfathered health plans must comply with certain other consumer protections in the Act such as the elimination of lifetime limits on certain benefits.

Questions regarding which protections apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Employee Benefits Division. You may also contact the U.S. Department of Health and Human Services at www.healthcare.gov.

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Covering Your Young Adult Children

Effective January 1, 2011, the Act requires insurers to offer young adult children coverage as dependents on their parents' health insurance up to age 26. Financial dependency, student status, marital status, employment and residency can no longer be used to determine eligibility. Although the new law extends coverage to married children, it does not apply to the married child's spouse or children.

You can add a young adult child (up to age 26) to your family coverage at no additional cost.

If you currently have individual coverage and would like to add a young adult child as a dependent, you will need to change to family coverage; a waiting period may apply. Contact the Employee Benefits Division for more details or to add a dependent.

Family coverage rates are available on the New York State Department of Civil Service web site at <https://www.cs.ny.gov>. From the home page, click on Benefit Programs and follow the prompts to access NYSHIP Online. Click on Health Benefits & Option Transfer and then select Rates and Health Plan Choices.

A young adult child under the age of 26 on January 1, 2011 and enrolled as a dependent will continue to be enrolled until age 26, unless you choose to take him or her off your plan. Coverage as a dependent will end on the last day of the month in which the young adult child turns 26 years old.

A dependent child age 26 or older who has served in a branch of the U.S. Military may qualify for up to four additional years of health insurance coverage (as a dependent), provided he or she is unmarried and a full-time student. You must be able to provide written documentation from the U.S. Military and the student's school.

When a young adult child loses eligibility for health insurance coverage, he or she may be entitled to continue coverage for up to 36 months under the federal Consolidated Omnibus Budget Reconciliation Act (COBRA) and the New York State Continuation of Coverage law. A young adult child may also be eligible to purchase his or her own NYSHIP coverage through the New York State Young Adult Option up to age 30.

Enrollment in the Young Adult Option is offered during the annual open enrollment period at the end of each year or whenever the young adult child experiences a qualifying event, such as loss of eligibility for other coverage, provided application is made on a timely basis. For more information about continuation coverage or NYSHIP's Young Adult Option, contact the Employee Benefits Division. Details are in the *NYSHIP General Information Book* amendment on page 328.

Herpes Zoster (Shingles) Vaccine

The herpes zoster vaccine used to prevent shingles is covered as an adult immunization under the Participating Provider Program for Empire Plan enrollees age 55 or over.

The participating provider must administer the vaccine; there is no covered benefit if you purchase the vaccine from a pharmacy, even if your provider gives you a prescription. If your provider does not offer the herpes zoster vaccine, you may call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press 1 for the Medical Program to receive a list of Empire Plan participating providers in your area who offer the vaccine to nonestablished patients. There is no benefit if you receive the vaccine from a non-participating provider.

Other 2011 Empire Plan Amendments to Note

Be sure to read your Certificate Amendments for details regarding the following changes:

- Expanded types of transplants available under the Centers of Excellence for Transplants Program
- A clarification of the Centers of Excellence travel allowance to state that it is only available for travel within the United States
- New definition of ancillary charge under the Prescription Drug Program
- Additional prior authorization drugs: Actemra, Ampyra, Gilenya, Ribavirin, Veletri, Xeomin
- Additional excluded drugs: Acuvail, Aplenzin, BenzEfoam, carisoprodol 250, Cyclobenzaprine hydrochloride extended release capsule (generic Amrix), doxycycline hyclate delayed release tablet (generic Doryx), Edular, Epiduo, Extavia, lansoprazole, Metozolv ODT, Momexin Kit, Naprelan, Neobenz Micro, omeprazole/sodium bicarbonate capsule (generic Zegerid), Ryzolt, Terbinex, Triaz, Twynsta, Zegerid capsule, Ziana, Zipsor

Medicare Durable Medical Equipment and Prosthetics and Orthotics Supply (DMEPOS) Competitive Bidding Program

Effective January 1, 2011, Medicare implemented the DMEPOS Competitive Bidding Program in the following areas of the country:

- Charlotte-Gastonia-Concord (North Carolina and South Carolina);
- Cincinnati-Middletown (Ohio, Kentucky and Indiana);
- Cleveland-Elyria-Mentor (Ohio);
- Dallas-Fort Worth-Arlington (Texas);
- Kansas City (Missouri and Kansas);
- Miami-Fort Lauderdale-Pompano Beach (Florida);
- Orlando-Kissimmee (Florida);
- Pittsburgh (Pennsylvania);
- Riverside-San Bernardino-Ontario (California).

Additional areas, including some areas in New York State, may be added to the Program in 2012.

Medicare-primary enrollees who permanently reside in or travel to any of the nine geographic areas above, are required to obtain certain DMEPOS items from a Medicare contract supplier, unless an exception applies. If a Medicare contract supplier is not used, Medicare will not pay any portion of the bill. The Empire Plan will estimate what Medicare would have paid for the item(s) and subtract that amount from the enrollee's benefit. **All Medicare-primary enrollees outside these areas must continue to follow HCAP requirements to receive paid-in-full benefits.**

DMEPOS items subject to the Competitive Bidding Program include:

- mail-order diabetic supplies,
- oxygen supplies and equipment,
- standard power wheelchairs, scooters, and accessories,
- certain complex rehabilitative power wheelchairs and accessories,
- hospital beds and accessories,
- walkers and accessories,
- enteral nutrients, equipment and supplies,
- continuous positive airway pressure (CPAP) machines,
- respiratory assist devices and related accessories and
- support surfaces (mattresses and overlays).

For assistance in locating a Medicare contract supplier, call The Empire Plan Home Care Advocacy Program (HCAP) toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Medical Program, then Benefits Management Program or visit: <http://www.medicare.gov>. At the home page choose Facilities & Doctors, then Find Suppliers of Medical Equipment, type in your zip code and choose the durable medical equipment you need.

Reminders 2011

Medicare Part B Reimbursement

If you and/or your dependent are eligible for Medicare primary coverage because of age or disability, NYSHIP automatically reimburses you for the standard Medicare Part B premium unless you receive reimbursement from another source. For the years 2009 through 2011, there are three different standard Medicare Part B premium levels. This is the result of federal law that keeps Medicare Part B premium unchanged for existing beneficiaries in years when there is no cost of living adjustment (COLA) for Social Security pensions.

While other factors may affect your premium, the monthly cost of your Medicare Part B coverage for 2009 through 2011 generally depends on when you first became eligible for Medicare and had your premium deducted from your Social Security check:

First year of Medicare eligibility	Standard Part B monthly premium
2009 or earlier	\$ 96.40
2010	\$110.50
2011	\$115.40

During 2010, if your Medicare Part B premium was \$110.50, you were automatically reimbursed \$96.40 and had to apply to the Department of Civil Service for reimbursement of the additional \$14.10. However, in 2011, we updated our system to automatically reimburse the correct standard Medicare Part B premium to enrollees.

If your modified adjusted gross income exceeds \$85,000 (\$170,000 if you filed taxes as married filing jointly), Medicare charges an Income-Related Monthly Adjustment Amount (IRMAA) in addition to your standard Medicare Part B premium. You will receive information from the Department of Civil Service in late 2011 or early 2012 regarding reimbursement of this additional Medicare Part B premium for 2011.

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Relocating Outside NYS?

If you are considering a move outside New York State, it is important to understand how your NYSHIP coverage will be affected. You probably already know that The Empire Plan is the only option that offers worldwide coverage, but this does not mean that participating providers are available in every location.

The Empire Plan participating provider network is available through a contract with UnitedHealthcare (UHC). In six states outside of New York (Arizona, Connecticut, Florida, New Jersey, North Carolina and South Carolina) and Washington D.C. and the adjoining states of Maryland and Virginia, The Empire Plan leases an enhanced network from UHC, referred to as the Participating Provider Organization (PPO) listing to provide enrollees living in these areas access to a wider range of providers. This is because large populations of Empire Plan retirees live in these regions of the country.

The Empire Plan has national contracts with BlueCross BlueShield for hospital expenses and OptumHealth Behavioral Solutions for mental health and substance abuse services. This means the majority of providers in most out-of-state directories (other than those mentioned above) will be from these networks.

If you live in an area of the country where participating providers are not available, you still have Empire Plan non-network coverage under the Basic Medical Program or the Basic Medical Provider Discount Program. Annual deductible and coinsurance apply. See your *Empire Plan Certificate* and Amendments for details.

If you are considering relocating outside New York State, be sure to check the availability of participating providers in the new state as part of your planning process. You can do this by visiting our web site, <https://www.cs.ny.gov>. From the NYSHIP Online home page choose Find a Provider, then scroll down to the Medical/Surgical Program and click on the link for Empire Plan Medical/Surgical Directory.

You will be directed to another site where you can customize your search by location. If you prefer a printed directory, contact the Employee Benefits Division or call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose the Medical Program to request that a state directory be mailed to your home.

Empire Plan Toll-free Script Changes

If you have called The Empire Plan toll-free number (1-877-7-NYSHIP) recently, you may have noticed that we've made some changes to the phone script to help serve you better. The script no longer contains up front prompts using the carrier names and it instead references program names. The script is also shorter, to lessen your wait time.

The order of the programs and options has remained the same. However, as a reminder:

Press 1 for the Medical Program, including physician services, medical equipment and home care, administered by UnitedHealthcare

Press 2 for the Hospital Program, administered by BlueCross BlueShield

Press 3 for the Mental Health and Substance Abuse Program, administered by OptumHealth Behavioral Solutions

Press 4 for the Prescription Drug Program, administered by MedcoHealth Solutions

Press 5 for the Empire Plan NurseLine_{SM}, for health information and support

Remember, your plan is The Empire Plan for New York government enrollees.

MHSA Web Site Improved

The Mental Health and Substance Abuse (MHSA) Program's customized web site, www.liveandworkwell.com, provided by the program's administrator OptumHealth, has been enhanced to provide free, confidential online access to your Mental Health and Substance Abuse benefits, claims and authorizations inquiries.

Empire Plan enrollees now have access to the "My Claims and Coverage" section on the web site. This section allows you to track claims and authorizations online as well as review detailed eligibility and benefit information for you and your covered dependents. The customized web site also provides tools, information and resources to help enhance your health, work and life.

You can access the site from the Department's site, <https://www.cs.ny.gov> by selecting Find a Provider from the NYSHIP Online home page and scrolling to the Mental Health and Substance Abuse Program section. Click on the link under the Live and Work Well logo to access the customized Empire Plan site. To use the claims and coverage features, which allow you to view eligibility and claims processing, first-time visitors must register on the site and use the Access Code: Empire. Be sure to also have your Empire Plan Benefit Card identification number available.

Note: Due to federal privacy regulations, you will not be able to view status on claims for a spouse or covered dependent age 18 or older.

NYSHIP Retiree Health Benefits Meetings 2011

Plan to attend a New York State Health Insurance Program (NYSHIP) retiree health benefits meeting in your area this fall. These meetings are held annually to help retirees, vestees and dependent survivors understand their health benefits. A representative is on hand to explain any benefit changes and to answer your questions.

Check your mailbox for a retiree information meeting postcard two to three weeks before a meeting is scheduled in your area. You can also find the meeting schedule on the Department of Civil Service web site at <https://www.cs.ny.gov>. Click on Retirees, then Health Benefits to view the Calendar. Under Type of Event, scroll to Retiree Meeting.

You don't need a reservation to attend a NYSHIP retiree meeting, but seating is on a first-come, first-served basis. Photo ID may be required. If you are unable to attend, you can send a family member, friend or other representative. The meeting sites are handicapped accessible and ample parking is available. However, if you need a special accommodation such as a sign language interpreter, please call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 four to six weeks prior to the meeting date.

Albany • Monday, September 12

Albany Marriott
189 Wolf Rd, Albany, NY 12205

Binghamton • Tuesday, September 13

Holiday Inn Arena
2-8 Hawley St, Binghamton, NY 13901

Buffalo • Monday, October 24

Buffalo Niagara Marriott
1340 Millersport Hwy, Amherst, NY 14221

Latham • Thursday, November 3

Colonie Elks Lodge
11 Elks Ln, Latham, NY 12110

Manhattan • Friday, November 18

CUNY, Graduate Center
365 5th Ave, New York, NY 10016

Plattsburgh • Thursday, October 6

Holiday Inn Plattsburgh
412 Rt 3, Plattsburgh, NY 12901

Poughkeepsie • Tuesday, September 20

Poughkeepsie Grand Hotel
40 Civic Center Plz, Poughkeepsie, NY 12601

Rochester • Tuesday, October 25

Double Tree Hotel
1111 Jefferson Rd, Rochester, NY 14623

Schenectady • Wednesday, September 7

Glen Sanders Mansion
1 Glen Ave, Scotia, NY 12302

Smithtown • Tuesday, November 1

Sheraton Long Island
110 Vanderbilt Motor Pkwy, Smithtown, NY 11788

Syracuse • Friday, October 28

Double Tree Hotel
6301 Rt 298, East Syracuse, NY 13057

Utica • Friday, September 16

Radisson Hotel Utica Centre
200 Genesee St, Utica, NY 13502

New Travel Resource Available

Remember to bring along a copy of the new *On the Road with The Empire Plan* if you're traveling this summer or fall. This handy booklet includes contact and claims information for The Empire Plan programs and carriers that you or your dependents can use while away from home.

Contact the Employee Benefits Division to get a copy of *On the Road*. Or, you can access the online version on the Department of Civil Service web site at <https://www.cs.ny.gov>. From this home page, follow the prompts to the NYSHIP Online home page. Click on Using Your Benefits and then Publications.

Safe travels and have a good trip!

New Web Site Address



The New York State Department of Civil Service web site address has changed to <https://www.cs.ny.gov>. Even though you can still access our site at

the old address, please update your bookmarks for our web site to the new address. The old address will only work for a limited time.

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

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

Retiree Empire Plan Report – January 2011

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**Please do not send mail
or correspondence to
the return address. See
address information below.**

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. These publications are also available on the Department of Civil Service web site (<https://www.cs.ny.gov>). Click on Benefit Programs, then NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. New York State and Participating Employer Retirees and COBRA Enrollees: Contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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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 of 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 select the Medical 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 *Empire Plan Certificate* and *Empire Plan Reports*.

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.



New York State
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<https://www.cs.ny.gov>