



The Empire Plan



Empire Plan Report

September 2017 • NY Active

New York State Health Insurance Program (NYSHIP) for Employees of New York State, their enrolled Dependents, COBRA Enrollees with their Empire Plan benefits and Young Adult Option Enrollees

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What's New

This *Empire Plan Report* summarizes the changes to your benefits and coverage under the New York State Health Insurance Program (NYSHIP) and The Empire Plan. The *Empire Plan Certificate Amendments* reflecting the changes outlined in this *Report* will be posted on NYSHIP Online.

The *Empire Plan Certificate*, which describes the coverage provided by The Empire Plan, will be updated on NYSHIP Online to reflect the new *Amendments*. A new *Empire Plan Certificate*, containing all Empire Plan benefit changes, will be mailed to your home when complete.

This *Report* includes information about:

- Substance Use Treatment Coverage (Page 2)
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Empire Plan Changes

Substance Use Treatment Coverage

To help combat New York State's heroin and opioid crisis, a new New York State law went into effect on January 1, 2017, that requires health insurance plans to cover treatment services provided to New Yorkers suffering from opioid addiction, increases access to treatment and limits the over-prescription of opioids in New York. The Empire Plan has in place programs and services that are in compliance with the new legislation, as detailed below.

Inpatient Admissions

The Empire Plan allows in-network facilities to treat an enrollee or covered dependent for the first 14 days of an inpatient admission for substance use without prior authorization or medical necessity review, provided that such facility is certified by the New York State Office of Alcoholism and Substance Abuse Services (OASAS). All inpatient substance use treatment facilities in New York State are OASAS certified, but not all of them are in-network. To find an in-network OASAS-certified facility go to 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 Mental Health and Substance Abuse Program.

Coverage for Treatment Medications

The Empire Plan provides coverage for medication approved by the U.S. Food and Drug Administration for detoxification or maintenance treatment of a substance use disorder. This coverage includes immediate access, without prior authorization, to medications that help manage opioid withdrawal or stabilization as well as medications intended to reverse an opioid overdose, such as naloxone.

Limits on Opioid Prescriptions

In an effort to reduce opportunities for individuals to become dependent on these medications, health care providers are prohibited from prescribing more than a seven-day supply of any opioid upon initial consultation or treatment for acute pain. The copayment reflects the number of days supplied.

If you have any questions about substance use treatment coverage, please call 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the Mental Health and Substance Abuse Program. For more information on opioids and heroin, visit the Achieve Solutions (Beacon Health Options) website at www.achievesolutions.net/empireplan. Select Alcohol and Other Drugs from the Topics dropdown menu and then Opioids and Heroin.

Infertility Definition Expanded

As of November 1, 2016, NYSHIP's definition of infertility has been broadened to align with the American Society for Reproductive Medicine. The new definition now encourages women over age 35 to seek fertility evaluation and treatment if they fail to conceive after only six months of trying. The full definition is as follows:

"Infertility is a disease, defined by the failure to achieve a successful pregnancy after 12 months or more of appropriate, timed unprotected intercourse or therapeutic donor insemination. Earlier evaluation and treatment may be justified based on medical history and physical findings and is warranted after 6 months for women over age 35 years."

The definition applies to all individuals, regardless of marital status or sexual orientation.

Benefits for Qualified Procedures (specialized procedures that facilitate a pregnancy but do not treat the cause of the infertility) continue to be subject to the \$50,000 lifetime maximum per covered individual. This maximum applies to all covered hospital, medical, travel, lodging and meal expenses that are associated with Qualified Procedures.

What Is Covered

Covered infertility services and supplies include, but are not limited to: patient education/program orientation, diagnostic testing, ovulation induction/hormonal therapy, artificial/intra-uterine insemination and surgery to enhance reproductive capability.

Centers of Excellence

While you have the freedom to choose a provider, the Centers of Excellence for Infertility are a select group of providers recognized by the Medical Program Administrator. If the Program Administrator preauthorizes treatment at a Center, benefits are payable in full (subject to the maximum lifetime benefit). There is also a travel benefit available if the Center is more than 100 miles (200 for airfare) from the patient's residence.

For additional information, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical Program.



Pre-implantation Genetic Testing Now Covered

The Center of Excellence for Infertility Program recently added Pre-implantation Genetic Diagnosis (PGD) testing to covered diagnostic testing services. PGD testing is a procedure used prior to implantation to help identify genetic defects within embryos created through in vitro fertilization to prevent certain diseases or disorders from being passed on to the child.

The procedure is covered for the diagnosis of known genetic disorders only when the fetus is at risk for the genetic disorder. This would include, but is not limited to, the following:

- Autosomal dominant disorders
- Sex-linked (X or Y chromosome) disorders
- Autosomal recessive diseases for which very specific mutations in heterozygosity can lead to a phenotype and recessive disorders (e.g., spinal muscular atrophy)

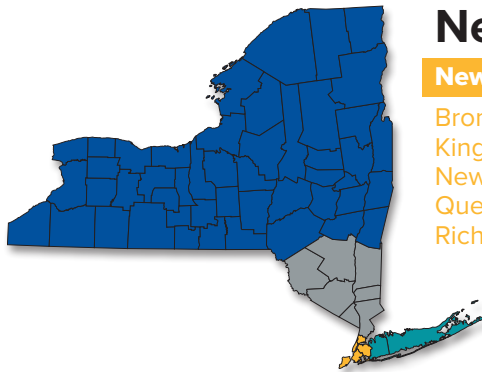
To see if you qualify for PGD testing, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical Program. For more information on Empire Plan Center of Excellence Programs, please read the publication *Reporting On: Center of Excellence Programs*, which is available on NYSHIP Online or from your HBA.

Empire Plan Participating Provider Directory Changes

You may notice some changes to your 2017 *Empire Plan Participating Provider Directories*. Due to size, directories for the following states have been divided into different versions:

- **New York.** There are four directories available: New York City, Hudson Valley, Long Island and Upstate New York. Massachusetts and Vermont, which were previously included in the Upstate New York directory, are now separate directories.
- **Florida.** There are two directories available: Northern Florida and Southern Florida.
- **North Carolina and South Carolina.** These states were previously combined into one directory and are now separate versions.

See the graphics below for county-specific listings in each version.



New York

New York City

Bronx
Kings
New York
Queens
Richmond

Long Island

Nassau
Suffolk

Hudson Valley

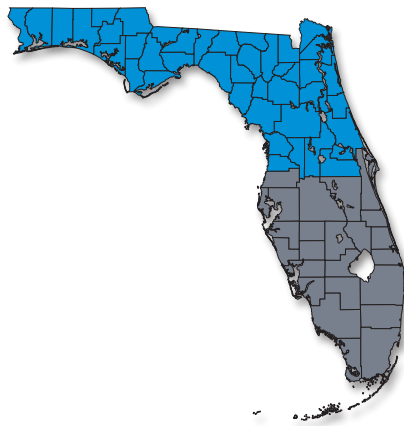
Dutchess
Orange
Putnam
Rockland
Sullivan
Ulster
Westchester

Upstate

Albany
Allegany
Broome
Cattaraugus
Cayuga
Chautauqua
Chemung
Chenango
Clinton
Columbia
Cortland
Delaware
Erie
Essex
Franklin
Fulton

Genesee
Greene
Hamilton
Herkimer
Jefferson
Lewis
Livingston
Madison
Monroe
Montgomery
Niagara
Oneida
Onondaga
Ontario
Orleans
Oswego

Otsego
Rensselaer
Saratoga
Schenectady
Schoharie
Schuyler
Seneca
St. Lawrence
Steuben
Tioga
Tompkins
Warren
Washington
Wayne
Wyoming
Yates



Florida

Northern

Alachua
Baker
Bay
Bradford
Calhoun
Citrus
Clay
Columbia
Dixie
Duval
Escambia
Flagler
Franklin
Gadsden

Gilchrist
Gulf
Hamilton
Hernando
Holmes
Jackson
Jefferson
Lafayette
Lake
Leon
Levy
Liberty
Madison
Marion

Nassau
Okaloosa
Orange
Putnam
Saint Johns
Santa Rosa
Seminole
Sumter
Suwannee
Taylor
Union
Volusia
Wakulla
Walton
Washington

Southern

Brevard
Broward
Charlotte
Collier
DeSoto
Glades
Hardee
Hendry
Highlands
Hillsborough
Indian River
Lee
Manatee
Martin
Miami-Dade
Monroe
Okeechobee
Osceola
Palm Beach
Pasco
Pinellas
Polk
Sarasota
St. Lucie

In compliance with New York State law, languages spoken by providers and/or their staff and provider hospital affiliations have been added to the New York directories.

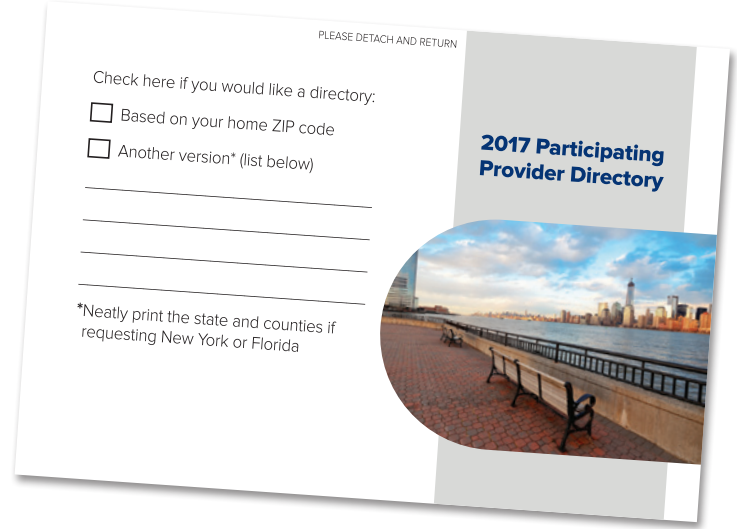
You can obtain a printed directory by returning the participating provider directory request postcard you receive in the mail. If you would like to receive a directory for a different state or region than the one based on your home ZIP code, simply write the name of the version you would like on the line provided. For New York or Florida, please also specify the county. You also can get a directory by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and pressing or saying 1 for the Medical Program. A directory will be mailed within 2-4 weeks of your request. In addition, customer service representatives can provide a personalized directory.

To find an Empire Plan participating provider online, go to www.cs.ny.gov/employee-benefits. Choose your group and plan, if prompted, and select Find a Provider. You can then choose from one of the following programs: Hospital, Medical/Surgical, Mental Health and Substance Abuse or Prescription Drug.

New and Improved Online Participating Provider Directories

Medical/Surgical Program: UnitedHealthcare's (UHC's) Empire Plan online provider directory has been redesigned to make it easier to search for a provider in the Medical/Surgical Program. The directory now has:

- The ability to work on any device (computer, tablet, phone)
- Easier to read search menus and results pages
- New search categories, such as People, Places, Tests and Imaging, Services and Treatments and Care by Condition
- Search results that can be further narrowed by location, subspecialty, language, gender or hospital affiliation*



You can access the UHC website on NYSHIP Online at www.cs.ny.gov/employee-benefits. Choose your group and plan, if prompted. From the NYSHIP Online homepage, select Find a Provider and scroll to the Medical/Surgical Program.

Hospital Program: Empire BlueCross BlueShield (EBCBS) has enhanced their online provider directory search tool to make it easier for you to find a facility in the Hospital Program that best meets your needs. You can now:

- Get directions and see maps showing search results
- Create and email personalized directories
- Find Blue Distinction Centers that specialize in Bariatric Surgery, Cardiac Care, Complex & Rare Cancers, Knee & Hip Replacements, Maternity Care, Spine Surgery and Transplants
- Receive answers to common questions

To access the EBCBS website on NYSHIP Online, select Find a Provider and scroll to the Hospital Program.

* **Note:** Be sure to check the online listings for the Plan's hospital network to confirm it is in The Empire Plan network.

BlueCard Worldwide Is Now Blue Cross Blue Shield Global Core

The Empire Plan program for hospital care outside of the United States has changed its name from BlueCard Worldwide to Blue Cross Blue Shield Global Core. Along with the name change, the program has updated and rebranded its website. The program itself, though, has not changed. You can still contact the Blue Cross Blue Shield Global Core Service Center to find a participating facility at 1-800-810-BLUE (1-800-810-2583) or, if calling from outside the United States, you can make a collect call to 1-804-673-1177.

To view a list of participating providers in a specific area, go to www.bcbsglobalcore.com and register for an account or log into your existing account. If you had an account on the previous site for BlueCard Worldwide, your login and password data will be the same on the new site. And if you have the old site bookmarked, the old URL will automatically redirect you to the new one.

Filing a claim

When filing a claim for reimbursement for services received at a foreign hospital, use the international claim form located on the Blue Cross Blue Shield Global Core website and send an itemized, original hospital bill in English or with a translation, if possible, and your Empire Plan identification number to the Blue Cross Blue Shield Global Core Service Center at:

Service Center
PO Box 2048
Southeastern, PA 19399

You also may submit your claim through the Blue Cross Blue Shield Global Core Service Center website or mobile app.

For more information about traveling with the Plan, please read the publication *On the Road with The Empire Plan* on NYSHIP Online.



Liberty Medical Now Known as Edgepark Medical Supplies

Effective July 10, 2017, Liberty Medical, the diabetic supply vendor for Empire Plan enrollees with primary coverage, was purchased by Edgepark Medical Supplies. Other than the name change, Empire Plan enrollees will not experience any changes during this transition.

Edgepark will use your previous information that was on file with Liberty to ensure a smooth ordering process. When you place your first order, Edgepark will review your information with you to verify it is correct. Also, 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.

If you have any questions on how to place your order, contact Edgepark through The Empire Plan Diabetic Supplies toll-free number at 1-888-306-7337. For 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 Program.

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	<p>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</p>
PRESS OR SAY 2	<p>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</p>
PRESS OR SAY 3	<p>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: ets.valueoptions.com/OnlineClaimSubmission</p>
PRESS OR SAY 4	<p>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</p>
PRESS OR SAY 5	<p>Empire Plan NurseLineSM: Administered by UnitedHealthcare Registered nurses are available 24 hours a day, seven days a week to answer health-related questions.</p>

New Address for Beacon Health Options, Inc.



The Mental Health and Substance Abuse Program, administered by Beacon Health Options, Inc., has a new address for claims form submissions. Claims 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, Inc.
P.O. Box 1850
Hicksville, NY 11802

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

Reminders

Update to Free Identity Protection Services

Anthem BlueCross BlueShield, the parent company of The Empire Plan Hospital Program administrator, offers free identity protection services to all current Empire Plan enrollees through AllClear ID. If you received an email from AllClear ID stating that your identity protection coverage has expired or is expiring, you may reenroll in these services free of charge if you are a current Empire Plan enrollee or have Empire Plan coverage secondary to Medicare. For more information, go to anthemcares.allclearid.com or call 1-855-227-9830 Monday through Saturday from 7 a.m. to 7 p.m. Eastern time.

Annual Notice of Mastectomy and Reconstructive Surgery Benefits

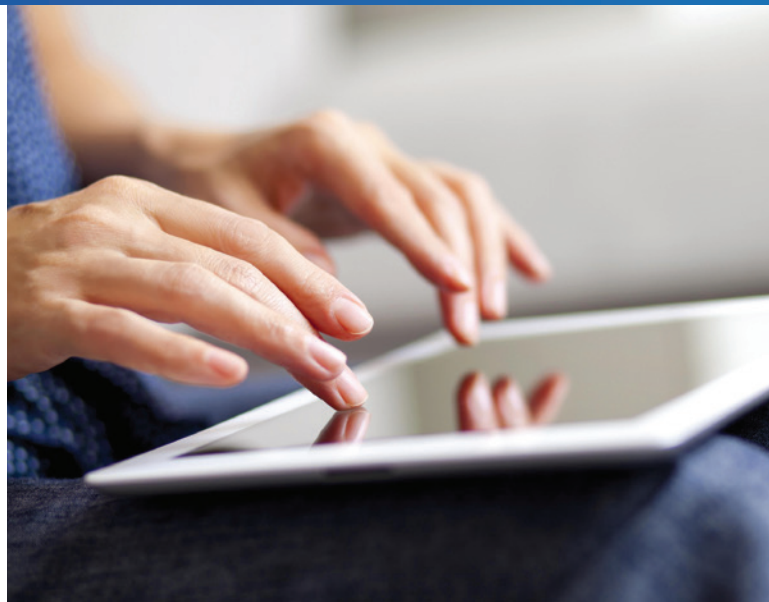
The Empire Plan covers inpatient hospital care for lymph node dissection, lumpectomy and mastectomy for treatment of breast cancer for as long as the physician and patient determine hospitalization is medically necessary. The Plan covers all stages of reconstructive breast surgery following mastectomy, 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 press or say 1 for 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 Reports* and *Certificate Amendments*.

Contraceptive Services

New York State law requires insurance providers to offer at least one U.S. Food and Drug Administration-approved female contraceptive method and sterilization procedure with no copayment, deductible or any other out-of-pocket cost. Empire Plan in-network benefits are compliant with New York State laws regarding contraceptives. Level 1 brand female contraceptives without a generic available are covered under The Empire Plan Prescription Drug Program with no out-of-pocket costs. All other



covered contraceptive drugs are subject to copayment and any applicable ancillary charges. Beginning on January 1, 2018, after an initial dispensing of a three-month supply, dispensing of the same contraceptive covered by the Plan will be allowed for the entire prescribed supply, up to 12 months.

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. 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 visit the website.

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 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 Program to request a copy.

Explanation of Benefits and Prescription History

When UnitedHealthcare (Medical/Surgical Program), Empire BlueCross BlueShield (Hospital Program) or Beacon Health Options (Mental Health and Substance Abuse Program) provide services to an enrollee or dependent covered under The Empire Plan, an Explanation of Benefits (EOB) will either be sent directly to the enrollee and/or dependent or be available on the administrator's website, depending on the program.

UnitedHealthcare (UHC) – For the Medical/Surgical Program, enrollees and dependents (who are 13 years of age and older) will receive an EOB from UHC in the mail. Claim information can also be viewed online at www.myuhc.com. If logging in for the first time, you will need either your Empire Plan member number and group number (30500) or your Social Security number and ZIP code to register. Once you are logged in, you can elect to stop receiving paper EOBs in the mail and instead receive them electronically by clicking on Account Settings and changing your mailing and email settings. For questions or to request a copy of an EOB, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical Program.

Note to current users: You should receive a series of emails from UHC this month as they work to implement a new, enhanced sign-in process with additional security features. These emails are to assist enrollees with the change and to prompt the enrollee to sign in and change their user ID.

Empire BlueCross BlueShield (EBCBS) – For the Hospital Program, EBCBS will send an EOB to the enrollee or dependent (who is 18 years of age or older) if the patient's liability is more than the required copayment. EBCBS will not send an EOB if the patient has no liability to make a payment or if the only liability is a required copayment. In cases where there is no liability above the required copayment, you can get an electronic copy of the EOB on the EBCBS website at www.empireblue.com. If logging in for the first time, you will need to register and choose a user ID and password. For questions or to request an EOB, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program.

Beacon Health Options – For the Mental Health and Substance Abuse Program, enrollees and dependents (regardless of age) will receive an EOB from Beacon in the mail. Claim information can also be viewed online at www.achievesolutions.net/empireplan. If logging in for the first time, you will need to register and choose a user ID and password. For questions or to request a copy of an EOB, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the Mental Health and Substance Abuse Program.

Prescription History

The Prescription Drug Program does not issue EOBs, but you can access your prescription drug history through the CVS Caremark website. Go to www.empireplanrxprogram.com and select the CVS Caremark link. If logging in for the first time, you will need to register using the benefit ID number on your benefit card. Once logged in, select Prescription History from the Prescription tab. The Prescription History page offers several sorting options, such as date range and cost.

Insurance Fraud

Please be sure to check your EOBs regularly. EOBs show what the Plan was billed for, what the Plan paid and what, if anything, you owe. If anything looks inaccurate or suspicious, call The Empire Plan immediately at 1-877-7-NYSHIP (1-877-769-7447) and choose the applicable program. If a medical provider charges for services that were not rendered, they could be committing health insurance fraud. After you file a report, an investigation will be performed to determine the circumstances of the billings and whether the billings may be considered fraudulent or abusive in nature. For more information about safeguarding your health insurance benefit, please read the publication *Special Report on Health Insurance Fraud* on NYSHIP Online.

Medicare & NYSHIP

Medicare Part B Reimbursement Update

The Centers for Medicare and Medicaid Services (CMS) establishes the Part B premium each year after taking the annual Social Security cost of living adjustment (COLA) into account. For 2017, CMS established many different Medicare Part B premiums because of the federal “hold harmless” protections (for more information go to Medicare.gov).

Since NYSHIP does not have access to NYSHIP retirees’ and dependents’ Social Security allowances, COLA information or specific Medicare Part B premium charges, NYSHIP is currently unable to reimburse the exact Part B standard premium for everyone. As an interim step, NYSHIP developed three monthly reimbursement amounts based upon the date of Medicare Part B enrollment (see chart below), which accommodates many of our eligible enrollees.

Medicare Part B Enrollment Date	Reimbursement in 2016	Reimbursement in 2017
Prior to January 1, 2016	\$104.90	\$109.00
January 1, 2016, through December 31, 2016	\$121.80	\$125.90
January 1, 2017, or after*	n/a	\$134.00

* NYSHIP automatically reimburses the full Medicare Part B premium for this group.

In addition to individuals who enroll in Part B for the first time in 2017, the following individuals will be reimbursed \$134.00 per month:

- Individuals not receiving Social Security benefits
- Individuals billed directly for Part B premiums
- Individuals paying a Medicare Part B Income-Related Monthly Adjustment Amount (IRMAA)

As a next step, the Department of Civil Service is pursuing a data sharing agreement with the Social Security Administration (SSA), the entity responsible for Medicare enrollment, to receive premium information electronically. Once this is established, NYSHIP will notify each affected enrollee and will

retroactively reimburse them for the difference, if the amount paid to SSA is higher than the amounts the Department has reimbursed.

The data sharing agreement will also assist the Department with the processing of Medicare Part B IRMAA refunds for eligible enrollees and/or their covered dependents. It could eliminate the need for employee-provided documentation and significantly improve the timeliness of IRMAA refunds.

Medicare Part B Reimbursement for International Enrollees

NYSHIP reimburses the cost of Medicare Part B for its enrollees and dependents who are eligible for Medicare-primary coverage. However, Medicare does not provide benefits outside of the country. If an enrollee incurs medical expenses outside the United States, NYSHIP pays as primary insurer whether or not the individual is enrolled in Medicare.

Effective October 1, 2017, NYSHIP is changing its policy and will reimburse enrollees and dependents who reside outside the United States for their Medicare Part B premium if they remain enrolled in Medicare.

When Medicare-eligible enrollees notify the Social Security Administration (SSA) that they will be residing outside the United States, the SSA sends the enrollees forms that must be signed and returned indicating their desire to continue or decline Medicare coverage. Enrollees are also informed by the SSA that if they decline coverage and later return to the United States and wish to reenroll in Medicare, they must wait until Medicare’s next general enrollment period and pay penalties for each year they and/or their eligible dependents are not enrolled in Medicare.

Under NYSHIP's new policy, individuals can remain enrolled in Medicare and avoid associated penalties should they return to the United States to seek care.

If you are a Medicare enrollee who resides outside the country and have questions about the Medicare Part B reimbursement, call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 Monday through Friday from 9 a.m. to 4 p.m. Eastern time.

Arriva Medical No Longer a Part of the Empire Plan Network for Medicare-primary Enrollees

Effective June 23, 2017, Arriva Medical, a provider of diabetic testing supplies, no longer participates in The Empire Plan network, since their contract with Medicare has not been renewed.

If you or a dependent is Medicare primary and received diabetic supplies from Arriva, you may have received notice of this change. To receive the maximum benefits available, you must use a Medicare contract supplier for your diabetic testing supplies and obtain a new prescription from your doctor. Plan ahead before you run out of supplies. By using a Medicare-contracted supplier, you will continue to receive a paid-in-full benefit for testing supplies. Once Medicare has paid their portion for your covered supplies, UnitedHealthcare will send you a check for the balance.

To find a Medicare contract supplier online, follow these steps:

1. Go to [Medicare.gov/supplierdirectory](https://www.Medicare.gov/supplierdirectory)
2. Enter your ZIP code
3. Click Go
4. Choose Mail-Order Diabetic Supplies in the Competitive Bid Categories section
5. Click the Search button at the bottom of the screen
6. If you would like to find a supplier who offers a specific brand of diabetic testing supplies, follow the steps above and:
 - Enter the brand in the Search for model (brand) box on the right of the screen
 - Click the Update Results button

You also may use a pharmacy or store that is enrolled with Medicare for your diabetic testing supplies.

If you have questions or need further assistance identifying a Medicare contract supplier, you can call 1-800-MEDICARE (1-800-633-4227) and a Medicare customer service representative will assist you. TTY users should call 1-877-486-2048.

For questions regarding The Empire Plan's benefit for diabetic supplies, call 1-877-7-NYSHIP (1-877-769-7447). Press or say 1 for the Medical Program from the main menu, then Plan Benefits (Option 1) to reach Customer Care.

Note: Empire Plan enrollees or dependents who are Plan primary are not impacted by this change.

New Medicare Beneficiary Identifier for Medicare Cards

In an ongoing effort to fight medical identity theft and fraud, the Centers for Medicare and Medicaid Services (CMS) has been mandated to remove Social Security Numbers (SSNs) from all Medicare cards by April 2019. A new Medicare Beneficiary Identifier (MBI) will replace the SSN-based Health Insurance Claim Number (HICN) on new Medicare cards. Beginning in April 2018, CMS will start mailing the replacement Medicare cards with the MBI to existing Medicare enrollees.

Each MBI is a unique, randomly-generated, 11-character number made up only of numbers and uppercase letters. The characters are "non-intelligent," which means they don't have any hidden or special meaning. The new MBI will help protect private health care and financial information and will be coordinated with the Social Security Administration and health care providers. Additionally, the Employee Benefits Department is looking at any impact the new MBI will have for NYSHIP enrollees and will communicate any new information in future *Empire Plan Reports*.

Medicare enrollees may start using their new Medicare cards and MBIs as soon as they get them.

For more information call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

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

NY Active Empire Plan Report – September 2017

Change 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. 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.

This Report was printed using recycled paper and environmentally sensitive inks.

NY Active Empire Plan Report - 9/17



NY1230

Mammogram Coverage

As of January 1, 2017, the New York State Breast Cancer Detection law expanded paid-in-full (i.e., no deductible, coinsurance or copayments) mammography coverage to include:

- Additional breast cancer screenings (beyond an initial screening mammogram)
- Diagnostic mammograms
- Breast ultrasounds
- Magnetic resonance imaging (MRI)

The new law applies to services rendered by in-network providers for all individuals, regardless of age, sex, medical history or whether you received services in or outside New York State.

Effective February 20, 2017, 3-D mammograms are also a covered service with no copayment when provided by an in-network provider. Non-network 3-D mammogram services are also covered, but are subject to deductible and coinsurance.

If you have a family history of breast cancer, speak to your OB/GYN or primary care physician about how often you should be screened.

For more information, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical Program.