New York State Health Insurance Program (NYSHP) for Active Employees, Retirees, Vested, Dependent Survivors, their enrolled Dependents, COBRA and Young Adult Option Enrollees enrolled through Participating Agencies (PA) with Empire Plan benefits
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, visit www.cs.ny.gov. Go to Benefit Programs, then NYSHIP Online. Next, 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:

“Ininfertility 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.
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. Go to Benefit Programs, then NYSHIP Online. 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, subspeciality, language, gender or hospital affiliation*

You can access the UHC website on NYSHIP Online at www.cs.ny.gov. Go to Benefit Programs, then NYSHIP Online. 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 Edgarpark Medical Supplies

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

Edgarpark will use your previous information that was on file with Liberty to ensure a smooth ordering process. When you place your first order, Edgarpark 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 Edgarpark 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.
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 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.
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.

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), Beacon Health Options (Mental Health and Substance Abuse Program) or CVS Caremark (Medicare Rx Prescription Drug 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.

CVS Caremark – If you are Medicare primary, you can register to receive a monthly EOB online with Electronic Explanation of Benefits (eEOB). With eEOB, you will receive a monthly email with a link to view your EOB statement. To enroll, go to www.empireplanrxprogram.com and select the CVS Caremark link. If you are logging in for the first time, you will need to register using your prescription drug benefit ID number found on your Empire Plan Medicare Rx benefit card. For questions or to request a paper copy of an EOB, call 1-877-7-NYSHIP (1-877-769-7447) and press or say 4 for the Prescription Drug Program.

Prescription History for Plan Primary and Active Enrollees
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.
## 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 | 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: nyro.optummmessenger.com/public/opensubmit |
| --- | --- |
| 1 | **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 |
| 2 | **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 |
| 3 | **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 |
| 4 | **Empire Plan NurseLineSM: Administered by UnitedHealthcare**  
Registered nurses are available 24 hours a day, seven days a week to answer health-related questions. |
| 5 | **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 |
When You Must Call The Empire Plan
Call toll free 1-877-7-NYSHIP (1-877-769-7447).

The Empire Plan Hospital Benefits Program Empire BlueCross BlueShield, www.empireblue.com
Call for information regarding hospital and related services.

YOU MUST CALL AND PRESS OR SAY 2
Benefits Management Program for Preadmission Certification – You must call before a maternity or scheduled hospital admission, within 48 hours after an emergency or urgent hospital admission, and before admission or transfer to a skilled nursing facility (includes rehabilitation facilities).

YOU MUST CALL AND PRESS OR SAY 2
Centers of Excellence for Transplants Program – You must call before a hospital admission for the following transplant surgeries: bone marrow, cord blood stem cell, heart, heart-lung, kidney, liver, lung, pancreas, pancreas after kidney, peripheral stem cell and simultaneous kidney/pancreas. Call for information about Centers of Excellence.

The Empire Plan Medical/Surgical Benefits Program UnitedHealthcare, www.myuhc.com
Call for information on benefits under Participating Provider, Basic Medical Provider Discount and Basic Medical Programs, predetermination of benefits, claims and participating providers.

Managed Physical Medicine Program/MPN – Call for information on benefits and to find MPN network providers for chiropractic treatment, physical therapy and occupational therapy. If you do not use MPN network providers, you will receive a significantly lower level of benefits.

YOU MUST CALL AND PRESS OR SAY 1
Benefits Management Program for Prospective Procedure Review of MRI, MRA, CT, PET Scans and Nuclear Medicine Tests – You must call before having an elective (scheduled) procedure or nuclear medicine test.

YOU MUST CALL AND PRESS OR SAY 1
Home Care Advocacy Program (HCAP) – You must call to arrange for paid-in-full home care services, enteral formulas, diabetic shoes and/or durable medical equipment/supplies. If you do not follow HCAP requirements, you will receive a significantly lower level of benefits. You must also call for HCAP approval of an external mastectomy prosthesis costing $1,000 or more.

YOU MUST CALL AND PRESS OR SAY 1
Infertility Benefits – You must call for prior authorization for covered Qualified Procedures, regardless of provider. Call for information about infertility benefits and Centers of Excellence.

YOU MUST CALL AND PRESS OR SAY 1
Center of Excellence for Cancer Program – You must call to participate in The Empire Plan Center of Excellence for Cancer Program.

The Empire Plan Mental Health and Substance Abuse Program Beacon Health Options Inc.,
www.achievesolutions.net/empireplan
To ensure the highest level of benefits, call before seeking services from a covered mental health or substance use provider, including treatment for alcoholism. The Clinical Referral Line is available 24 hours a day, every day of the year. By following the Program requirements for network coverage, you will receive the highest level of benefits. If you contact the Program before you receive services, you have guaranteed access to network benefits.

YOU MUST CALL AND PRESS OR SAY 3
You must call before receiving services for: Applied Behavior Analysis, Psychological Testing, Electroconvulsive Therapy and voluntary admissions to non-network facilities. In an emergency, go to the nearest hospital emergency room. You or your designee must call the Program within 48 hours of an admission for emergency care or as soon as reasonably possible.

The Empire Plan Prescription Drug Program CVS Caremark
For the most current list of prior authorization drugs, call the Program or go to www.cs.ny.gov.
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.