

Empire Plan Report

October 2020 • PA Excelsior Plan

New York State Health Insurance Program (NYSHIP) for Active Employees, Retirees, Vestees and Dependent Survivors enrolled in The Excelsior Plan through Participating Agencies (PAs), their enrolled Dependents and for COBRA Enrollees and Young Adult Option Enrollees with their Excelsior Plan benefits

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What's New

This *Report* summarizes the changes to your benefits and coverage under the New York State Health Insurance Program (NYSHIP) and The Excelsior Plan.

The Excelsior Plan is an Empire Plan option offered to Participating Agencies (PAs). The Excelsior Plan uses The Empire Plan's broad network of providers for hospital, medical/surgical, mental health and substance use and pharmacy services.

This *Report* includes information about:

- The medical provider national network expansion (page 4)
- Telehealth coverage (page 5)
- Disease Management Programs (page 9)
- Enrolling domestic partners (page 11)

COVID-19 Information

COVID-19 Testing and Diagnosis

COVID-19 diagnostic testing is available to all individuals who reside or work in New York State. For up-to-date information on COVID-19, including guidance on testing and how to find a test site near you, visit the NYS Department of Health's website at https://coronavirus.health.ny.gov/home. You can also call the NYS COVID-19 Hotline at 1-888-364-3065 for questions regarding eligibility and testing.

In compliance with NYS and federal mandates:

- COVID-19 testing is available at no cost to you through your medical provider or through a drive-through test site. Testing is covered under the Medical/Surgical Program administered by UnitedHealthcare.
- All diagnostic tests (including antibody tests), office visits and urgent care or emergency department visits related to diagnosing COVID-19 are covered in full under the Plan.

These mandates apply to participating providers and non-network providers and are subject to expiration dependent upon the authorizing law or regulation.

For more information on COVID-19 testing, or if you feel you were charged a copayment for COVID-19-related services in error, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the prompt for the appropriate Program.

COVID-19 Mental Health Services

During COVID-19, the Plan is offering the following mental health services:

- Plan enrollees and covered dependents who registered for Beacon Health Options myStrength COVID-19 website and app content have continued access at no cost through December 31, 2020. myStrength has an extensive library of articles, videos and eLearning programs that are aimed at helping you navigate new COVID-19 challenges, such as heightened levels of stress and/or anxiety and parental challenges as families work and learn at home.
- Recognizing that the emotional and psychological well-being of essential workers is critically important in the continuing fight against COVID-19, the NYS Department of Financial Services (DFS) promulgated an emergency regulation in May 2020 to address the mental health needs of this population. In accordance with these requirements, all out-of-pocket costs, including copayments, deductibles and coinsurance, are waived for in-network mental health services for New York State's frontline essential workers.

For more information on mental health services for essential workers and to confirm the waiver is still in effect, see the DFS' guidance at www.dfs.ny.gov/industry_guidance/circular_letters/cl2020_10.

COVID-19-related Changes to Prescription Drug Program

To help ensure that you and your covered dependents have access to your medications during the pandemic, the Prescription Drug Program has issued the following temporary changes:*

Emergency Refills: A maximum of three emergency, 30-day refills per prescription are available, with select exceptions.

Prior Authorization Extension: Prior Authorizations (PAs) for most medications are extended through December 31, 2020. For example, if a PA is set to expire on November 1, the expiration date will be extended to December 31. Ninety-day extensions do not apply to controlled substances, medications that involve a defined duration or use or a maximum duration of therapy.

If you have questions about your prescription drug benefits call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 4 for the Prescription Drug Program.

* Please contact the Prescription Drug Program to confirm that these COVID-19-related changes are still in effect.

Telemedicine Visits Through LiveHealth Online

Earlier this year, the Plan began offering a new telemedicine benefit to help you and your covered dependents access health care services remotely. Through Empire BlueCross's partnership with LiveHealth Online, you can stay home and have a telephone or video visit with a board-certified doctor or licensed therapist on your smartphone, tablet or personal computer.

If you are concerned about leaving your home to receive care or your ability to access care during the pandemic, the Plan will cover telemedicine visits through LiveHealth Online at no cost through December 31, 2020.

Note: When scheduling a visit with LiveHealth Online, it is important to enter your name and Excelsior Plan ID number exactly as it appears on your card, otherwise the claim may not be processed correctly.

To begin the registration process for remote care, go to www.empireblue.com/nys and select the link to LiveHealth Online. If you need assistance with the registration process or have questions, call LiveHealth Online at 1-888-LiveHealth (1-888-548-3432). LiveHealth Online has representatives available 24 hours a day, seven days a week. You may also call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program. See *Telehealth Coverage* on page 5 for information on telehealth visits with your own doctor or therapist.

COVID-19 Telephone Scams

The Department of Civil Service is aware that third party companies, unaffiliated with the Plan, are calling enrollees with fraudulent offers, such as to obtain no-cost medications and to upgrade health benefits. **Do not provide your personal information to these companies; they are not authorized by the Plan.**

How to Protect Yourself

It is important to know the difference between a phone scam and a legitimate call from the Plan.

The Plan will contact you:

- To follow up on a recent customer experience or an inquiry you made about your benefits, eligibility or claim status
- About your prescription order status or to remind you to refill a prescription
- If you are enrolled in a specific program (e.g., Future Moms program, Disease Management Programs)

To confirm your identity, the Plan will ask for one of the following: your Excelsior Plan ID number, your date of birth, your mailing address or the last four numbers of your Social Security number.

The Plan will never ask for your:

- Full Social Security number
- Credit card number or personal bank account information (except when ordering from the specialty or mail service pharmacies)
- Private health information (e.g., medical history, specific treatments you received)

If you believe you were the victim of a phone scam involving your health benefits information, contact the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the prompt for the appropriate Program.

Excelsior Plan Changes

Medical Provider National Network Expansion

Effective January 1, 2021, enrollees and covered dependents will have nationwide access to UnitedHealthcare's (UHC's) network of medical providers. The Participating Provider Program network will expand from 430,000 to over 1.2 million physicians, laboratories and other providers, such as physical therapists, occupational therapists and chiropractors, located throughout the United States. Note: The Excelsior Plan uses the same network of providers as The Empire Plan.

Why Should You Use a Participating Provider?

When you use a participating provider, your outof-pocket expenses are lower – you pay only your copayment(s) (if applicable) at the time of your visit. Participating providers include doctors, nurse practitioners, physical therapists, occupational therapists, radiologists, diagnostic laboratory services, as well as outpatient surgical locations, urgent care centers, convenience care clinics and cardiac rehabilitation centers.

If you use a nonparticipating provider, your costs may be much higher. Covered expenses are reimbursed under the Basic Medical Program and may be subject to deductible and/or coinsurance. You or the provider must submit a claim for reimbursement for covered expenses to UnitedHealthcare. Any reimbursement will be sent to you, and you are responsible for paying the provider.

To ensure the highest level of benefits, always check that the provider participates in the the UHC network for The Empire Plan before you receive services. (**Note:** If you or a dependent are a Medicare-primary enrollee, you must ensure the provider participates in both Medicare and the UHC network for The Empire Plan.) When you see a new provider, be sure to show them your Excelsior Plan benefit card.

How to Find a Participating Provider in the Expanded Network

On or after January 1, 2021, you can find a participating provider in the expanded network online at www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if



prompted, and from the NYSHIP Online homepage, select Find a Provider. Scroll to the Medical/Surgical Program and select the link to the online directory. You may also call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/ Surgical Program and a customer service representative will assist you with locating a provider. If you live in an area where the network will be expanding, you will receive a letter from UnitedHealthcare detailing the 2021 expansion within the next month. **Note:** Printed Participating Provider Directories will not reflect the expanded network until the August 2021 editions are available.

New Reporting On Network Benefits

The Reporting On Network Benefits publication is the newest edition to the Reporting On series for Excelsior Plan enrollees.

The publication explains the benefits available to you and your covered dependents when you use participating providers for services received from Medical/Surgical, Hospital, Mental Health and Substance Abuse and Prescription Drug Programs. It also describes the benefits and care provided by The Empire Plan's Center of Excellence Programs for Cancer, Transplants and Infertility.

You can access Reporting On Network Benefits online at www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Using Your Benefits and then Publications.

Telehealth Coverage

Telehealth is a tool that allows health care professionals to evaluate, diagnosis and treat patients at a distance using telecommunications technology. Patients can access virtual medical visits using smartphones, tablets or personal computers. All telehealth visits must be conducted using a secure connection that meets HIPAA and confidentiality regulations.

Telehealth visits can be used for many different services, including:

- Behavioral health treatments (such as for anxiety disorders and depression)
- · Chronic disease management
- · Follow-up visits
- Medication management
- Preventive care support (such as for weight loss and smoking cessation)
- Sick visits (such as for sinus infections and suspected exposure to COVID-19)

The Plan covers telehealth visits with participating providers in the Medical/Surgical Program and the Mental Health and Substance Abuse (MHSA) Program. Telehealth visits with a doctor or therapist are subject to the same copayment as in-person visits. Currently, copayments for telehealth visits with participating providers are waived under the NYS Department of Financial Services emergency COVID-19 regulation.* Note: Deductible and coinsurance apply for telehealth visits with nonparticipating providers, except where federal regulations require a cost share waiver for diagnosing COVID-19.

How to Find a Telehealth Provider

You can search online for telehealth participating providers.

Medical/Surgical Program: Go to www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Find a Provider. Scroll to the Medical/Surgical Program and select the link to the online directory. Once you find a provider, call to find out if they offer telehealth services.

MHSA Program: Go to www.cs.ny.gov/employeebenefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior



Plan, if prompted, and from the NYSHIP Online homepage, select Find a Provider. Scroll to the MHSA Program and choose ReferralConnect. On the Provider Search page, type your search criteria in the search toolbar. On the next page under Specialties and Services, select Telehealth Services.

You may also call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/ Surgical Program or 3 for the MHSA Program and a customer service representative will assist you with locating a provider and answer your questions about telehealth coverage.

* Please contact the Medical/Surgical Program or the MHSA Program to confirm that a copayment waiver still applies.

NYSHIP Online Resources

On NYSHIP Online you will find the most up-to-date information about your health care coverage along with recent publications that explain your benefits. To help boost your health care benefits knowledge, a new Resources tab has been added to the NYSHIP Online homepage. There you will find frequently asked questions, terms you should know, assistance on how to read your billing statement and other helpful information. This tab will be updated regularly.

To access NYSHIP Online, go to www.cs.ny.gov/ employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted. If you are looking for publications about your benefits, select Using Your Benefits from the NYSHIP Online homepage and then choose Publications.



Annual Enrollment in Center of Excellence for Cancer Program

The Center of Excellence (COE) for Cancer Program provides paid-in-full coverage for cancer-related expenses received through a nationwide network known as Cancer Resource Services (CRS). Initial enrollment in the Center of Excellence for Cancer Program is mandatory. In addition, The Empire Plan strongly encourages annual reenrollment, although it is not required.

In the Center of Excellence for Cancer Program, you receive paid-in-full benefits for the following services:

- Inpatient and outpatient hospital and physician care related to the cancer treatment and provided in a CRS cancer center
- Cancer clinical trials and related treatment and services recommended and provided by a physician in a CRS cancer center

There is also a Center of Excellence Program travel allowance. To be eligible, you must be enrolled in the Center of Excellence for Cancer Program and travel within the United States.

To enroll or renew your enrollment in the Center of Excellence for Cancer Program, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program. Then press or say 5 for the Cancer Resource Services (CRS) nurse consultant. CRS nurse consultants can answer your cancer-related questions and help you

understand your cancer diagnosis. Call between 8 a.m. and 8 p.m. Eastern time, Monday through Friday (except holidays).

Center of Excellence for Transplants Program Open to All Enrollees

As of January 1, 2020, the Center of Excellence (COE) for Transplants Program benefit is offered to all Plan enrollees regardless of whether the Plan is their primary insurance. Medicare-primary enrollees are also eligible.

Participation in the Center of Excellence for Transplants Program is voluntary but benefits under the Program are available only when you are enrolled in the Program and your transplant services are preauthorized by the Hospital Program administrator.

Under the Center of Excellence for Transplants Program, you receive paid-in-full benefits, including inpatient and outpatient hospital services and physician care related to the following types of transplants: bone marrow, cord blood stem cell, heart, heart-lung, kidney, liver, lung, pancreas, pancreas after kidney, peripheral stem cell, simultaneous kidney/pancreas. You are also eligible for a travel allowance for travel within the United States.

Centers of Excellence

The Centers of Excellence for Transplants are a national network of transplant providers who have demonstrated quality care and, overall, better patient results. They include:

- BlueCross BlueShield Association's Blue Distinction Centers for Transplants (See EBC Blue Distinction Centers on page 8 for more information on the Centers.)
- Anthem Centers of Medical Excellence for Transplants
- Facilities in New York State that have been identified by the Hospital Program administrator for their excellence in kidney transplantation

For preauthorization or a complete list of nationwide facilities that participate in the Center of Excellence for Transplants Program, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program.

Maternity Preadmission Requirement Eliminated

As of January 1, 2020, you are no longer required to call the Hospital Program before the birth of a child. You are still required to call if you are admitted to the hospital during your pregnancy due to complications or for any reason other than the delivery of the baby. It is also recommended that you call if you or your baby are hospitalized for more than 48 hours for a vaginal delivery or 96 hours for a cesarean delivery.

If you have questions about when to call the Plan during your pregnancy, please call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program.

Future Moms Program

Pregnancy is an exciting and special time, but it can also be a little overwhelming. As a part of your health plan, you can sign up for the Future Moms program – a pregnancy support program for expectant mothers. The program is designed to answer your questions, help you make good choices and ensure you follow your health provider's plan of care.

When you sign up for the Future Moms program you receive:

- · Your own maternal health coach
- Access to a registered nurse helpline 24 hours a day, seven days a week
- Helpful and informative materials throughout your pregnancy on topics including your baby's development and growth, fitness and nutrition, feeding your baby, choosing the right doctor and infant safety
- Breastfeeding support from a lactation consultant, counselor or registered dietitian on LiveHealth Online

To enroll in the Future Moms program, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program. After you enroll, you will be given a toll free number you can call at any time for information relating to your pregnancy or delivery or if you have questions about your benefits or course of treatment. Nurses are available 24 hours a day, seven days a week.

Once enrolled, you can sign up for breastfeeding support on LiveHealth Online at livehealthonline.com (or use the free mobile app). Create an account and enter your Excelsior ID number from your benefit card. Select Future Moms with Breastfeeding Support to view the available professionals. Free face-to-face video visits are available seven days a week, including evenings.

Breast Pump Supplier Name Change

Empire Plan breast pump supplier McKesson Patient Care Solutions has been acquired by AdaptHealth and has been renamed AdaptHealth Patient Care Solutions Breast Pump & Supplies. **Note:** The phone number is the same, but the web address has changed (see below).

The following is the current list of in-network breast pump suppliers:

- AdaptHealth Patient Care Solutions Breast Pump & Supplies: 1-844-727-6667 or pcs.adapthealth.com/products/breast-pumps/
- Byram Healthcare: 1-877-773-1972 or breastpumps.byramhealthcare.com
- Edgepark Medical Supplies: 1-855-504-2099 or www.edgepark.com/faqs_breastpumps
- Medline Industries: 1-833-718-2229 or www.breastpumpsmedline.com

Mothers who choose to breastfeed are covered for the purchase of one double electric breast pump following birth. Breast pumps are available at no cost to the enrollee when they use a participating supplier.

New moms are also covered for comprehensive breastfeeding support and counseling, such as by a lactation consultant, during pregnancy and/or the postpartum period. These services are paid in full when received from a participating provider. See *Future Moms Program* for information regarding online breastfeeding support.

If you have questions about purchasing a breast pump, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program.

EBC Blue Distinction Centers

Empire Blue Cross (EBC) recognizes select hospitals and health care facilities that excel in delivering safe, effective treatment for specialty procedures. Each facility must meet a specific set of rigorous standards to be designated as a Blue Distinction Center (BDC) or a Blue Distinction Center+ (BDC+). These Centers have lower readmission rates, fewer complications and, overall, better patient results.

BDCs and BDCs+ are available for the following specialty procedures:

- · Bariatric weight-loss surgery
- Cardiac care
- Cellular immunotherapy
- Gene therapy
- · Knee and hip replacement
- · Maternity care
- Spine surgery
- Transplants

To find a BDC or a BDC+, go to www.bcbs.com/blue-distinction-center/facility. You can also call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 2 for the Hospital Program and a customer service representative will assist you with locating a BDC or BDC+. For more information, go to www.empireblue.com/ms/bc/centersofmedicalexcellence/home.html.

Expanded Acupuncturist Network

Effective July 1, 2020, the Plan expanded its network of acupuncture providers to include more than 400 acupuncture providers at over 500 locations throughout New York State. The network will continue to grow as new providers contract with the Plan.

Acupuncture involves the insertion of very thin, sterile needles into specific points on the body to stimulate a healing response. The procedure is commonly used to treat chronic pain, headaches/migraines, stress, abdominal pain, anxiety, infertility and many other conditions. While you do not need approval from your primary care physician for acupuncture therapy, it is advised that you consult them before receiving services.



To find a participating acupuncturist online, go to www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Find a Provider. Scroll to the Medical/Surgical Program and select the link to the online directory. Please check the online directory periodically for new providers.

If you are currently seeing an out-of-network acupuncturist who would like to join the network, please ask them to call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program.

Beacon Health Options Acquired by Anthem

Effective March 2, 2020, Beacon Health Options, the Mental Health and Substance Abuse Program (MHSA) administrator, was acquired by Anthem, Inc. The MHSA administrator will still be known as Beacon Health Options, and the benefits, provider networks and services will remain the same.

If you have any questions, please call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program.

Disease Management Programs

The Plan offers a number of Disease Management Programs for Plan-primary enrollees and covered dependents through UnitedHealthcare (UHC), the Medical/Surgical Program administrator, and Beacon Health Options, the Mental Health and Substance Abuse Program administrator. The Programs provide guidance and support if you have been diagnosed with one of the conditions listed below. Participation is voluntary, confidential and available at no additional cost.

UHC Disease Management Programs

UHC offers Disease Management Programs for the following conditions:

- Asthma
- · Cardiovascular disease (CAD)
- Chronic kidney disease (CKD)
- Chronic obstructive pulmonary disease (COPD)
- · Congestive heart failure
- Diabetes

Depending on the severity of your condition, UHC may call you or send a letter inviting you to participate in a Program. If you agree to participate, you will receive informational material to help you understand your condition. If you are identified as high risk, a nurse case manager will be assigned to answer your questions, help manage your condition and supply additional informational material. The nurse may help to coordinate care with the doctor treating your condition, as well as doctors treating any other health conditions you may have.

For more information, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 5 for the NurseLinesM. Nurses are available 24 hours a day, seven days a week.

Beacon Health Options Disease Management Programs

Beacon Health Options offers Disease Management Programs for the following conditions:

- Attention deficit hyperactivity disorder (ADHD)
- Depression
- · Eating disorders

Each Program offers an assessment that you can take online, by telephone or by mail to evaluate your condition. If you choose to participate, you will receive information about symptoms and treatment options. The Program also helps you access treatment and coordinate care among treatment providers. If your condition is severe, Beacon Health Options will invite you to participate in an Intensive Care Management Program.

To learn more about these Programs or take the assessment online, go to www.achievesolutions.net/achievesolutions/en/empire/Home.do. Select the Quick Links Tab at the top of the page and then select your Program of interest. For the assessment, scroll to More On This Topic and choose Take an Assessment.

You can also call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the Mental Health and Substance Abuse Program. Clinicians are available 24 hours a day, seven days a week.

Myuhc.com Update

In early 2021, myuhc.com (the website for the Medical/Surgical Program administrator, UnitedHealthcare) will be updated with a new look and several new features, such as:

- Consistent content display on all your devices (mobile phone, tablet, desktop)
- A personalized dashboard that will provide information specific to your claims experience and benefit plan
- The ability to sort claims history by coverage type, member, year, provider (listed alphabetically) or date range
- An easy-to-understand claims section that shows whether a provider is in or out of network along with a simple breakdown of your medical costs

If you are logging into myuhc.com for the first time, you will need either your Excelsior Plan alternate ID number from your benefit card and group number (30500) or your Social Security number and ZIP code to register. You will then need to create an ID and password to access the website.

UHC Personal Health Messaging System

UnitedHealthcare (UHC), the Medical/Surgical Program administrator, has implemented a secure HIPAA-compliant messaging system that delivers certain documents electronically to Excelsior Plan enrollees. Instead of faxing or mailing information, UHC can now email copies of:

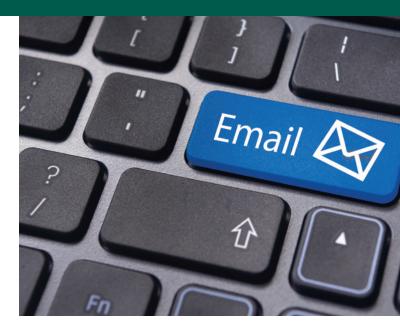
- Predetermination letters
- Appeal responses
- Information request letters
- · Explanation of Benefits
- Checks

To receive a copy of a document electronically, contact the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program. After providing your email address, you will receive an email notification that you have a message waiting in the Personal Health Message Center. Select the Read Your Message link in the email. If you are a first-time user or do not have a myuhc.com account, you will need to create an ID and password to access the message. See *Online Documents* on page 12 for information on certain documents you can view online.

Waiver of Premium

Under certain circumstances, you may be entitled to have your Excelsior Plan health insurance contribution waived for up to one year. (**Note:** A waiver of premium cannot be applied to retiree, dependent survivor or COBRA enrollee premiums.) To qualify for a waiver of your premium, you must be totally disabled as a result of sickness or injury:

- Be on authorized leave without pay or unpaid leave under the Family and Medical Leave Act (FMLA). You are not eligible for a waiver if you are still receiving income through salary, leave accruals, Workers' Compensation or retirement allowance.
- All coverage prior to your unpaid leave must be paid in full.



A waiver of premium is not automatic. You must apply for it, and you must continue to pay your health insurance premiums until you are notified that the waiver has been granted.

You must apply during the period in which you meet the eligibility requirements for a waiver; you may not apply after you return to the payroll, vest, retire or separate from your employer.

To apply for a waiver of premium, complete the newly updated *Application for Waiver of Empire Plan Premium* (PS-452) form. You can access it on www.cs.ny.gov/employee-benefits. Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Forms. Once the application form has been completed, return it to the address on the form. The Employee Benefits Division will notify your employer if your waiver has been granted.

NYSHIP Changes

Domestic Partner Form

The Employee Benefits Division recently updated the NYSHIP Domestic Partner Enrollment Application (PS-425) form (replaces the NYSHIP Domestic Partner Application [PS-427]) with new instructions and a checklist of acceptable proofs. This form has been updated to more clearly explain the application process and requirements for adding an enrollee's domestic partner to coverage.*

To enroll a domestic partner, complete and return form PS-425 and submit the applicable proofs. If you previously had a domestic partner, you will be subject to a one-year waiting period from the termination date of your last domestic partner's coverage before a new one can be enrolled in NYSHIP.

Under Internal Revenue Service (IRS) rules, the fair market value cost of coverage for a domestic partner may be taxable. This amount, referred to as imputed income, is considered by the IRS to be additional income for the enrollee. Check with your HBA to find out how imputed income is reported and for an approximation of the fair market value for domestic partner coverage. You may also ask a tax consultant how enrolling a domestic partner will affect your taxes.

Note: If your domestic partner's status as a federally qualified dependent changes (they newly qualify or no longer qualify), you must notify your HBA and submit a signed and completed *Dependent Tax Affidavit for Domestic Partner Enrollment in NYSHIP* (PS-425.3) form.

NYSHIP dependent coverage for your domestic partner will end on the date your domestic partnership ends or when the domestic partnership requirements are no longer met (when you are no longer financially interdependent or no longer live together). You must complete and submit a *Termination of Domestic Partnership for NYSHIP* (PS-425.4) form within 30 days of the date the relationship ends or can no longer be documented.

To access the domestic partner forms, go to www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted and from the NYSHIP Online homepage, select Forms.

Enrolling "Other" Children

The NYSHIP Statement of Dependence for "Other" Children (PS-457) form has recently been updated to clarify eligibility and document requirements to enroll an "other" child (a child who is not your natural-born child, an adopted child, a stepchild or a child of a domestic partner*) in NYSHIP coverage. NYSHIP allows enrollees to cover eligible dependents by enrolling in Family coverage or adding eligible dependents to existing Family coverage.

You may cover "other" children who live with you and are financially dependent on you. The child must reside permanently in your home and receive more than 50 percent of financial support from you before they are age 19 in order to qualify. Assumption of legal responsibility for the child in place of a parent is no longer listed as a requirement.

To enroll an "other" child, you must file form PS-457 (and file again every two years after enrollment), verify eligibility and provide documentation. You also will need to provide a copy of the dependent's birth certificate along with a completed *PA Health Insurance Transaction Form* (PS-503).

You must provide documentation to certify that you provide more than 50 percent of financial support if the "other" child is under age 19. For information on acceptable forms of proof, see form PS-457.

"Other" Children Age 19 or Older

If enrolling an "other" child age 19 or older, you are now required to submit proof of residence, rather than proof of financial support. However, the eligibility requirements have not changed.

To recertify that a dependent age 19 or older is still an "other" child, you will need to submit form PS-457, provide a copy of the dependent's birth certificate, provide proof of the dependent's residence and submit form PS-503.

You can access both forms at www.cs.ny.gov/ employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Forms.

* Contact your Health Benefits Administrator (HBA) to see if your employer (former employer for retirees) offers coverage to domestic partners.

Reminders



Online Documents

The ability to view documents online is not only convenient, it helps keep you up to date on important information. To help you stay informed, UnitedHealthcare (Medical/Surgical Program), Empire BlueCross (Hospital Program), Beacon Health Options (Mental Health and Substance Abuse Program) and CVS Caremark (Prescription Drug Program) provide access to certain documents on their websites.

UnitedHealthcare (UHC) - You can view HIPAAcompliant medical/surgical claim information and your Explanation of Benefits (EOBs) for yourself and any covered dependent (regardless of the dependent's age) at www.myuhc.com. (A dependent can request a privacy restriction to deny access to their information by contacting UnitedHealthcare.) If logging in for the first time, you will need either your Excelsior Plan ID number from your benefit card 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 choosing Account Settings and then Change Mailing and Email Preferences. You will get an email notification when a new EOB is ready to view. See UHC Personal Health Messaging System on page 10 for information about requesting certain documents through email.

Empire BlueCross (EBC) - To see hospital claim information and your EOB, go to www.empireblue.com/nys/. (Not all dependent information can be viewed by the enrollee. Dependents can give the enrollee and others authorization to view all their information by filling out the Member Release of Information Authorization Form or updating their preferences on the website.) If logging in for the first time, select the person icon at the top of the page and then Register. You will need your Excelsior Plan ID number from your benefit card to register. Once you are logged in, you can elect to stop receiving paper EOBs by selecting Go Paperless and then Email under Benefit Updates and Legal Information. You will get an email notification when a new EOB is ready to view.

Beacon Health Options – You can view mental health and substance use claim information and EOBs for yourself and any covered dependent under the age of 18 at www.achievesolutions.net/empireplan. (Dependents age 18 and over can give others authorization to view their information by filling out the Member Release of Information Form on the website.) Scroll down to Trending Topics and select MemberConnect – Your Link to Claims, Benefits & Coverage Information. If logging in for the first time, you will need to register and choose a user ID and password.

CVS Caremark – You can access prescription drug history for yourself and any covered dependent under the age of 18 at www.empireplanrxprogram.com. (Dependents age 18 and over can give others authorization to view their information in the Family Access section of the website.) Select the CVS Caremark link. If logging in for the first time, you will need to register using your Excelsior Plan 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.

For questions about your online documents, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the prompt for the appropriate Program.

Keep Your Enrollment Record Up to Date

It is important for you to keep us up to date with changes in your life to ensure you receive timely and appropriate information about your health insurance coverage. Your coverage through NYSHIP is a valuable benefit, but it is also costly to provide. By keeping your information up to date and only covering dependents who are eligible, you help to keep costs down for both yourself and the Program.

Inform your Health Benefits Administrator (HBA) in writing of any changes to your enrollment record (address, adding or removing dependents, marital status changes) in a timely manner. (**Note:** If you are divorced or your marriage has been annulled, your former spouse is not eligible for coverage as a dependent as of the date of the divorce, even if a court orders you to maintain coverage.) Your HBA is usually located in your agency's (former agency's for retirees) personnel office. See your NYSHIP *General Information Book* for more information on enrollment changes and applicable deadlines.

Ineligible Dependents

If you fail to inform your HBA of dependent eligibility changes, you may be responsible for repaying all health insurance claims for ineligible dependents as early as the date they became ineligible. Knowingly withholding information regarding the ineligibility of dependents may constitute fraud and may be turned over to the appropriate enforcement agencies for investigation.

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 Excelsior Plan, visit www.cs.ny.gov/employee-benefits/sbc and choose Participating Agency (Excelsior Plan). If you do not have internet access, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/Surgical Program to request a copy.



Annual Notice of Mastectomy and Reconstructive Surgery Benefits

The 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 on 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 Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and press or say 1 for the Medical/ Surgical Program if you have questions about your coverage for implants, breast forms or other prostheses related to breast cancer treatment.

Benefits Management Program requirements apply. See your *Empire Plan Reports* or *At A Glance* for more information.

Contact Information

Call the 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: https://nyrmo.optummessenger.com/public/opensubmit
PRESS OR SAY 2	Hospital Program: Administered by Empire BlueCross 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/forms/
PRESS OR SAY	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: www.achievesolutions.net/empireplan
PRESS OR SAY	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
PRESS OR SAY 5	Empire Plan NurseLine sM : Administered by UnitedHealthcare Registered nurses are available 24 hours a day, seven days a week to answer health-related questions.

The Excelsior 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 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

When You Must Call the Plan

Call toll free 1-877-7-NYSHIP (1-877-769-7447).

The Empire Plan Hospital Benefits Program *Empire BlueCross*, 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 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

Center 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 Program, predetermination of benefits, claims and participating providers.

Managed Physical Medicine Program – Call for information on benefits and to find network providers for chiropractic treatment, physical therapy and occupational therapy. If you do not use 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 MRIs, MRAs, CT Scans, 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

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. Some services require precertification to confirm medical necessity before starting treatment. For a list of those services, call the Plan and press or say 3. From there you can reach the Clinical Referral Line to find out more information about precertification.

The Empire Plan Prescription Drug Program CVS Caremark, www.caremark.com

For the most current list of prior authorization drugs, call the Program or go to www.cs.ny.gov/employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PA and PA Excelsior Plan, if prompted, and from the NYSHIP Online homepage, select Using Your Benefits and then Excelsior Prior Authorization.

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

Change Service Requested

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

• information on page 14.

SAVE THIS DOCUMENT



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

PA Excelsior Plan Report – October 2020

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.

PA Excelsior Plan Report - 10/20



EX0060

Keep Up with Vaccinations and Preventive Care Visits

The COVID-19 pandemic has changed how many of us go about our daily lives. But even during uncertain times, it is important that you do not postpone yearly preventive care visits and vaccinations.

Children

Keeping children up to date on vaccinations protects them from preventable diseases like measles, mumps and polio along with seasonal diseases, like influenza (flu). An annual wellness exam can help ensure your child receives the correct vaccinations. The exam also allows a doctor to assess your child's growth and development and detect any health issues early.

Adults

Scheduling an annual wellness exam can help you avoid potentially serious health conditions, such as high blood pressure and diabetes, and obtain early diagnosis and treatment. Your doctor can also advise which cancer screenings, such as a mammogram and/or colonoscopy, you should schedule and update your influenza and herpes zoster (shingles) vaccinations, if needed.

Coverage for Preventive Care Services

When you or your covered dependent meets established criteria (such as age, gender and risk factors) for certain preventive care services, those services are provided at no cost when you use a participating provider or network facility.

Note: Select vaccines administered at a participating pharmacy are covered under the Prescription Drug Program. Except for the influenza vaccine, pharmacists in New York State cannot administer vaccines to patients under age 18.

For a list of covered preventive care screenings and vaccinations, refer to the *Empire Plan Preventive Care Coverage Guide*, which has been redesigned for 2021 to include information about the difference between preventive and diagnostic care, questions and answers and a resource section. A copy of the 2021 *Guide* will be mailed to your home with the 2021 *At A Glance* in December and it will also be available on NYSHIP Online.

For questions about benefit coverage, call the Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the prompt for the appropriate Program.