REPORTING ON



MENTAL HEALTH & SUBSTANCE ABUSE PROGRAM

If you are experiencing mental health or substance use issues, The Empire Plan Mental Health and Substance Abuse (MHSA) Program can help you receive the treatment and care you need. Receiving the appropriate treatment from a network provider or facility can help you get on the right path toward your recovery.



For Empire Plan enrollees and for their enrolled dependents, COBRA enrollees with their Empire Plan benefits and Young Adult Option enrollees

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BENEFITS OF CHOOSING A NETWORK PROVIDER

Choosing to receive mental health and substance use treatment from an Empire Plan Mental Health and Substance Abuse (MHSA) network provider offers you the highest level of care. According to program data, there are benefits to choosing a network provider instead of receiving treatment from an out-of-network provider.

Higher Success Rates

Patients who are seen by a mental health practitioner within the first seven to 30 days after discharge from a mental health facility are less likely to be readmitted. A follow-up visit within the first 30 days allows you to build a relationship with an outpatient provider that can have long-term benefits, including avoiding readmission beyond the first 30 days. Empire Plan in-network mental health facilities have higher success rates for transitions from inpatient to outpatient care, or follow-up care after hospitalization, than non-network facilities.

Lower Readmission Rates

The readmission rates for substance use treatment at Empire Plan network facilities are consistently lower than the readmission rates at out-of-network facilities. In 2018, for example, 3.79% of substance use patients were readmitted to network facilities. while 6.26% of out-of-network facility patients were readmitted.

Treatment and Support

Empire Plan MHSA network facilities also offer medication assisted treatment (MAT) to all enrollees who are seeking substance use treatment. MAT is the use of FDA-approved medication, in combination with counseling and behavioral therapies, to treat opioid misuse.

Additional Levels of Support

Empire Plan MHSA network facilities also provide additional levels of support and treatment. In order to help ensure the best possible outcome for enrollees, network facilities are involved in making sure the enrollee has support after completing treatment. This support may include family members, sponsors, sober housing, connections to Alcoholics Anonymous or Narcotics Anonymous and outpatient treatment options.



FINDING A NETWORK **PROVIDER**

The Empire Plan MHSA Program offers several ways for you to find a network provider:

Call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA

Program. Calling The Empire Plan before receiving services for a mental health or substance use issue, including treatment for alcoholism or opioid misuse, can help ensure you receive a referral to a network provider and locate a provider who is accepting new patients. Note that certain MHSA services require certification that they are medically necessary. For information on services that require precertification and to precertify services, call The Empire Plan MHSA Program.

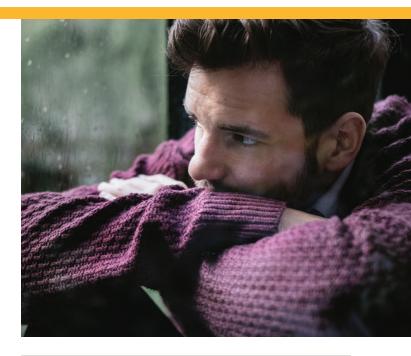
Once you reach The Empire Plan MHSA Program, choose option 3 for the Clinical Referral Line.

The Clinical Referral Line is available 24 hours a day, every day of the year. It is staffed by licensed clinicians with professional experience in the mental health and substance use fields. These highly trained and experienced clinicians are available to refer you to an appropriate provider and help you schedule an appointment, if necessary. You will receive confidential help when making the call.

Go to NYSHIP Online to check if providers or facilities are in The Empire Plan network. You can access the MHSA provider/facility directory by going to www.cs.ny.gov/employee-benefits, choosing your group or plan, if prompted, and select Find a Provider. Under the MHSA Program, click on the ReferralConnect link.

Using ReferralConnect

On the ReferralConnect page, you can choose to search for individual doctors, counselors, groups and clinics or you can search for hospitals and programs. Once you read and accept the disclaimer, fill out the member information and choose your display and distance preferences. Then you will select Provider Type. Optional fields include Specialty, Languages, Age of Member, Gender of Provider and Ethnicity of Provider.



In a life-threatening emergency, call 911 or go immediately to the nearest hospital emergency department. If you call the MHSA Program during a non-life-threatening emergency, a clinician will assess and assist you in locating an appropriate provider or will instruct you to proceed to the nearest hospital emergency department. You, or your designee, should call The Empire Plan within 48 hours of, or as soon as reasonably possible after, an emergency inpatient admission.

If you need help navigating ReferralConnect, click on the Search Tips icon or call The Empire Plan and press or say 3 for the MHSA Program.

Accessing the ReferralConnect system is private and confidential. You can search for providers from any computer with internet access.

Out of State Network Facilities

If you choose to receive services outside of New York State, there are network facilities, known as Signature Facilities, that have demonstrated a high quality of care and positive patient outcomes. Contact the Clinical Referral Line by calling The Empire Plan and choosing option 3 to find out if there is a Signature Facility for the type of treatment you are seeking. For a list of Signature Facilities, see page 11.

NETWORK BENEFITS

When you use an MHSA Program network provider, you will be offered care at the highest benefit level under The Empire Plan. Network providers have been credentialed by the MHSA Program administrator to ensure they meet the highest standards of education, training and experience.

By using a network provider, you will receive access to medically necessary services. The Program's network gives you access to a wide range of providers, including psychiatrists, psychologists, clinical social workers, nurse practitioners, applied behavioral analysts (ABA) or certified behavioral analysts (CBA). Network facilities include psychiatric hospitals, clinics, residential treatment centers, halfway houses, group homes, intensive outpatient treatment programs (IOP) and partial hospital programs (PHP).

Beginning August 1, 2019, the MHSA network also includes licensed mental health counselors (LMHC), licensed marriage and family therapists (LMFT) and physician assistants (PA).

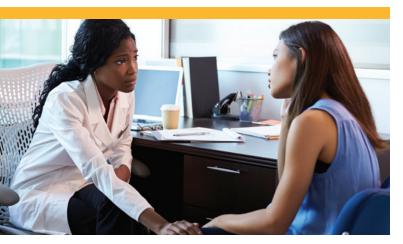
Guaranteed Access

Under the MHSA Program, you have guaranteed access to network benefits. If there are no network providers in your area, you will receive network level benefits if you call the Clinical Referral Line to arrange your care with an appropriate provider.

Copayments

When you use a network provider, you pay a copayment for:

- · A visit to a mental health professional
- · A visit to an outpatient substance use treatment program



 Treatment in a hospital emergency department, unless you are admitted as an inpatient directly from the emergency department

Inpatient Admissions

The MHSA Program allows in-network substance use treatment facilities in New York State to treat an enrollee or covered dependent without prior authorization or medical necessity review. Currently, the number of days of mandatory coverage is 14, but as of January 1, 2020, the number of covered days increases to 28. This treatment is covered, provided that the facility is certified by the New York State Office of Alcoholism and Substance Abuse Services (OASAS). All 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, then select Find a Provider. Under the MHSA Program, you can access the Achieve Solutions website at www.achievesolutions.net/empireplan. Then click on Find a Provider, which will take you to ReferralConnect.

Treatment Medications

You are also guaranteed access to network benefits under the Prescription Drug Program, which provides coverage for prescription drugs, up to a 90-day supply, when dispensed through Empire Plan network pharmacies, the mail service pharmacy, the specialty pharmacy and non-network pharmacies. Your copayment amount depends on the drug, the quantity prescribed and where you fill your prescription.

The Prescription Drug Program 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 a five-day emergency supply of medication that helps manage opioid withdrawal or stabilization as well as medications intended to reverse an opioid overdose, such as naloxone.

Online Resources

For more information about mental health and substance use care, including help for alcoholism, depression, anxiety, ADHD and bipolar disorder, visit the Empire Plan MHSA Program website at

www.achievesolutions.net/empireplan. On the site you can find self-help questionnaires, articles on a variety of topics and other resources, including ReferralConnect. The website also provides quick links to the disease management programs, the Empire Mental Health and Substance Use Disorder Program newsletter and online resources to help you manage your health and safety.

NON-NETWORK BENEFITS

Before you choose a non-network provider, consider the high cost of treatment. When you use a provider or facility for inpatient treatment that is not in The Empire Plan network, your out-of-pocket costs are higher. You will be responsible for the deductible, any coinsurance and any charges above the usual and customary rate. When you go to a non-network facility for inpatient treatment, you will be responsible for 10 percent of the charges billed by the facility, up to your annual coinsurance maximum. For example, if you receive inpatient treatment at a network provider with a provider charge of \$25,000, the total cost to you would be \$0. However, if you received the same inpatient treatment at a non-network provider with a provider charge also of \$25,000, you would have to pay a 10% coinsurance amount, or \$2,500.

If you receive care that is determined to not be medically necessary, you will be responsible for the entire cost of care. For a nonemergency admission to a non-network facility (including intensive outpatient programs, partial hospital programs, halfway houses and group homes), you must call the Empire Plan MHSA Program administrator before admission to have the medical necessity of the admission reviewed.

Most outpatient services do not need prior authorization. However, some outpatient services do require prior authorization. You should call The Empire Plan before receiving services. Keep in mind that all care is subject to review under the Program's medical necessity guidelines. When using a nonnetwork provider, it is your responsibility to ensure that your provider responds to the MHSA Program's administrator's requests for information necessary to review and authorize care for the services you receive from that provider.

Claim Payment for Covered Services

When you receive non-network services that have been precertified, you are responsible for payment at the time they are billed to you. You may assign benefits to your non-network provider and the Program will pay the covered expenses directly to your provider in lieu of paying you.

In order to receive reimbursement, you must file a claim with the program administrator, Beacon Health Options, for non-network services. The program administrator pays you the non-network allowed amount for the covered services if they are found to be medically necessary.

You are always required to pay the deductible, coinsurance amounts and the amount billed to you in excess of the non-network covered amount. Also, you are ultimately responsible for paying your provider any amount not paid by the Program.

BEWARE OF PATIENT BROKERING AND ADDICTION TREATMENT FRAUD

Patient brokering occurs when an entity collects payment from out-of-network addiction treatment providers in exchange for referring patients to those programs and it is considered health insurance fraud. A broker can be a health care provider, health care facility, substance use program, addiction counselor, credentialed professional or any other individual who engages in this practice. Often, the care being offered is in a facility located outside New York State and is more expensive and a lower quality of care than provided within New York State. In these instances, instead of providing treatment as promised, these brokers use patients solely for financial gain.

In August 2018, New York State passed legislation to prohibit patient brokering. Under this law, physicians in New York State who engage in patient brokering can have their credentials and licensure revoked and be subject to fines.



Warning Signs

Warning signs of patient brokering include:

- Patient brokers might offer incentives to attend a facility, such as free airfare, free or reduced rent, prepaid debit cards, cellphones or cash, or to waive or reimburse out-of-pocket insurance costs.
- When researching a facility online, its website only provides a toll-free number. Facility websites should provide specific contact information such as a local telephone number, physical address and the names and credentials of treating physicians.

How to Report Patient Brokering

If you suspect that you may be a victim of patient brokering or addiction treatment fraud, you should report it immediately by filing a complaint. Call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and choose option 3. You also can report the incident to the Department of Financial Services Fraud Bureau at 1-888-372-8369 or contact the

Office of Alcoholism and Substance Abuse Services at StopTreatmentFraud@oasas.ny.gov. Provide a detailed explanation of what you suspect is wrong and why. Save all of your medical bills, receipts, test results, claim forms, prescription records and Explanation of Benefits (EOB) statements since they may be useful in the investigation of your complaint.

RECEIVING THE APPROPRIATE TREATMENT

A Family Faces a Problem

Jim is a 55-year-old active Empire Plan enrollee with a wife and teenage daughter. His wife Cindy recently retired from her job as a teacher. Since retiring, Cindy has been drinking a significant amount of wine on a daily basis. Cindy lies about how much she has been drinking and has become emotionally unavailable to Jim and their daughter.

Unsure whether or not he should confront Cindy, Jim looks for information about substance use on the Empire Plan MHSA website at www.achievesolutions.net/empireplan. He decides to call The Empire Plan and chooses option 3 for the Clinical Referral Line. The clinician that Jim speaks with refers Jim and Cindy to a network provider that can help Cindy receive the substance use treatment on an outpatient basis she needs.

Because Jim chooses an Empire Plan network provider to help treat Cindy's drinking problem, Jim and Cindy are only responsible for applicable copayments. They have much lower out-of-pocket costs than if he had chosen an out-of-network provider.

On the Road to Recovery

Bob is a 30-year-old Empire Plan enrollee who injured his back in a car accident. His doctor prescribed opioids for his pain. After Bob finishes his refills for that prescription, he requests continued opioid therapy from his doctor. Bob's doctor denies that request and recommends that Bob take acetaminophen for the pain. Instead, Bob starts going through the medicine cabinets of his family and friends, looking for and stealing unused opioid prescriptions.

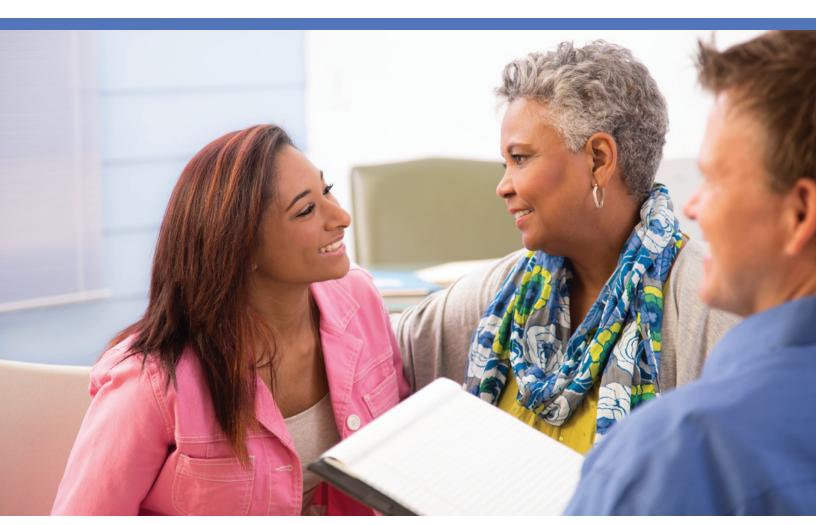
Bob's parents notice that their prescriptions are missing and confront Bob. He admits he has a problem and decides to seek treatment. Bob calls The Empire Plan and chooses option 3 for the MHSA Program. After speaking to an experienced clinician on the Clinical Referral Line, Bob is referred to an in-network substance use program.

Bob receives treatment from an Empire Plan intensive outpatient program (IOP). The IOP provides Bob with medically necessary treatment three times a week. After receiving treatment, the IOP makes sure Bob continues to receive support from family members and sponsors and a counselor. Bob is now on the road to recovery. Because Bob receives treatment from a network provider, he is only responsible for applicable copayments and has much lower out-of-pocket costs than if he had gone out of network.

Working Toward a Healthier Life

Gina, a 62-year-old Empire Plan enrollee, has been feeling hopeless and sad for a long time. She is seen by her primary care doctor who diagnoses her with chronic depression. Gina's doctor prescribes antidepressant medications and medically necessary counseling from an in-network therapist. Gina's doctor recommends her for the depression management program, which is part of the MHSA Program's disease management program. Gina agrees to participate in the depression management program and is assigned an intensive case manager (ICM). Her ICM calls her at regular intervals and assists her in accessing services, recommends additional resources and supports coordination of Gina's care.

Since Gina got help for her chronic depression from an in-network therapist and from the depression management program and her ICM, she is feeling better. Also, Gina has had no claims to file and only has paid applicable copayments.



QUESTIONS AND ANSWERS

Why should I use an Empire Plan network provider when I can use any provider?

Using a network provider limits your out-of-pocket expenses. It also helps keep Empire Plan costs down which, in turn, helps keep your premium lower, too.

How do I find a network provider when I need a substance use professional?

You can call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program. The Clinical Referral Line is available 24 hours a day, every day of the year. These highly trained and experienced clinicians can refer you to an appropriate provider.

Will my boss or coworkers know that I am seeking help from a mental health or substance use provider?

No. Your confidentiality is important to us and your supervisor will not be informed that you are seeking the help of a mental health or substance use provider unless you tell them.

Where can I find more information about my mental health and substance use benefits?

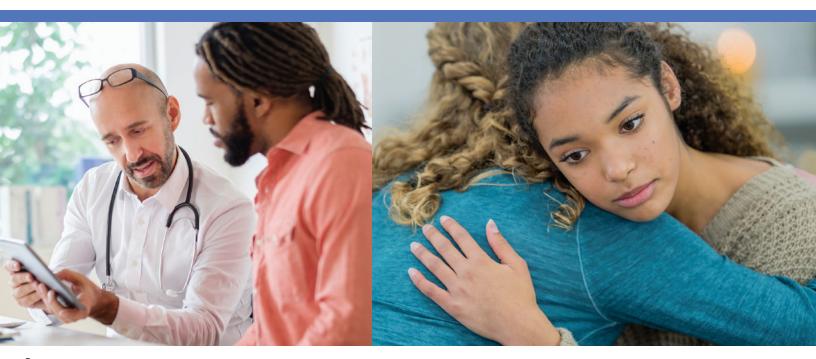
Call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program. You also can review your *Empire Plan Certificate* for more information about the MHSA Program.

What if I experience a mental health or substance use emergency?

In a life-threatening emergency, call 911 or go immediately to the nearest hospital emergency department. If it's a non-life-threatening emergency, the MHSA Program will have a clinician available to assess and assist you in locating an applicable provider or will instruct you to proceed to the nearest hospital emergency department.

What is talk therapy and who provides it?

Talk therapy is when you see a mental health provider and talk about what is bothering you. Unlike a physical exam, which often involves tests, talking is almost the whole treatment with talk therapy. It's important to find a therapist who is trained to treat your problem, makes you feel comfortable and is someone you can trust. To find a talk therapy provider, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program. The Clinical Referral Line can give you access to a licensed clinician who can help you find a provider. Talk therapy providers include psychiatrists, psychologists, licensed social workers and counselors, advanced registered nurse practitioners, advanced psychiatric registered nurses and physician's assistants.



IMPORTANT TERMS TO KNOW

72-hour Crisis Bed is a program designed to provide services for crisis situations of acute mental health and substance use for up to 72 hours. The program provides extended evaluation as well as crisis stabilization for covered persons needing an intermediate level of care. Treatment interventions are focused on mobilizing support and resources so that the covered person can be managed in the least restrictive setting. The program is provided under the supervision of a physician.

23-hour Crisis Bed is a program designed to provide services for crisis situations of acute mental health and substance use for up to 23 hours. The program provides extended evaluation as well as crisis stabilization for covered persons needing an intermediate level of care. Treatment interventions are focused on mobilizing support and resources so that the covered person can be managed in the least restrictive setting. The program is provided under the supervision of a physician.

Applied Behavior Analysis (ABA) is a behavioral approach commonly used with children with autism spectrum disorders that seeks to reinforce adaptive behaviors and reduce maladaptive behaviors. ABA includes the use of direct observation, measurement and functional analysis of the relationships between environment and behavior.

Applied Behavior Analysts are board certified with supervised experience providing ABA treatment.

Approved Facility is a general, acute care or psychiatric hospital or clinic under the supervision of a physician. If the hospital or clinic is located in New York State, it must be certified by the Office of Alcoholism and Substance Abuse Services of the State of New York or according to the New York State Mental Hygiene Law. If located outside of New York State, it must be accredited by the Joint Commission on Accreditation of Health Care Organizations for the provision of mental health, alcoholism or drug use treatment or state licensed.

Clinical Referral Line is the clinical resource and referral service that you may call prior to receiving services to obtain network referrals. You may call 24 hours a day, every day of the year. Call The Empire Plan and choose the MHSA Program.

Counselor, Master's Level has a master's degree in an approved curriculum of counseling education, a minimum of two years of individual counseling and a passing score on a state or national license exam to practice.

Crisis Stabilization is an alternative to hospitalization in a short-term structured therapeutic environment. It provides continuous 24-hour observation and supervision for those who do not require the intensive medical care of a hospital environment.

Electroconvulsive therapy (ECT) is a procedure conducted by a psychiatrist for the treatment of certain mental health disorders through the application of controlled electric current.

Inpatient Services are those services rendered in an approved facility to a patient who has been admitted for an overnight stay and is charged room and board.

Intensive Outpatient Program (IOP) is a freestanding or hospital-based program that provides medically necessary services more than once weekly. IOPs are used as a step up from routine outpatient services, or a step down from acute inpatient care, residential care or a partial hospital program. IOPs can be used to treat mental health or substance use disorders or can specialize in the treatment of co-occurring mental health issues and substance-use disorders.

Licensed Marriage and Family Therapists (LMFT) are trained in individual psychotherapy and family systems to assess and treat mental, emotional and behavioral disorders and address an array of relationship issues within the context of marital/ couple, family, relational and group therapy. They provide individual, couple, family, relational and group therapy.

Licensed Mental Health Counselors (LMHC) are trained in counseling, psychotherapy and prevention. They work with individuals, couples, families, groups and organizations using brief techniques, such as crisis intervention and solution-focused approaches, or longer term approaches when treating chronic mental health disorders or disabilities.

Licensed Social Workers and Counselors are therapists that include licensed clinical social workers, licensed marriage and family therapists and licensed mental health counselors.

Medicare Facility is a facility that is eligible and has completed the application/registration process with Medicare and has agreed to participate and comply with Medicare guidelines.

Medication Assisted Treatment (MAT) is the use of medication in combination with counseling and behavioral therapies for the treatment of substance use disorders.

Mood is a temporary state of mind or feeling.

Network Coverage is the level of benefits provided by the Program when you receive medically necessary services from a network provider.

Network Facility is an approved facility that has entered into a network provider agreement as an independent contractor with the MHSA Program administrator. A non-network facility can be considered a network facility on a case-by-case basis when approved by the Program administrator.

Network Practitioner has entered into an agreement with the MHSA Program administrator as an independent contractor to provide covered services. A non-network practitioner can be considered a network practitioner on a case-by-case basis when approved by the Program administrator.

Network Provider is either a network practitioner or a network facility.

Non-Network Facility is an approved facility that has not entered into an agreement with the MHSA Program administrator.

Non-Network Practitioner has not entered into an agreement with the MHSA Program administrator.

Non-Network Provider is a practitioner or facility that has not entered into an agreement with the MHSA Program administrator to provide covered services.

Nurses with Prescriptive Authority are nurses with a master's degree and advanced training in psychiatry. They include advanced registered nurse practitioners (ARNP) and advanced psychiatric registered nurses (APRN). In most states, these nurses are authorized to prescribe psychotropic medications.

Outpatient Clinic is a community-based program that offers mental health and/or substance use treatment services.

Outpatient Services are those services rendered in a practitioner's office or in the department of an approved facility to persons who have not had an overnight stay and are not charged for room and board.

Partial Hospitalization is a freestanding or hospital-based program that maintains hours of service for at least 20 hours per week for mental health or substance use diagnoses.

Physician Assistant (PA) is licensed and qualified by academic and practical training to provide patient services under the supervision and direction of a licensed physician who is responsible for the performance of the PA.

Practitioner is a psychiatrist, psychologist, licensed clinical social worker, registered nurse clinical specialist, registered nurse practitioner, applied behavior analysis (ABA) provider or ABA agency.

Prescribing Psychologist after receiving a doctorate, completes between 1,500 and 6,000 hours of supervised clinical practice and passes a national examination in psychopharmacology to become licensed to prescribe medications.

Psychiatrist and Medical Doctor is a medical doctor whose internships/residencies were specialized in the treatment of mental disorders. They are qualified to prescribe medication as a means to alleviate symptoms.

Psychologist, Doctoral Level has a doctorate from the psychology department of an accredited college and has passed a national licensing exam.

Psychologist, Masters Level possess a master's degree and is licensed or certified in the state where practice is to occur.

Select Inpatient Facilities are in-network facilities that meet excellent standards of clinical and administrative services.

Select Outpatient Facilities are in-network outpatient providers recognized for engaging in activities that promote clinical effectiveness, member access to services, member satisfaction and administrative efficiency.

Structured Outpatient Rehabilitation Program is a program that provides substance use care and is an operational component of an approved facility that is state licensed.

Substance Use Care is medically necessary care provided by an eligible provider for a pattern of harmful use of any substance, which can include alcohol and other drugs, for mood-altering purposes.

SIGNATURE FACILITIES

The following Empire Plan MHSA facilities are located outside of New York State and have consistently demonstrated high-quality care and high levels of positive patient outcomes.

Arizona

Sierra Tucson

Tucson

California

BHC Alhambra Hospital

Rosemead

California

Hazelden Betty Ford

Los Angeles, San Diego

Colorado

Eating Recovery Center

Denver

Florida

Hazelden Betty Ford

Naples

Illinois

Timberline Knolls

Lemont

Minnesota

Hazelden Betty Ford

Center City, Chaska, Maple Grove,

Plymouth, St. Paul

New Jersey

Endeavor House

Keyport

Oregon

Hazelden Betty Ford

Beaverton, Newberg

Texas

Memorial Hermann

Houston



CONTACT INFORMATION

The Empire Plan Mental Health and Substance Abuse Program

Call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press or say 3 for the MHSA Program before seeking certain services from a mental health or substance use provider. You must call within 48 hours of, or as soon as reasonably possible, after an emergency inpatient admission.

Send appeals, claims, grievances and general correspondence to:

Beacon Health Options P.O. Box 1850 Hicksville, NY 11802

www.achievesolutions.net/empireplan

TTY: 1-855-643-1476

RESOURCES

Alcoholics Anonymous

212-870-3400

www.aa.org

American Foundation for Suicide Prevention (AFSP)

888-333-2377 www.afsp.org

Crisis Text Line

Text HELLO to 741741 www.crisistextline.org

Depression and Bipolar Support Alliance (DBSA)

800-826-3632 www.dbsalliance.org

Narconon

888-477-5527 www.narconon.org

Narcotics Anonymous

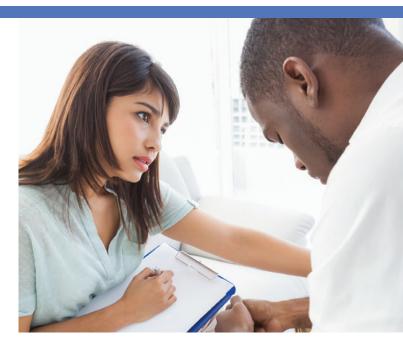
818-773-9999 www.na.org

National Alliance on Mental Illness (NAMI)

800-950-6264 www.nami.org

National Institute on **Drug Abuse**

301-443-1124 www.drugabuse.gov



National Resource Center for Healthy Marriage and Families

866-916-4672

www.healthymarriageandfamilies.org

National Suicide Prevention Lifeline

800-273-8255

www.suicidepreventionlifeline.org

NYS Office of Alcoholism and Substance Abuse Services (OASAS)

877-846-7369

www.oasas.ny.gov

Substance Abuse and Mental Health Services Administration

800-662-4357 www.samhsa.gov

This issue of Reporting On is for information purposes only. Please see your doctor for diagnosis and treatment. Read your plan materials for complete information about coverage.

New York State Department of Civil Service, Employee Benefits Division, Albany, New York 12239 • www.cs.ny.gov

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, NYS and PE Retirees, NYS and PE COBRA Enrollees and Young Adult Option enrollees: Contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

