



GENERAL INFORMATION & BOOK EMPIRE PLAN CERTIFICATE AMENDMENTS

For Active Employees, Retirees, Vesteas
and Dependent Survivors
and their Dependents
enrolled through
PARTICIPATING AGENCIES
with **CORE Plus Medical**
and **Psychiatric Enhancements**

DECEMBER 2003

State of New York Department of Civil Service
Employee Benefits Division
www.cs.state.ny.us

Keep these amendments with your July 1, 2000 New York State Health Insurance Program General Information Book and Empire Plan Certificate.

Pages in your Book/Certificate and later Certificate Amendments have consecutive numbers.

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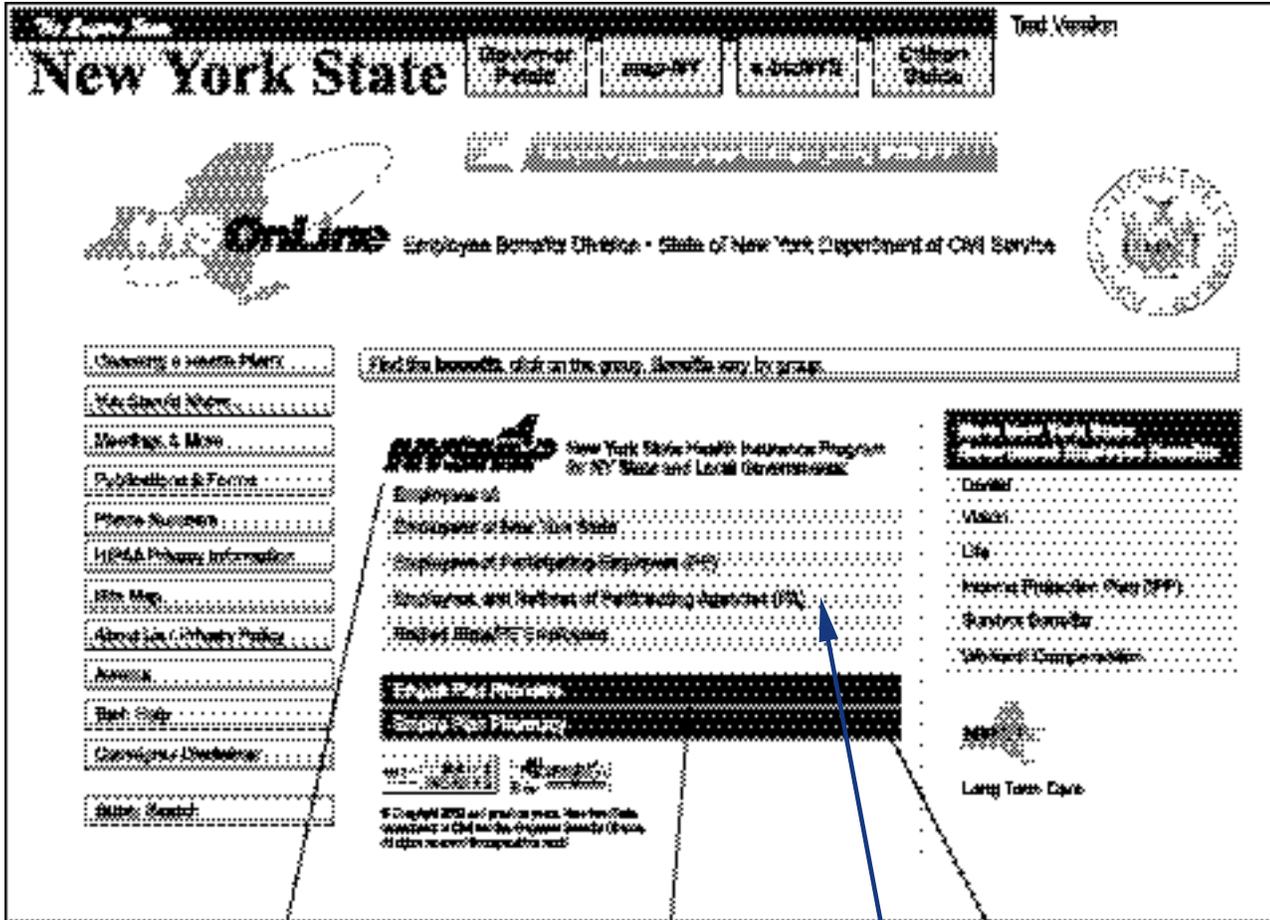
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Visit us on the Web at www.cs.state.ny.us

Check our New York State Department of Civil Service Employee Benefits Division Web site at www.cs.state.ny.us. Click on Employee Benefits for timely information about your NYSHIP benefits. Publications are available on our site, which meets universal accessibility standards adopted by New York State for NYS Agency Web sites.

If you don't have access to the Internet, visit your local library. Most libraries have computers linked to the Internet.



Health Insurance

Choose your group to go to "NYSHIP General Information Site" for information about NYSHIP and the Empire Plan

Empire Plan Providers

Link directly to the Participating Provider Directory on the United HealthCare (UHC) Web site

Empire Plan Pharmacy

Link to a full-service Empire Plan online pharmacy at the Express Scripts (ESI) Web site

Look for your NYSHIP benefits here
Click on Employees and Retirees of Participating Agencies (PA)

Other Web sites:

Empire Blue Cross Blue Shield
www.empireblue.com

United HealthCare
www.myuhc.com

Express Scripts
www.express-scripts.com

The policies and benefits described in this booklet are established by the State of New York through negotiations with State employee unions and extended administratively to local government agencies that elect to participate in NYSHIP (Participating Agencies). Policies and benefits may also be affected by federal and state legislation and court decisions. The Department of Civil Service, which administers NYSHIP, makes policy decisions and interpretations of rules and laws affecting these provisions. In addition, the Participating Agency establishes certain provisions. Where this document differs from your July 1, 2000 *NYSHIP General Information Book and Empire Plan Certificate* and later *Empire Plan Reports and Certificate Amendments*, this is the controlling document.

NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP)

Substitute the following for the third bullet of the second paragraph, "If you and your spouse are both eligible for coverage in NYSHIP", under "Two types of coverage" in the "Coverage: Individual or Family" section on page 7 of your *NYSHIP General Information Book*.

Coverage

- You may each have Family coverage if your employer permits two Family enrollments; however, if one spouse is enrolled as a New York State employee or retiree, only one of you can have Family enrollment. The other spouse may only elect Individual coverage.

EMPIRE BLUE CROSS BLUE SHIELD CERTIFICATE OF INSURANCE

Substitute the following for the first two sentences of "2. Hospital services covered" in the "Inpatient Hospital Care" section on page 46 of your *Empire Blue Cross Blue Shield Certificate*.

Inpatient hospital services

2. **Hospital services covered.** Empire Blue Cross Blue Shield will usually pay for all the diagnostic and therapeutic services provided by the hospital. However, the service must be given by an employee or an agent of the hospital, the hospital must bill for the service as part of the hospital's charges and the hospital must retain the money collected for the service.

Substitute the following for the first paragraph of the "Outpatient Hospital Care" section on page 47 of your *Empire Blue Cross Blue Shield Certificate*.

Outpatient hospital care

When you receive the services described in the following sections and subject to the limitations in those sections, Empire Blue Cross Blue Shield will pay for the same services provided to you in the outpatient department of a hospital as Empire Blue Cross Blue Shield pays when you are an inpatient in a hospital as described on page 46 under "Inpatient Hospital Care." As in the case of inpatient care, the service must be given by an employee or an agent of the hospital, the hospital must bill for the service and the hospital must retain the money collected for the service.

Limitations and exclusions

Substitute the following for the first paragraph of “What is not covered” under “Limitations and Exclusions” in the “Empire Blue Cross Blue Shield General Provisions” section on page 51 of your Empire Blue Cross Blue Shield Certificate. Adjust the numbers that follow.

1. You are not covered by Empire Blue Cross Blue Shield for benefits for hospitalization or related expenses described on pages 46-50 in “Inpatient Hospital Care”, “Outpatient Hospital Care”, “Skilled Nursing Facility Care”, “Hospice Care”, “Centers of Excellence for Transplants Program” or “Infertility Benefits” as follows:
 - A. **Care received prior to your coverage under the Empire Plan.**
Payment will not be made for services or supplies provided to you before you became covered under the Empire Plan.
 - B. **Care, services or supplies which are not medically necessary.**
Empire Blue Cross Blue Shield requires that the service or care you receive be medically necessary. Medically necessary care is care which, according to Empire Blue Cross Blue Shield criteria, is:
 - consistent with the symptoms or diagnosis and treatment of your condition, disease, ailment or injury;
 - in accordance with generally accepted medical practices;
 - not solely for your convenience, or that of your doctor or other provider; and
 - the most appropriate supply or level of service which can be safely provided to you.

GHI CERTIFICATE OF INSURANCE

Empire Plan Mental Health and Substance Abuse Program

Substitute the following for “Emergency services” in the “How to Receive Benefits for Mental Health and Substance Abuse Care” section on page 106 of your GHI Certificate as amended in your June 2002 Empire Plan Report.

Emergency services

In an emergency, ValueOptions will either arrange for an appropriate provider to call you back right away (usually within 30 minutes), or direct you to an appropriate facility for treatment. In a life-threatening emergency situation, you should go or be taken to the nearest hospital emergency room for treatment. If you are admitted to a facility for emergency care, you must call ValueOptions within 48 hours for certification.

You must pay the first \$35 in charges (copayment) for emergency care in a hospital emergency room. You will not have to pay this \$35 copayment if you are treated in the emergency room and it becomes necessary for the hospital to admit you at that time as an inpatient.

When you receive medically necessary covered services from a non-network provider in a certified emergency, the Program will provide network coverage until you can be transferred to a network facility.

Add the following as “d.” under “NETWORK COVERAGE” in the “Schedule of Benefits for Covered Services” on page 110 of your GHI Certificate.

- d. You pay the first \$35 charged for emergency care in a hospital emergency room. You will not have to pay this \$35 copayment if you are treated in the emergency room and it becomes necessary for the hospital to admit you at that time as an inpatient.

CIGNA CERTIFICATE OF INSURANCE

Empire Plan Prescription Drug Program

Substitute the following for the first bullet under “Mandatory Generic Substitution” in the “Your Benefits and Responsibilities” section on page 126 of your CIGNA Certificate.

Generic substitution

- **A brand-name drug with a generic equivalent** – You will pay a \$15 copayment plus the difference in cost between the brand-name and generic drug, not to exceed the full cost of the drug. This cost difference can be substantial.

The following brand-name drugs are excluded from Mandatory Generic Substitution: Coumadin, Dilantin, Lanoxin, Levothyroid, Mysoline, Premarin, Slo-Bid, Synthroid, and Tegretol. You pay only the \$15 copayment.

Substitute the following for “Prior Authorization” in the “Your Benefits and Responsibilities” section on page 126 of your CIGNA Certificate.

Prior authorization required for certain drugs

You must have prior authorization to receive Empire Plan Prescription Drug Program benefits for certain medications. If your physician prescribes one of these drugs, Express Scripts will request from your physician the clinical information required to authorize the medication. Your pharmacy or physician may contact Express Scripts to begin the authorization process. Express Scripts and/or the pharmacy will notify you of the results of the review. The prior authorization requirements apply whether you use your New York Government Employee Benefit Card or will be filing a claim for direct reimbursement. The following is a list of drugs that require prior authorization:

- | | | |
|------------------|--------------------|-----------------|
| • Amevive | • Humira | • Pulmozyme |
| • Aranesp | • Immune Globulins | • Raptiva |
| • Caverject | • Kineret | • Remicade |
| • Cerezyme | • Lamisil | • Saizen |
| • Cialis | • Levitra | • Serostim |
| • Edex | • Muse | • Sporanox |
| • Enbrel | • Norditropin | • TheraCys/Tice |
| • Epogen/Procrit | • Nutropin | • Viagra |
| • Genotropin | • Prolastin | • Xolair |
| • Humatrope | • Protropin | |

Certain medications that require prior authorization based on age, gender or quantity limit specifications are not listed here. This list of drugs is subject to change as drugs are approved by the Food and Drug Administration and introduced into the market. For the most current list of drugs requiring prior authorization, call Express Scripts at the number below or go to the New York State Department of Civil Service Web site at www.cs.state.ny.us and click on Employee Benefits. For more information about drugs requiring prior authorization and how to obtain it, call the Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose Express Scripts.

Delete the “You Must Call” graphic, the heading, and the first and fourth paragraphs of “You must call...” in the “Your Benefits and Responsibilities” section on page 127 of your CIGNA Certificate.

Empire Plan Carriers and Programs

To reach any of the Empire Plan carriers, call toll free **1-877-7-NYSHIP (1-877-769-7447)**.

The one number is your first step to Empire Plan information. Check the list below to know which carrier to select. When you call 1-877-7-NYSHIP, listen carefully to your choices and press or say your selection at any time during the message. When you follow the instructions, you'll automatically be connected to the appropriate carrier.

Empire Blue Cross Blue Shield

New York State Service Center, P.O. Box 1407, Church Street Station, New York, NY 10008-1407. Call for information regarding hospital and related services.



Benefits Management Program for Pre-Admission Certification

If the Empire Plan is your primary coverage, you must call Empire Blue Cross Blue Shield 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.



Centers of Excellence for Transplants Program

You must call Empire Blue Cross Blue Shield before a hospital admission for the following transplant surgeries: bone marrow, peripheral stem cell, cord blood stem cell, heart, heart-lung, kidney, liver, lung and simultaneous kidney-pancreas. Call for information about Centers of Excellence.

United HealthCare Insurance Company of New York

P.O. Box 1600, Kingston, NY 12402-1600. Call for information on benefits under Participating Provider and Basic Medical Programs, predetermination of benefits, claims and participating providers.

Managed Physical Medicine Program/MPN

Call United HealthCare for information on benefits and to find MPN network providers for chiropractic treatment and physical therapy. If you do not use MPN network providers, you will receive a significantly lower level of benefits.



Benefits Management Program for Prospective Procedure Review of MRI

If the Empire Plan is your primary coverage, you must call United HealthCare before having an elective (scheduled) Magnetic Resonance Imaging (MRI).



Home Care Advocacy Program (HCAP)

You must call United HealthCare to arrange for paid-in-full home care services, enteral formulas and/or durable medical equipment/supplies. If you do not follow HCAP requirements, you will receive a significantly lower level of benefits.



Infertility Benefits

You must call United HealthCare for prior authorization for the following Qualified Procedures, regardless of provider: Assisted Reproductive Technology (ART) procedures including in vitro fertilization and embryo placement, Gamete Intra-Fallopian Transfer (GIFT), Zygote Intra-Fallopian Transfer (ZIFT), Intracytoplasmic Sperm Injection (ICSI) for the treatment of male infertility, assisted hatching and microsurgical sperm aspiration and extraction procedures; sperm, egg and/or inseminated egg procurement and processing and banking of sperm and inseminated eggs. Call United HealthCare for information about infertility benefits and Centers of Excellence.



Mental Health and Substance Abuse Program

ValueOptions (administrator for GHI), P.O. Box 778, Troy, New York 12181-0778. You must call ValueOptions before beginning any treatment for mental health or substance abuse, including alcoholism. If you do not follow ValueOptions requirements, you will receive a significantly lower level of benefits. In a life-threatening situation, go to the emergency room. Call within 48 hours of inpatient admission.

Empire Plan Prescription Drug Program

Express Scripts (administrator for CIGNA), P.O. Box 1180, Troy, NY 12181-1180. You must have prior authorization for: Amevive, Aranesp, Caverject, Cerezyme, Cialis, Edex, Enbrel, Epogen/Procrit, Genotropin, Humatrope, Humira, Immune Globulins, Kineret, Lamisil, Levitra, Muse, Norditropin, Nutropin, Prolastin, Protropin, Pulmozyme, Raptiva, Remicade, Saizen, Serostim, Sporanox, TheraCys/Tice, Viagra, Xolair. For the most current list of drugs requiring prior authorization, call Express Scripts or check the Web at www.cs.state.ny.us (choose Employee Benefits).

The Empire Plan NurseLineSM

Call for health information and support, 24 hours a day, seven days a week. To listen to the Health Information Library, enter PIN number 335 and a four-digit topic code from the Empire Plan NurseLine brochure.

Teletypewriter (TTY) numbers for callers when using a TTY device because of a hearing or speech disability:
Empire Blue Cross Blue Shield **TTY only: 1-800-241-6894**
United HealthCare **TTY only: 1-888-697-9054**
ValueOptions **TTY only: 1-800-334-1897**
Empire Plan Prescription Drug Program **TTY only: 1-800-840-7879**