

THE EMPIRE PLAN

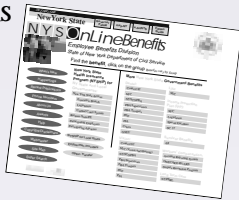
June 2002

Report

For Active Employees, Retirees, Vestees and Dependent Survivors
and their Dependents enrolled through
PARTICIPATING AGENCIES
with CORE PLUS MEDICAL ENHANCEMENT

The Empire Plan at www.cs.state.ny.us

The New York State Department of Civil Service Web site at www.cs.state.ny.us links to information about NYSHIP and your Empire Plan benefits.



Click on Employee Benefits for the 2002 version of *The Empire Plan At a Glance*, a directory of agency Health Benefits Administrators' numbers and other important telephone numbers. Recent publications are also available on the site, which meets universal accessibility standards adopted by New York State for New York State agency Web sites. If you don't have computer access to the Internet, visit your local library. Most libraries have computers linked to the Internet.

SAVE THIS REPORT

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SPECIAL SECTIONS

IMPORTANT NUMBERS

Asthma Management

Asthma Management Program

The Empire Plan now offers the Asthma Management Program, also called Managing for Tomorrow. If you or your dependents have received recent treatment for asthma or asthma-related respiratory problems, you may be invited to participate in this program. Participation is voluntary, free of charge and confidential. If you agree to participate, you will receive information to help you understand your condition. You will also be offered educational materials and other services.

The Asthma Management Program began January 1, 2002 and is available to Empire Plan enrollees through United HealthCare. With the introduction of this new program, the Empire Plan now offers two disease management programs through United HealthCare: the Cardiovascular Risk Reduction Program and the Asthma Management Program.

Reporting On Asthma

This *Empire Plan Report* includes a special insert, *Reporting On Asthma*. The insert offers information about the chronic disease that affects 17 million Americans.

Allergy Serum

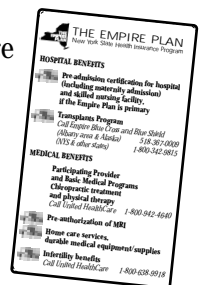
Effective January 1, 2002, you have no copayment for allergy serum dispensed by an Empire Plan participating physician to be administered to you by another party in another setting. The Empire Plan will reimburse the provider directly for the allergy serum according to the network schedule; you will have no additional costs for the serum.

Before this change, such serum, called "take-away" serum, was considered under the Basic Medical Program, subject to deductible and coinsurance.

You continue to have a \$10 copayment for other allergy immunotherapy services.

New Phone Number Cards

We've enclosed four new Empire Plan telephone number cards for you and your family within this Report. If you need more cards, please contact your agency Health Benefits Administrator.



ValueOptions Clinical Referral Line

The Empire Plan Mental Health and Substance Abuse Program provides comprehensive network coverage for mental health and substance abuse care. But before you seek mental health or substance abuse care,



including treatment for alcoholism, you must call ValueOptions' Clinical Referral Line

at 1-800-446-3995. The Clinical Referral Line is available 24 hours a day, every day of the year.

When you call ValueOptions, select the menu option for referral to a mental health or chemical dependency professional. An experienced mental health and substance abuse clinician will be there to help you.

The clinician will talk with you and assess whether you need routine, urgent or emergency care. The clinician will then provide you with names and phone numbers of three



network providers. If you do not have access to a network provider, the clinician will arrange for you to receive network benefits with a non-network provider in your area.

- If the need is routine, an appointment should be available to you within seven days of your contacting the provider.
- If the need is urgent, an appointment should be available to you within 24 hours of your contacting the provider.

- If you need emergency care, ValueOptions will have a provider call you within 30 minutes or will direct you to an appropriate provider or facility for treatment.

If you feel your need is urgent or an emergency, tell the clinician; the clinician will accept your assessment.

If you have any difficulty scheduling an appointment with one of the recommended providers, call ValueOptions again at 1-800-446-3995. A referral line clinician will be there to help you.

In a life-threatening situation, go to the nearest hospital emergency room for treatment.

You must call ValueOptions within 48 hours after an emergency hospitalization to ensure maximum benefits for any inpatient days in excess of those required to provide emergency services.

The Empire Plan and Subrogation

What is subrogation?

Sometimes, claims for health care services are submitted to the Empire Plan for reimbursement and paid by the Plan when, in fact, these expenses are the liability of another party. When the Plan pays for these expenses, it may have the right to seek repayment from the third party legally responsible for the injury or illness. This recovery process is known as subrogation.

What are examples of third party liability?

Expenses resulting from work-related injuries and illnesses are usually the responsibility of Workers' Compensation insurance; expenses for injuries resulting from a motor

vehicle accident may be the responsibility of an automobile insurer; expenses for an injury resulting from the wrongful acts of a third party may be the responsibility of another insurer.

What is HRI?

In the past, each Empire Plan carrier managed subrogation individually. Now, the Empire Plan hospital and medical carriers (Empire Blue Cross and Blue Shield and United HealthCare) have contracted with Healthcare Recoveries, Inc. (HRI) to administer certain recovery efforts. If the Empire Plan has paid claims on your behalf that appear to be the liability of a third party, HRI may send you a letter asking for information about those claims.

What if I receive a letter from HRI?

If you receive a letter from HRI, please respond as directed. Even if you think no other party is responsible for your claim, please provide the requested information. HRI needs the information to determine the Empire Plan's liability.

Why should I contact HRI?

When you answer your letter from HRI, you may be helping the Empire Plan recover monies that are the liability of another party. This process is one way the Empire Plan keeps your health insurance premiums as reasonable as possible.

Centers of Excellence for Transplants Program

The Empire Plan Centers of Excellence for Transplants Program offers a paid-in-full benefit for the following types of transplants: bone marrow (inpatient and outpatient), peripheral stem cell, cord blood stem cell, heart, heart-lung, kidney, liver, lung, kidney-pancreas. Participation in the Program is voluntary.

The enhanced benefits under the Transplants Program are available only when you are enrolled in the Program, the Empire Plan is your primary coverage and your transplant services are pre-authorized by Empire Blue Cross and Blue Shield.



You must call Empire Blue Cross and Blue Shield at 518-367-0009 (Albany area and Alaska) or 1-800-342-9815 (NYS and other states except Alaska) for pre-authorization of the covered services.

If you do not use the Transplants Program, you are still eligible for Empire Plan benefits for your medically necessary transplant. You must call Empire Blue Cross and Blue Shield at 518-367-0009 or 1-800-342-9815 for pre-admission certification of admission for transplants. And, you will have to pay any applicable deductible, coinsurance, copayments and non-covered charges.

If you choose to use a non-participating provider for transplant services, your out-of-pocket expenses may be substantial. Therefore, it is advisable to request a pre-determination of benefits from both Empire Blue Cross and Blue Shield and United HealthCare.

Please refer to your *Empire Plan Certificate* for more information about benefits for transplant services.

Organ Donation

For a free brochure on organ donation and a donor card, call the Coalition on Donation at 1-888-90-SHARE (1-888-907-4273).

For more information about organ donation, visit the U.S. Department of Health and Human Services Web site at www.organdonor.gov.

The Empire Plan Outside the U.S.

What should you do if you need health care while traveling or living outside the United States?



Here are some suggestions:

- Ask the American Embassy for names of reliable, English-speaking doctors.
- After you receive services, ask for copies of your medical records in English, if possible.
- Get a receipt when you pay your bill(s).
- Submit the records to the appropriate Empire Plan carrier.

You have paid-in-full benefits for medically necessary covered services provided in an inpatient hospital setting. Pre-admission certification is not required when you are hospitalized or admitted to a skilled nursing facility outside the United States.

Carriers will consider other claims for payment under non-network coverage. Please see your *Empire Plan Certificate* for carrier addresses and information to help you file claims.

If you need more information, check our Web site at www.cs.state.ny.us. Click on Employee Benefits. Or, when you're outside the United States where the Empire Plan toll-free numbers do not work, you may call the Employee Benefits Division at 518-457-5754. Employee Benefits representatives are available Monday through Friday, 9 am to 3 pm Eastern time.

Medicare Coverage

If you are Medicare-primary, remember that you have no Medicare coverage outside the United States. The Empire Plan is primary until you return. Save your health care records and send them to the Empire Plan carriers.

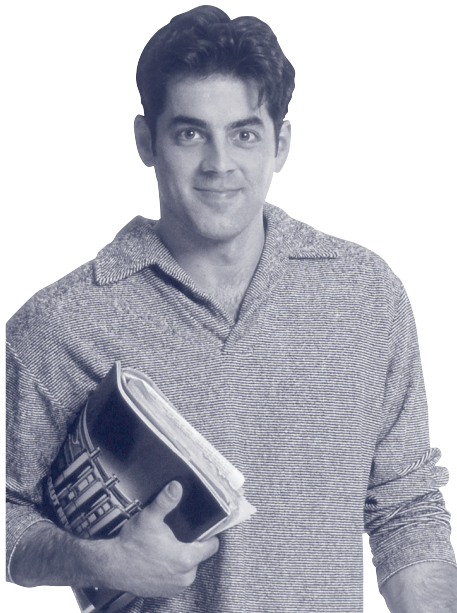
If you are living permanently outside the United States, you must notify your agency Health Benefits Administrator in writing. Your Participating Agency will discontinue your Medicare Part B reimbursement, and the Empire Plan will provide your primary health insurance coverage.

New York State Health Insurance Program Reminders

Full-Time Student Eligibility

Your unmarried dependent children are eligible for NYSHIP coverage if they are:

- age 19 or over but under age 25, and
- full-time students at an accredited secondary, preparatory or trade school, college or other educational institution, and
- otherwise not eligible for employer group coverage.



They continue to be eligible until the end of the third month following the month in which they complete course requirements for graduation, or they reach age 25, whichever occurs first.

Please see your *NYSHIP General Information Book* for more information about dependent eligibility for NYSHIP coverage.

Continuing Coverage in Retirement

Ask your agency Health Benefits Administrator if your agency offers health insurance in retirement and if you are eligible. Eligibility requirements vary from agency to agency. The following information may be used as a general guideline.

When you retire, you may continue coverage for yourself and your eligible dependents if you meet certain eligibility requirements. A minimum service period is one of these requirements. You must have had at least five years of service, not necessarily continuous, with your agency from which you are retiring, subject to the following:

- Your agency may elect administratively or through collective negotiations to establish a service requirement greater than five years for purposes of determining eligibility for retirement for all employees or a class or category of employees whose most recent date of employment with the employer is after April 1, 1975.
- If you had less service than that established by your agency for coverage in retirement, your agency may elect administratively or through collective negotiations to provide for continuation of coverage in retirement for all employees or a class or category of employees who have met the applicable period of required service with one or more public employers, provided you have served a minimum of one year with your agency.
- Your agency may elect administratively or through collective negotiations to establish as ineligible for coverage all employees or a class or category of employees whose most recent date of employment with the employer is after April 1, 1977.

Your *NYSHIP General Information Book* explains eligibility for retiree coverage. In addition to completing the minimum service period, you must satisfy requirements for retiring as a member of a State retirement

system and be enrolled in the New York State Health Insurance Program. See your Book and contact your agency Health Benefits Administrator for more information.

Medicare

Active Employees: Medicare is primary for an active employee or an active employee's dependent with end stage renal disease (waiting period applies) and for an active employee's domestic partner who is age 65 or over (if your agency offers domestic partner coverage). Your *NYSHIP General Information Book and Empire Plan Certificate* has more information about Medicare.

Retirees, Vestees, Dependent Survivors: NYSHIP requires you and your dependents to be enrolled in Medicare Parts A and B when first eligible. You/your dependents must be enrolled when first eligible even if also covered through another employer's group plan.

You must be enrolled in Medicare Parts A and B and entitled to receive Medicare benefits by the first day of the month in which you reach age 65, or before age 65 if you are disabled or have end stage renal disease.

As soon as you become eligible for Medicare, the Empire Plan will pay secondary to Medicare, even if you fail to enroll in Medicare or are in a waiting period for Medicare to go into effect. Plan benefits may change and your share of the Empire Plan premium may change.

If you are not enrolled in Medicare Parts A and B when you are first eligible to enroll, you will be responsible for the full cost of medical services that Medicare would have covered.

Empire Plan Reminders

New Numbers for the Benefits Management Program

You now have new telephone numbers to call for the Empire Plan Benefits Management Program. Your Empire Plan benefits have not changed as a result of the numbers change.



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

Shield at 518-367-0009 (Albany area and Alaska) or 1-800-342-9815 (NYS and other states except Alaska):

- Before a maternity or scheduled hospital admission
- Within 48 hours after an emergency or an urgent hospital admission
- Before admission or transfer to a skilled nursing facility

Emergency Admission

Emergency admissions involve medical conditions or acute trauma such that life, limb or the body function of the patient depends on the immediacy of medical treatment. In an emergency admission, the condition requires immediate inpatient medical attention, and any delay in receiving treatment would be harmful to the patient. The patient does not have to be admitted via the emergency room to be considered an emergency admission.

Urgent Admission

Urgent admissions involve medical conditions or acute trauma such that inpatient medical attention, while not immediately essential, should be provided very early in order to prevent possible loss or impairment of life, limb or body function.

If the Empire Plan is your primary coverage, you must call United HealthCare at 1-800-638-9918:

- Before having an elective (scheduled) Magnetic Resonance Imaging (MRI) unless you are having the test as an inpatient in a hospital

You may also call United HealthCare at 1-800-638-9918 to request a voluntary specialist consultant evaluation for any scheduled procedure.

The Benefits Management Program requirements also apply when you or your enrolled dependents have primary coverage through an HMO with secondary coverage under the Empire Plan, and you choose not to use the HMO.

If you will be admitted to a medical center or hospital operated by the U.S. Department of Veterans' Affairs, and will be using your Empire Plan benefits, you must comply with the Benefits Management Program requirements.

Empire Blue Cross and Blue Shield and United HealthCare replaced Intracorp as administrators of the Empire Plan Benefits Management Program, effective January 1, 2002. Please see your *Empire Plan Certificate* and *Empire Plan Reports* for more information about the Empire Plan Benefits Management Program.

Your Up-To-Date Information

Be sure your provider has the accurate and up-to-date information needed to complete your claim forms. Participating and non-participating or non-network providers need your name, address and Empire Plan identification number to complete claim forms. Non-participating and non-network providers also need your signature. If information is missing or incorrect, payment for services may be delayed or denied.

Prescriptions by Mail

Do you take any prescription medications on a long-term basis? If so, you can order your covered prescription drugs by mail from the Empire Plan Prescription Drug Program mail service pharmacy, Express Scripts Mail Service.

You can order up to a 90-day supply of your prescriptions, shipped to your home. For mail service pharmacy order forms, call Express Scripts at 1-800-964-1888 toll-free, 24 hours a day, seven days a week.

Once your prescription is on file at the Express Scripts Mail Service, you can order refills by mail, by phone or online at the Express Scripts Web site, www.express-scripts.com. Choose the Mail Service Prescriptions Refill page. When your order is placed online, you'll know right away if your refill has been approved. And, you can check the status of your order.

If you prefer, you still may fill your prescription at an Empire Plan/Express Scripts participating pharmacy or, at a higher cost to you, at a non-participating pharmacy.

Please see your *Empire Plan Certificate* for more information about the Empire Plan Prescription Drug Program.

The Empire Plan NurseLineSM

The Empire Plan NurseLine offers enrollees health information and advice 24 hours a day, seven days a week. Whether you want more information about a recent diagnosis or are wondering how to stay healthy, you can call 1-800-439-3435 toll-free to talk with an experienced registered nurse or to reach the Empire Plan NurseLine's Health Information Library. For recorded messages on more than 1,000 topics, enter PIN number 335 and a four-digit topic code from the Empire Plan NurseLine brochure you received in the mail. If you need a brochure, ask the NurseLine nurse to send you one.

New Publications

Reporting On

We've updated two of our Reporting On publications – *Reporting On Network Benefits* and *Reporting On Healthy Babies*.

Your agency Health Benefits Administrator now has copies available. You'll also find these publications on the New York State Department of Civil Service Web site, www.cs.state.ny.us. Click on Employee Benefits, then on Recent Publications.



Reporting On Network Benefits (January 2002) details Empire Plan network coverage.

Reporting On Healthy Babies (March 2002) offers information for mothers and their babies.

Your agency Health Benefits Administrator also has a supply of the new publication, *Reporting On Asthma*, included in this Report, if you'd like another copy.

On the Road with the Empire Plan

Your agency Health Benefits Administrator has a supply of the 2002 version of *On the Road with the Empire Plan*. This handy booklet provides information and telephone numbers you'll need when you're traveling or when your child is away at school.



Ask your agency Health Benefits Administrator for your copy. Or, look for *On the Road with the Empire Plan* on the New York State Department of Civil Service Web site, www.cs.state.ny.us.

Click on Employee Benefits, then on Recent Publications.

The *Empire Plan Report* is published by the Employee Benefits Division of the State of New York 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.



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

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It is the policy of the State of New York 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 the Department of Civil Service Web site (www.cs.state.ny.us). Click on Employee Benefits for timely information that meets universal accessibility standards adopted by New York State for NYS Agency Web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator.

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Your Plan is the Empire Plan

The New York State Health Insurance Program (NYSHIP) provides your health insurance benefits through the Empire Plan. The Empire Plan is designed especially for New York's public employees and their families.



In New York State, the Empire State, you'll hear the word "Empire" again and again, even linked to other health plans. The correct name of your health insurance plan is the Empire Plan. The correct name means correct benefits. Tell your provider you're in the Empire Plan for New York public employees.