



MAY 2025

EMPIRE PLAN REPORT

Participating Agencies

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



Department of Civil Service
The Empire Plan



WHAT'S NEW

This *Empire Plan Report* summarizes the changes to your benefits and coverage under the New York State Health Insurance Program (NYSHIP) and The Empire Plan. The *Empire Plan Certificate* and corresponding *Certificate Amendments* reflecting the changes outlined in this *Report* will be posted on the NYSHIP website.

You can access your group *Certificate* and *Amendments* on the NYSHIP website (see *Benefits on the Web*, page 11). From the homepage, select Using Your Benefits and then Current Publications.

This *Report* includes information about:

- No Copayment for Insulin (page 2)
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Empire Plan Changes

No Copayment for Insulin

Effective January 1, 2025, there is no copayment for all covered insulin. You do not have to make any changes to your prescription; your claims will process at a \$0 copayment when you use an in-network pharmacy. To see the current list of covered insulins, visit the NYSHIP website (see *Benefits on the Web*, page 11) for the Empire Plan Advanced Flexible Formulary or visit www.empireplanrxprogram.com.

No Hospital Extension Clinic Facility Fees

A hospital extension clinic is a clinic that is owned and operated by a hospital. When you see a physician or receive services at a hospital extension clinic, you are being treated at a hospital-owned facility, even if the location where you receive services is located miles away from the main hospital campus or in your physician's office. If you go to a hospital extension clinic for an office visit, you can be responsible for a Medical/Surgical Program (professional services) copayment. You will not be responsible for facility fee charges or facility fee copayments. However, if you receive additional services, such as laboratory or radiology, you can also be responsible for a Hospital Program (outpatient facility) copayment.

Empire Plan NurseLineSM

If you have a health question, call The Empire Plan NurseLineSM. This service allows you to speak to a registered nurse who can answer your general health and coverage questions. Your call is confidential, and nurses are available 24 hours a day, seven days a week.

When you call, a nurse can:

- Assist you in determining the best treatment option(s) based upon the symptoms you or a covered dependent are experiencing
- Help you understand your health care coverage
- Help you find an in-network doctor, clinic or specialist and decide where to go for care
- Answer your questions after a visit with a health care provider
- Share preventive screening recommendations and make sure you are managing your health conditions and understand the latest treatment options
- Explain your medications, suggest generic options and inform you of any potential side effects

If you have a question about your health or benefits, call The Empire Plan (see *Contact Information*, page 11) and press or say 5 for the NurseLineSM.

Donor Milk Benefit

The Empire Plan now covers the use of pasteurized human donor milk for infants, subject to deductible and coinsurance, when an order is issued by a health care professional. The donor milk may include fortifiers. An infant must have a documented birth weight of less than 1,500 grams, or a congenital or acquired condition that places the infant at a high risk for development of necrotizing enterocolitis. Eligible infants include those who are medically or physically unable to receive maternal breast milk, participate in breast feeding or whose mother is medically or physically unable to produce maternal breast milk. A mother must be unable to produce maternal breast milk at all or in sufficient quantities or participate in breast feeding despite optimal lactation support.



Using Your Benefits

Know Where To Go

When you're not feeling well, where should you go for care—a virtual visit, your primary care provider, an urgent care center or the emergency department? Picking the right option can help ensure you get the appropriate care you need. Choosing wisely also could save you time and money.



Virtual Visits

If you or a covered dependent have flu or cold symptoms, pink eye or a urinary tract infection, a virtual visit with an Empire Plan provider can be a cost-effective and convenient choice. When you use LiveHealth Online (LHO), there is no copayment, providers are available 24 hours a day, seven days a week and the wait time is typically less than 20 minutes. For more information and to register for LHO, go to the Hospital Program website (see *Contact Information*, page 11).



Primary Care Provider

In addition to routine health exams, you may want to visit your Empire Plan primary care provider's office if you are experiencing minor asthma, bronchitis or sinus problems. You may have to pay a \$25 copayment for an office visit with your provider. Visits to your primary care provider are generally by appointment only. See *Empire Plan Online Provider Directory*, page 9, for information on how to find a participating provider.



Urgent Care Center

When you or a covered dependent have an illness or injury that requires prompt attention but isn't life threatening, an urgent care center may be the right choice. The copayment for a network urgent care center visit is less than the copayment for receiving care at an emergency department. Urgent care centers often have after-hours care and no appointment is needed.



Emergency Department

If you experience life-threatening symptoms, such as chest pain, major burns or severe injuries, you should immediately go or be taken to the nearest hospital emergency department. You will pay one copayment per visit to an emergency department. The copayment is waived if you are admitted as an inpatient directly from the emergency department. They are available 24 hours a day, seven days a week.



Call the NurseLineSM

If you have a question about where you or a covered dependent should go for care, call The Empire Plan (see *Contact Information*, page 11) and press or say 5 for the NurseLineSM. They can help you determine your best treatment option based on your symptoms and help you locate a provider.



Centers of Excellence

The Empire Plan Centers of Excellence (COEs) are a select group of providers recognized as leaders in specific fields of medicine. There are COEs for cancer treatment, transplants, infertility and substance use disorder. The benefits under the COEs are available only when you enroll and receive prior approval from The Empire Plan.

At a COE, you receive paid-in-full benefits for covered services with no copayments. However, you may have out-of-pocket expenses for certain services that you receive at a different location than a Center. If you use a nonparticipating provider, the Basic Medical deductible and coinsurance will apply. If you travel within the United States for care at a COE, a travel, lodging and meal allowance may be available.

COE for Cancer Program

The COE for Cancer Program provides coverage for cancer-related services through the Cancer Resource Services (CRS), a nationwide network of leading cancer centers. You receive paid-in-full benefits for cancer treatment that is provided at a CRS cancer center, including inpatient and outpatient hospital services, physician care, routine follow-up care, clinical trials and related treatment and services provided by a physician. CRS nurse consultants will answer your cancer-related questions, help you understand your cancer diagnosis, provide assistance in locating designated cancer centers and explain the travel allowance.

You must call The Empire Plan and choose the Medical/Surgical Program (see *Contact Information*, page 11) to enroll in this Program.

COE for Transplants Program

The COE for Transplants Program offers paid-in-full benefits at a designated COE or a Blue Cross Blue Shield Association's Blue Distinction Centers for Transplants and paid-in-full benefits at facilities in New York State recognized by the Hospital Program administrator for their excellence in kidney transplantation. You must call the Hospital Program (see *Contact Information*, page 11) for preauthorization. Medicare-primary enrollees are also eligible for the Program and must call to enroll.

COE for Transplants Program transplant services include pretransplant evaluation of transplant recipient, inpatient and outpatient hospital and physician services and up to 12 months of follow-up care. You must call The Empire Plan for preauthorization of the following transplants provided through the COE for Transplants Program:

- Bone marrow
- Cord blood stem cell
- Heart
- Heart-lung
- Kidney
- Liver
- Lung
- Pancreas
- Pancreas after kidney
- Peripheral stem cell
- Simultaneous kidney/pancreas

If you choose to have your transplant at a facility other than a designated COE, or if you require a small bowel or multivisceral transplant, you may still use the Hospital Program's case management services. If a transplant is authorized but you do not use a designated COE, benefits will be provided in accordance with Hospital and/or Medical/Surgical Program coverage.

COE for Infertility Program

The COE for Infertility Program provides paid-in-full benefits for Qualified Procedures that facilitate a pregnancy (see list below), subject to a \$50,000 lifetime maximum per covered person. The COEs for Infertility offer top fertility specialists and treatment facilities that meet or exceed best practice criteria.

Qualified Procedures that facilitate a pregnancy include:

- Assisted reproductive technology (ART) procedures, including:
 - IVF embryo placement
 - Intracytoplasmic sperm injection (ICSI) for the treatment of male infertility
 - Assisted hatching
 - Microsurgical sperm aspiration and extraction procedures, including:
 - Microsurgical epididymal sperm aspiration (MESA)
 - Testicular sperm extraction (TESE)
- Sperm, egg and/or inseminated egg procurement and processing and banking of sperm or inseminated eggs, including expenses associated with cryopreservation (freezing and storage of sperm, eggs or embryos)

When using a COE for Infertility, up to three in vitro fertilization (IVF) cycles, including covered travel, lodging and meal expenses for these three IVF cycles, are not subject to the \$50,000 lifetime maximum. Other Basic Infertility covered services and supplies include, but are not limited to:

- Patient education/program orientation
- Diagnostic testing, including preimplantation genetic testing in certain circumstances
- Ovulation induction/hormonal therapy
- Artificial/intrauterine insemination
- Surgery to enhance reproductive capability

Exclusions and limits apply to infertility benefits. Contact the Medical/Surgical Program (see *Contact Information*, page 11) to verify coverage or to find out how using a COE offers you the highest level of benefits for infertility care.

COE for Substance Use Disorder Program

The COE for Substance Use Disorder Program, in partnership with the nationally recognized Hazelden Betty Ford (HBF) Foundation, provides paid-in-full benefits for substance use disorder treatment when received through the Mental Health and Substance Use (MHSU) Program with network providers.

When prior authorization is obtained, the COE offers paid-in-full benefits for the following services:

- Assessment prior to treatment from Hazelden Betty Ford at one of the Hazelden Betty Ford COE locations for the following levels of care:
 - Detoxification facilities offered in California, Minnesota and Oregon
 - Residential facilities offered in California, Florida, Minnesota and Oregon
 - Partial hospitalization (with boarding) services offered in California, Florida, Illinois, Minnesota and Oregon
 - Intensive outpatient services offered in New York, California, Florida, Illinois, Minnesota, Oregon and Washington
- Care coordination for transition back to home community
- Support program for children ages seven to 12 who are impacted by addiction
- Family treatment and support, including individual virtual support services

When applicable, a travel, lodging and meal allowance is available. The travel allowance will include coverage for up to two companions, regardless of the patient's age. Participation in a COE Program is voluntary. The Program is only available to Empire Plan-primary enrollees; Medicare-primary members are not eligible.

Outpatient services are available through Hazelden Betty Ford, outside of the COE Program with no prior authorization required, utilizing your in-network benefits. Services are offered in New York, California, Illinois, Minnesota, Oregon and Washington.

COE Travel Allowance

When you are enrolled in a COE Program or use a COE for Infertility Program Qualified Procedures, a travel, lodging and meal expenses benefit is available for travel within the United States. The benefit is available to the patient and one travel companion when the facility is more than 100 miles (200 miles for airfare) from the patient's home. If the patient is a minor child, the benefit will include coverage for up to two companions.

If you are enrolled in the Substance Use Disorder Program, the travel benefit provides coverage for up to two companions, regardless of the patient's age. Benefits will be provided for one lodging per day.

Reimbursement for lodging and meals will be limited to the U.S. General Services Administration per diem rate. Reimbursement for automobile mileage will be based on the Internal Revenue Service medical rate.

For more information on the COEs and the travel allowance, see the publication *Reporting On Centers of Excellence Programs*, visit the NYSHIP website (see *Benefits on the Web*, page 11) or call The Empire Plan (see *Contact Information*, page 11).

New Infertility COEs

The Empire Plan COE for Infertility Program offers enrollees the best in reproductive medical technology and infertility procedures. Participating Centers in the Infertility COE Program are qualified by UnitedHealthcare, the Medical/Surgical Program administrator, using criteria that includes volume of in vitro fertilization (IVF) cases, success rate of live births per retrieval, range of services, personnel/credentials, laboratory service, ultrasound procedures, record keeping, informed consent, patient access, outcomes data and emergency transfer planning.

Coming in 2025, The Empire Plan will add three new Infertility COEs:

Gold Coast IVF
246 Crossways Park Drive West
Woodbury, NY 11797
(516) 682-8900

Westmed Reproductive Services
3030 Westchester Avenue
Purchase, NY 10577
(914) 607-6270

Northwell Health Fertility North Shore LIJ Medical
300 Community Drive
Manhasset, NY 11030
(516) 562-2229

For more information about a COE for Infertility and for a full list of Infertility COEs, contact UnitedHealthcare (see *Contact Information*, page 11).



My Health Check-in

Anthem's My Health Check-in is a no-cost, online risk assessment survey that you can take at any time, including before an appointment with your primary care provider, designed to provide you with the care you need.

The My Health Check-in survey will ask you a series of questions about your health history, current health and daily routine and takes less than 10 minutes to complete. After completing the survey, you will receive personalized recommendations and specific resources.

You can take the My Health Check-in on the Anthem website or on the Sydney app. For more information, call the Hospital Program (see *Contact Information*, page 11).

Anthem's GlobalCore Program

When you travel internationally, you can use Anthem's GlobalCore Program website or app to find doctors and hospitals outside of the United States, Puerto Rico and U.S. Virgin Islands. You also can find other resources on the GlobalCore website and app to help you stay safe and healthy around the world.

Download the GlobalCore app on your smartphone so you can search and map for providers while traveling abroad. The app provides embassy locations and contact information. It also features translation for medical terms and phrases for many symptoms and situations, including an audio feature to play translations out loud.

When you need care in a hospital outside of the United States, you can maximize your benefits and minimize your out-of-pocket cost by going to a GlobalCore participating facility. Use the app, visit www.bcbsglobalcore.com (enter code YLS) or call 1-800-810-BLUE (1-800-810-2583) to locate a participating facility. If calling from outside of the continental United States, you can make a collect call to 1-804-673-1177.

For more information on the GlobalCore Program, contact the Hospital Program (see *Contact Information*, page 11).



NYSHIP Information

Empire Plan Online Provider Directory

The Empire Plan provider directory is available online. Visit the NYSHIP website (see *Benefits on the Web*, page 11) to choose from a nationwide network of over one million providers, 15,000 hospitals and 9,000 pharmacies.

The Empire Plan program administrators—UnitedHealthcare, Anthem Blue Cross, Caredon Behavioral Health and CVS Caremark—each have online directories for their providers and services. To find a provider, click on the desired program directory link and follow the prompts on the page to view a list of options near you.

For the Medical/Surgical Program, visit the UnitedHealthcare online directory to search for participating providers, laboratories, outpatient surgical locations, cardiac rehabilitation centers, physical rehabilitation centers and urgent care centers.

For the Hospital Program, visit the Anthem Blue Cross online directory to locate hospitals, hospices and skilled nursing facilities.

For the Mental Health and Substance Use Program, visit the Caredon Behavioral Health online directory to find participating providers and facilities, education and screening materials and disease management programs.

For the Prescription Drug Program, visit the CVS Caremark online directory to find pharmacy locations and order mail service prescriptions online at a reduced cost.

If you need to use a nonparticipating provider or facility, visit the Basic Medical Provider Discount Program Directory to find a nonparticipating provider who is part of the MultiPlan group to lower your out-of-pocket expenses, in most cases.

If you need help finding a provider, call The Empire Plan and select the prompt for the appropriate program (see *Contact Information*, page 11).

Empire Plan Certificates and Amendments

The *Empire Plan Certificates and Amendments* provide an in-depth description of the benefits provided through The Empire Plan. Both your *Certificate* and *Amendments* with benefits effective through December 31, 2023, are available on the NYSHIP website. The *Amendments*, which detail benefit changes since your printed *Certificate* was issued, have been included in the updated online *Certificate*.

A new *Certificate* containing all Empire Plan benefit changes effective January 1, 2025, will be available when complete. For the most updated version of your *Certificate* and *Amendments*, visit the NYSHIP website (see *Benefits on the Web*, page 11).

Empire Plan Benefit Cards

In compliance with federal law, new Empire Plan benefit cards were issued to you and your covered dependents for 2025 that include maximum out-of-pocket information. Please use the new card and securely destroy the old one.

Before you receive services from a new provider, check that they participate in the network for The Empire Plan. If you or a dependent are Medicare-primary, make sure the provider participates in both Medicare and The Empire Plan network. If you have questions about your Empire Plan benefit card, contact your Health Benefits Administrator. For questions regarding your Empire Plan benefits, call the Plan and select the prompt for the appropriate program (see *Contact Information*, page 11).

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 designed to improve health insurance information so you better understand your coverage. Some terms used in the *SBC* are defined in the *Uniform Glossary*, a non-customized companion document to the *SBC*.

To view the *SBC* or the *Uniform Glossary* for The Empire Plan, visit www.cs.ny.gov/sbc and choose your group. To request a copy, call The Empire Plan and choose the Medical/Surgical Program (see *Contact Information*, page 11).

Reminders

Annual Notice of Mastectomy and Reconstructive Surgery Benefits

The Empire Plan covers inpatient hospital care for lymph node dissection, lumpectomy and mastectomy for treatment of breast cancer for as long as the physician and patient determine hospitalization is medically necessary. The Empire Plan covers all stages of reconstructive breast or chest wall reconstruction surgery following mastectomy, including surgery on the other breast to produce a symmetrical appearance. Chest wall reconstruction surgery includes aesthetic flat closure as defined by the National Cancer Institute.

Call The Empire Plan and choose the Medical/Surgical Program (see *Contact Information*, page 11) if you have questions about your coverage for implants, breast forms or other prostheses related to breast cancer treatment.

Empire Plan Benefits Management Program requirements apply. See your *Empire Plan Certificate* for more information.

Annual Notice of Colorectal Cancer Screening Benefit

In accordance with the United States Preventive Services Task Force (USPSTF), The Empire Plan covers preventive colorectal cancer screenings and laboratory tests for enrollees ages 45 through 75 when performed by a participating provider. This benefit includes an initial colonoscopy or other medical test for colon cancer screening and a follow-up colonoscopy performed because of a positive result from a non-colonoscopy preventive screening test. This benefit includes coverage of medications that will provide adequate bowel preparation, pre-procedure consultation and any resulting pathology exam or polyp biopsy. While a copayment would not apply for the initial preventive procedure(s) or bowel preparation medications, additional screenings provided in accordance with the American Cancer Society (ACS) guidelines may be considered diagnostic and may have a copayment. For more information on ACS guidelines, go to www.cancer.org/cancer/types/colon-rectal-cancer/detection-diagnosis-staging.html.

If you have questions about your coverage for preventive colorectal cancer screenings and follow-up diagnostic care, call The Empire Plan and choose the Medical/Surgical Program (see *Contact Information*, page 11).

Empire Plan Benefits Management Program requirements apply. See your *Empire Plan Certificate* for more information.

Keep Your Enrollment Record Up to Date

It is important to keep us up to date with changes in your life to ensure you receive timely and appropriate information about your health insurance coverage. 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.

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 will 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.

Contact Information

Call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select the appropriate program.	
PRESS OR SAY 1	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 Anthem Blue Cross Administrative services are provided by Anthem HealthChoice Assurance, Inc., a licensee of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans. Representatives are available Monday through Friday, 8 a.m. to 5 p.m., Eastern time. TTY: 711 New York State Service Center, P.O. Box 1407, Church Street Station, New York, NY 10008-1407 Claims submission fax: 866-829-2395 Online: www.anthembluecross.com/nys/resources-forms
PRESS OR SAY 3	Mental Health and Substance Use Program: Administered by Carelon Behavioral Health Representatives are available 24 hours a day, seven days a week. TTY: 711 P.O. Box 1850, Hicksville, NY 11802 Claims submission fax: 855-378-8309 Online: www.carelonbh.com/empireplan/en/home
PRESS OR SAY 4	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 NurseLineSM: Administered by UnitedHealthcare Registered nurses are available 24 hours a day, seven days a week to answer health-related questions.

Benefits on the Web

To learn more about your benefits, including finding Empire Plan providers and updated NYSHIP publications, go to the NYSHIP website at www.cs.ny.gov/employee-benefits. If you are an active employee, select Participating Agency (PA) and Empire Plan to access the NYSHIP website homepage. Select NYSHIP for Retirees, Login as PA and Empire Plan if you are a retiree.

The *Empire 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.



Department of Civil Service
New York State Health Insurance Program

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

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

SAVE THIS DOCUMENT



Department of Civil Service
New York State Health Insurance Program

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

PA Empire Plan Report – May 2025

**Please do not send mail
or correspondence to the
return address. See address
information on page 11.**

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 the NYSHIP website at www.cs.ny.gov/employee-benefits. Visit the NYSHIP website 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.

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PA Empire Plan Report – 5/25 PA0242

Online Options

The Empire Plan makes it easy for you to find information online about the Plan and its programs. Visit the NYSHIP website at www.cs.ny.gov/employee-benefits. Select Participating Agency (PA) and Empire Plan, if you are an active employee, to access the NYSHIP website homepage. If you are a retiree, select NYSHIP for Retirees, Login as PA and Empire Plan.

The Medical/Surgical Program is administered by UnitedHealthcare. UnitedHealthcare's customized website, www.myuhc.com, allows enrollees to access information about the Program, track claims and history, print explanation of benefits (EOBs), create personalized provider directories and more. Their mobile app allows you to manage your health quickly and securely.

The Hospital Program is administered by Anthem Blue Cross. The Anthem website, www.anthembluecross.com, lets you update or verify your coordination of benefits, access LiveHealth Online and download their Sydney Health app. With LiveHealth Online, you can have a virtual visit with a board-certified doctor or therapist

at any time, 24 hours a day, seven days a week. You can use Live Chat to find out information about your benefits by chatting with an Anthem representative in real time.

The Mental Health and Substance Use Program is administered by Carelon Behavioral Health. The Empire Plan Carelon website, www.carelonbh.com/empireplan/en/home, gives you access to the Clinical Referral Line, TalkSpace, Equip and a provider directory where you can search by specialty, service or provider name. TalkSpace offers online therapy through text, audio and video sessions anytime, anywhere.

The Empire Plan Prescription Drug Program is administered by CVS Caremark. The Empire Plan Medicare Rx prescription drug plan for Medicare-primary enrollees and dependents is administered by SilverScript Insurance Company, an affiliate of CVS Caremark. Enrollees can access the Formulary, drug pricing tools, prescription refills and find a local pharmacy on the Program website, www.empireplanrxprogram.com.