

ANDREW M. CUOMO
Governor
LOLA W. BRABHAM
Commissioner

August 18, 2020

Mr. George Babitsch Senior Vice President, Account Management EmblemHealth 55 Water Street New York, NY 10041

VIA U.S. POSTAL MAIL & ELECTRONIC MAIL:

gbabitsch@emblemhealth.com

RE: Clarification Request #1 - Solicitation entitled: "Health Maintenance Organizations Specifications for the New York State Health Insurance Program"

Dear Mr. Babitsch:

On July 24, 2020, Health Insurance Plan of Greater New York (dba EmblemHealth) submitted a proposal in response to the Department of Civil Service's above solicitation. Upon review, the Joint Labor Management Committee (JLMC) identified the following sections of your proposal that require clarification:

Administrative Proposal:

- Tab 3. Subcontractors and Affiliates: Please confirm EmblemHealth will notify the JLMC of any changes to subcontractors that occur after the submission of its proposal and prior to the end of the contract with the Department. We note several contracts that expire during this timeframe in your proposal.
- Page 16, Tab 3. Subcontractors and Affiliates: Please provide the contract beginning and end dates for Cognizant, who is providing Call Center and Claims Processing services.

Technical Proposal:

1. Page 21, Question 5: Delaware and Columbia Counties each have minimal to no specialty provider access in many areas. Saratoga County does not have any radiology facilities; Sullivan County has less than 50% access to allergists and optometrists; Washington County does not have access to any rheumatologists, clinical labs, radiology facilities and OB/GYNs. What has contributed to the

- deficiencies and what actions are being taken by EmblemHealth to ensure access will improve?
- 2. Page 23, Question 5: In accordance with Section 5.1.5 of the Specifications, please submit a Network Access snapshot that includes the entire proposed Medicare Advantage Plan (MAP) service area.
- **3.** Page 28, Question 13: Per Exhibit 7, there were no external appeals filed by NYSHIP members. Please confirm if this is correct.
- **4.** Page 30, Question 17: EmblemHealth indicates that it has maintained a 3-Star CMS rating since the 2019 plan year. Please advise how EmblemHealth plans to improve this rating.
- 5. Page 30, Question 18: EmblemHealth states Medicare enrollments can be reported up to a bi-weekly basis, which is contrary to the requirement to provide weekly notification as stated in Section 3.4.1.b.xii. Please confirm that EmblemHealth will supply this file on a weekly basis.
- **6.** Page 48, Question 1 (Attachment 14): Please provide the number of times per year changes are made to the Prescription Drug Formulary.
- 7. Page 278 and 299, Prime Schedule of Benefits: This document indicates a \$75 copay for an observation stay. If this is a change for 2021, please add it to the Side-by-Side comparison. This change should be included in *Choices* as well.
- 8. Page 742, Attachment 35, HMO Benefits for 2021: This document indicates an increase in the chemotherapy copay when performed in a specialist office to \$10, but it is already \$10 for 2020. Please submit a corrected copy.
- 9. Pages 765, Side-by-Side: This document indicates a change in copay for chemotherapy in a specialist's office from \$5 to \$10, but the 2020 copay is already \$10. Please submit a corrected copy.
- **10.** Pages 781, 782, 785 and 786, The HIP Prime HMO 2020 Summary of Benefits: This document should indicate 2021, not 2020. Please submit a corrected copy. Additionally, why are pages 783 and 787 included as they relate to 2020?
- 11.Pages 789 and 799, Summary of Benefits and Coverage: This document indicates no charge for emergency room care, but there should be a \$75 copay for the Commercial HMO and a \$25 copay for the MAP. Please submit a corrected copy.

- **12. Pages 790 and 800, Summary of Benefits and Coverage:** This document indicates 40 visits per plan year for home health care, but it should be 200 visits as listed in Commercial Schedule of Benefits on page 269. Please submit a corrected copy.
- 13. Pages 790 and 800, Summary of Benefits and Coverage: The SBC indicates a benefit of 30 days per plan year for skilled nursing care. However, the Commercial Benefits Chart indicates no such limitation and the Medicare Advantage Benefits Chart indicates a 100-day limit for the MAP. Please confirm which documents are correct and submit revised versions of the incorrect materials.
- **14. Pages 790 and 800, Summary of Benefits and Coverage:** The SBC indicates Durable Medical Equipment (DME) is not covered, but in the Commercial Schedule of Benefits, on page 276, it should indicate covered at no copay. Please submit a corrected copy.
- **15. Page 844, Website Access:** Please provide dummy login credentials so that the JLMC may review the member portal.
- 16.NYSHIP Eligibility Rider, Evidence of Coverage and other documents marked as "Draft": Please confirm that finalized versions of all submitted "Draft" and "Pending" documents will be distributed to the JLMC as soon as they are available.
- 17. Choices Commercial: The following services appear to be newly added to the Commercial Choices page and were not included in the Side-by-Side Comparison Benefit Changes 2020 to 2021 Commercial HMO document. If these services/cost sharing requirements are a change, please update the Side-by-Side Comparison accordingly and submit the corrected document for Outpatient Surgery Physician's Office No Copayment; Telemedicine \$5 PCP/\$10 Specialist.
- 18. Choices MAP: Regarding Inpatient Mental Health for the MAP, there is a 190-day lifetime limit for psychiatric facilities. Please explain how this is consistent with the Mental Health Parity Addiction and Equity Act (MHPAEA). Are lifetime limits for this benefit allowed under the Patient Protection and Affordable Care Act (PPACA)?
- **19. Choices MAP:** Please provide what the cost sharing is for Air Ambulance for participating and non-participating providers.
- **20. The Certificate of Coverage:** The age limits for infertility treatments (ages 21-44) should be removed per New York State legislation.

- 21. EmblemHealth did not include Optional Marketing Materials in its submission. Please confirm if EmblemHealth does not intend to send any Optional Marketing Material to NYSHIP members for the 2021 Plan Year. If not confirmed, please submit proposed Optional Marketing Materials.
- **22.** The MAP charges a \$5 copay per visit for pre- and post-natal visits. Is this allowed per PPACA?
- **23.** Please update all Communications materials to members where the 2021 benefit levels are not properly reflected.

A response to this request is due no later than August 25, 2020. Please email your response to DCSProcurement@cs.ny.gov. We look forward to your timely response and advancing to the next stage of the solicitation process.

Sincerely,

James DeWan

Director

Employee Benefits Division



Health Maintenance Organizations Specifications for the New York State Health Insurance Program (NYSHIP)

August 25, 2020

Submitted to:

New York State Department of Civil Services

Attn: Brian Bopp, Assistant Director of Financial Administration

Office of Financial Administration, Floor 17 Agency Building 1, Empire State Plaza

Albany, New York 12239 **Phone:** (518) 473-2726

Email: DCSprocurement@cs.ny.gov





Disclaimer Information

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EmblemHealth benefit plans are underwritten by Group Health Incorporated (GHI), Health Insurance Plan of Greater New York (HIP), and HIP Insurance Company of New York.

GHI, HIP, HIP Insurance Company of New York, and EmblemHealth Services Company, LLC are all EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to EmblemHealth companies.

Corporate Headquarters

EmblemHealth 55 Water Street New York, NY 10041 emblemhealth.com

Contact Information

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A. Clarifying Questions: Administrative Proposal

1. Tab 3. Subcontractors and Affiliates: Please confirm EmblemHealth will notify the JLMC of any changes to subcontractors that occur after the submission of its proposal and prior to the end of the contract with the Department. We note several contracts that expire during this timeframe in your proposal.

Confirmed. We will ensure proper notification is provided to the JLMC should any subcontractors change at any time throughout the duration of the contract. Note that we do not anticipate any subcontractor changes and all contracts will continue to be renewed.

2. Page 16, Tab 3. Subcontractors and Affiliates: Please provide the contract beginning and end dates for Cognizant, who is providing Call Center and Claims Processing services.

EmblemHealth's contract with Cognizant was signed on April 14, 2016 and is valid through April 14, 2023. We also have three one-year renewal options available as well.





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B. Clarifying Questions: Technical Proposal

1. Page 21, Question 5: Delaware and Columbia Counties each have minimal to no specialty provider access in many areas. Saratoga County does not have any radiology facilities; Sullivan County has less than 50% access to allergists and optometrists; Washington County does not have access to any rheumatologists, clinical labs, radiology facilities and OB/GYNs. What has contributed to the deficiencies and what actions are being taken by EmblemHealth to ensure access will improve?

EmblemHealth's network access results are performed based on our current NYSHIP members' census information, including our members' known zip codes where they are currently residing, since there is no general census provided by the Department. In addition, the results are run according to our established access standards as shown in our original *Exhibit 2. Access Standards* on page 19 of our Technical Proposal submission. Therefore, some areas may show limited or no access based on our current census. For example, if we only have a few members that reside within one zip code of rural Delaware County, but the providers available are all based in the main town of Delhi in a separate zip code, then our results could show no access if the providers are outside of our established access standards.

EmblemHealth maintains access to providers to serve all members within our proposed service area. Some members that reside in a rural area may need to go to the other side of their county or to a neighboring county to receive service. Many rural counties, such as Delaware, have no access to some specialty providers since there are no licensed providers based in that county. Some counties also only have a single licensed provider. To ensure sufficient access when little to no providers are available, we go to neighboring counties to ensure access. Please see *Attachment 1. Network Access* for our analysis conducted for the counties noted. In the far-right hand column, we have included access information to note where the county may have no licensed providers, or are limited to a single provider, due to the rural nature of the county.

As for the facilities noted, EmblemHealth leverages the EviCore network of providers for free-standing radiology. We do have a radiology facility in network in Saratoga located at:

 Adirondack Radiology Associates PC dba Saratoga Imaging Center 3 Care Lane, Suite 100 Saratoga Springs, NY 12866

Once again, our network access table noted 0 for Radiology Facility in Saratoga since the EmblemHealth members we have in Saratoga were outside of our established radius based on our access standards. These members may live in a remote part of the rural county and not near the main town.





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As for Washington County, there are no free-standing radiology facilities in this county to recruit into our network. However, there is one provider participating in neighboring Warren County located at:

Adirondack Radiology Associates, PC dba North Country Imaging Center
 11 Murray Street
 Glens Falls, NY

Finally, EmblemHealth's Provider Relations and Provider Network Teams continually monitor for new providers and emerging practices and facilities so that as new providers become available, they are actively targeted and recruited into our network. We will continue to actively recruit new providers and maintain our existing provider network to continue to ensure appropriate access for all members, including those who reside in rural parts of the state.

2. Page 23, Question 5: In accordance with Section 5.1.5 of the Specifications, please submit a Network Access snapshot that includes the entire proposed Medicare Advantage Plan (MAP) service area.

EmblemHealth's Network Access snapshot was run based on our current NYSHIP membership since no general census was provided. Therefore, the counties which were left off of our original information provided had no EmblemHealth Medicare Advantage members and therefore no access information could be run and determined for those areas. Many of those counties showed no members due to the fact that they are newly added counties to our proposed Medicare Advantage service area. With no member census data (zip codes) to run, the table results would simply show as 0 at this time.

EmblemHealth continuously monitors its Medicare Advantage network in our proposed counties and meets all current CMS network adequacy requirements as defined under 42 C.F.R. 422.116. Please see *Attachment 2. CMS Adequacy Standards* for this excerpt containing the final rule on adequacy criteria that applies to Medicare Advantage plans depending on the county designation. In addition, CMS network adequacy criteria includes provider and facility specialty types that must be available consistent with CMS number, time, and distance standards. Access to each specialty type is assessed using quantitative standards based on the local availability of providers and facilities to ensure that organizations contract with a sufficient number of providers and facilities to furnish healthcare services without placing undue burden on the enrollees seeking covered services.

EmblemHealth is required to submit network adequacy reports, including details on our network providers and facilities, as required by CMS. Please see our *Attachment 3. Facility File Adequacy Report* and *Attachment 4. Provider File Adequacy Report* for the latest information submitted. In addition, please see our provider files (Attachments 6 and 7) included within our original Technical Proposal submission which further demonstrate





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access to all counties within our proposed Medicare Advantage service area. In addition, as we move forward and gain membership in these counties, future Network Access snapshots will include these counties since we will have member data to run our provider network against.

3. Page 28, Question 13: Per Exhibit 7, there were no external appeals filed by NYSHIP members. Please confirm if this is correct.

Confirmed. The information as originally provided in Exhibit 7 is correct.

4. Page 30, Question 17: EmblemHealth indicates that it has maintained a 3-Star CMS rating since the 2019 plan year. Please advise how EmblemHealth plans to improve this rating.

EmblemHealth has implemented many internal and external initiatives to improve our Star rating. We are continuing to closely track and monitor our internal data processes, cross collaborate with key business partners, and offer our members rich plan benefits. We are closely monitoring and implementing changes based on CMS guidance and recommendations with a focus that aligns all of our business areas on our member experience.

Further, we continue to enhance our data collection and exchange processes with our network provider groups and have developed Physician Engagement Teams to partner with these provider groups to drive high quality outcomes for our members. Member engagement and satisfaction is at the core of all of our improvement efforts, and we serve as a resource for our members through our member portal, preventive care education, care management programs, and outreach teams who focus on helping members close gaps in care, schedule medical appointments, and arrange transportation, and act as a resource for all of our members' healthcare needs.

5. Page 30, Question 18: EmblemHealth states Medicare enrollments can be reported up to a bi-weekly basis, which is contrary to the requirement to provide weekly notification as stated in Section 3.4.1.b.xii. Please confirm that EmblemHealth will supply this file on a weekly basis.

Confirmed. EmblemHealth will provide all required reporting on a weekly basis.





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6. Page 48, Question 1 (Attachment 14): Please provide the number of times per year changes are made to the Prescription Drug Formulary.

EmblemHealth tries to minimize member disruption by limiting negative formulary changes to twice a year for our commercial plans. All members that are impacted are provided with advance notification of the changes to their formulary. All formulary changes are reviewed and approved by EmblemHealth's Pharmacy and Therapeutics Committee.

Our Pharmacy & Therapeutics Committee consists of licensed pharmacists and board certified primary care and specialty physicians. The committee meets quarterly (four times per year) to provide advice and/or consent regarding the development and regular review and revision of EmblemHealth's pharmaceutical management procedures. In addition, the committee performs regular review of new drugs and drug classes to determine placement on the formulary.

The goal is to determine and promote the most effective and safe prescription medications for treating particular conditions and/or diseases. As the FDA approves new drugs, they are reviewed for formulary placement in comparison to similar competing drugs from other manufacturers. Recommendations for formulary placement occurs throughout the year as new information becomes available. Decisions made are based on, but not limited to, scientific evidence, clinical studies, standards of practice, safety and efficacy, utilization, and pharmacoeconomic studies.

EmblemHealth limits negative formulary changes to once a year for our Medicare plans. All members that are impacted are provided advance notification of the changes to their formulary as required by CMS. EmblemHealth sends impacted members a Plan "Annual Notice of Change" (ANOC) each fall. The ANOC includes any changes in coverage, costs, and/or service area that will be effective in January.

7. Page 278 and 299, Prime Schedule of Benefits: This document indicates a \$75 copay for an observation stay. If this is a change for 2021, please add it to the Side-by-Side comparison. This change should be included in Choices as well.

Not Applicable – The \$75 copay for an observation stay is not a change for 2021.

8. Page 742, Attachment 35, HMO Benefits for 2021: This document indicates an increase in the chemotherapy copay when performed in a specialist office to \$10, but it is already \$10 for 2020. Please submit a corrected copy.

Our Commercial Benefits Chart has been updated to remove the change previously noted on the \$10 copay increase in a Specialist office for Chemotherapy since this was not a change from 2020. Please see our updated *Attachment 5. Updated Commercial Benefits Chart* included with our response.





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9. Pages 765, Side-by-Side: This document indicates a change in copay for chemotherapy in a specialist's office from \$5 to \$10, but the 2020 copay is already \$10. Please submit a corrected copy.

EmblemHealth's Side-by-Side Comparisons of Benefit Changes from 2020 to 2021 have been updated for both of our Active HMO plans (originally shown in pages 763 and 765) to remove the bullet "Performed in a Specialist Office" under the Chemotherapy benefit since this was not a change from 2020.

Please see Attachment 6. Updated Side-by-Side Comparison of Benefit Changes 2020 to 2021 Actives with Rx and Attachment 7. Updated Side-by-Side Comparison of Benefit Changes 2020 to 2021 Actives without Rx for this updated information.

10. Pages 781, 782, 785 and 786, The HIP Prime HMO 2020 Summary of Benefits: This document should indicate 2021, not 2020. Please submit a corrected copy. Additionally, why are pages 783 and 787 included as they relate to 2020?

The member-facing materials we originally submitted were draft versions only since these were not able to be fully updated prior to the submission deadline. Pages 783 and 787 are not applicable for this coming enrollment year since, unlike previous years, there were benefit changes made for 2021. Final copies will be provided as required to the JLMC contact members for review at least one week prior to our member mailings by the October 21, 2020 deadline.

As required, please see the following updated attachments included with our response:

- Attachment 8. Updated Commercial Member-facing Summary of Benefits -Actives with Rx
- Attachment 9. Updated Commercial Member-facing Plan Benefit Comparison -Actives with Rx
- Attachment 10. Updated Commercial Member-facing Summary of Benefits -Actives without Rx
- Attachment 11. Updated Commercial Member-facing Plan Benefit Comparison -Actives without Rx
- **11. Pages 789 and 799, Summary of Benefits and Coverage:** This document indicates no charge for emergency room care, but there should be a \$75 copay for the Commercial HMO and a \$25 copay for the MAP. Please submit a corrected copy.

Please see our updated Summary of Benefits and Coverage (SBCs) included with our submission. Our SBCs have been labeled as *Attachment 12. Updated Commercial SBC with Rx* and *Attachment 13. Updated Commercial SBC without Rx*.





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12. Pages 790 and 800, Summary of Benefits and Coverage: This document indicates 40 visits per plan year for home health care, but it should be 200 visits as listed in Commercial Schedule of Benefits on page 269. Please submit a corrected copy.

Confirmed. This has now been updated and reflected in our *Attachment 12. Updated Commercial SBC with Rx* and *Attachment 13. Updated Commercial SBC without Rx* submitted with our response.

13. Pages 790 and 800, Summary of Benefits and Coverage: The SBC indicates a benefit of 30 days per plan year for skilled nursing care. However, the Commercial Benefits Chart indicates no such limitation and the Medicare Advantage Benefits Chart indicates a 100-day limit for the MAP. Please confirm which documents are correct and submit revised versions of the incorrect materials.

Our Commercial SBCs have been updated to correctly reflect "Unlimited days. Preauthorization required." for skilled nursing care. Please see *Attachment 12. Updated Commercial SBC with Rx* and *Attachment 13. Updated Commercial SBC without Rx* submitted with our response.

14. Pages 790 and 800, Summary of Benefits and Coverage: The SBC indicates Durable Medical Equipment (DME) is not covered, but in the Commercial Schedule of Benefits, on page 276, it should indicate covered at no copay. Please submit a corrected copy.

Confirmed. Our SBCs have now been updated to correct this error. Please see *Attachment 12. Updated Commercial SBC with Rx* and *Attachment 13. Updated Commercial SBC without Rx* submitted with our response.

15. Page 844, Website Access: Please provide dummy login credentials so that the JLMC may review the member portal.

As a standard, EmblemHealth does not provide dummy accounts for our member portal. However, to support the JLMC in understanding the content and self-service functions available through our portal, we can provide a live demo upon request.

16. NYSHIP Eligibility Rider, Evidence of Coverage and other documents marked as"**Draft**": Please confirm that finalized versions of all submitted "Draft" and "Pending" documents will be distributed to the JLMC as soon as they are available.

Confirmed. All documents will be distributed to the JLMC as final versions become available. Note that since our original submission, our NYSHIP Eligibility Rider has been approved. Please see *Attachment 14. Approved NYSHIP Eligibility Rider* included with our response.





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17. Choices - Commercial: The following services appear to be newly added to the Commercial Choices page and were not included in the Side-by-Side Comparison Benefit Changes 2020 to 2021 Commercial HMO document. If these services/cost sharing requirements are a change, please update the Side-by-Side Comparison accordingly and submit the corrected document for Outpatient Surgery - Physician's Office - No Copayment; Telemedicine - \$5 PCP/\$10 Specialist.

After reviewing the information originally provided, there are no changes required for these items. The Outpatient Surgery in a Physician's Office copay and our Telehealth coverage are not changes from the prior year. Note that Telemedicine is the current wording used in the online Choices pages; however, EmblemHealth covers Telehealth as a covered benefit and has covered Telehealth in prior years. Our footnote #2 as originally provided for Telemedicine was added to clarify that "Telemedicine should read as Telehealth".

EmblemHealth provides Telehealth coverage today under our Commercial HIP Prime HMO Plan so this is not a change from the prior year. Our Telehealth coverage enables a physician in network to conduct a Telehealth appointment in lieu of an in-person appointment if needed. Telehealth services are subject to the same cost sharing that would apply if the member had physically gone to that participating provider for care. Members are responsible for a \$5 copay for a Primary Care Physician (PCP) visit and a \$10 copay for a Specialist visit as noted in our Choices pages submitted.

Apart from our Telehealth coverage already provided, EmblemHealth has an established partnership with Teladoc® to provide Telemedicine services to covered enrollees via online, virtual physicians 24 hours a day, seven days a week. This is a separate, new benefit that is not included today but could be added to support Commercial and/or Medicare enrollees at an additional cost for 2021. We are including this separate, additional price with our rate submission due by September 1, 2020 so that Telemedicine services can be added if desired.

18. Choices - MAP: Regarding Inpatient Mental Health for the MAP, there is a 190- day lifetime limit for psychiatric facilities. Please explain how this is consistent with the Mental Health Parity Addiction and Equity Act (MHPAEA). Are lifetime limits for this benefit allowed under the Patient Protection and Affordable Care Act (PPACA)?

The group is not subject to ERISA because it is a governmental plan and therefore is not subject to the MHPAEA.

19. Choices - MAP: Please provide what the cost sharing is for Air Ambulance for participating and non-participating providers.

Cost sharing for Air Ambulance is at 20% coinsurance, with prior authorization required for non-emergent travel.





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20. The Certificate of Coverage: The age limits for infertility treatments (ages 21-44) should be removed per New York State legislation.

Our Commercial Benefits Chart, and not our Certificate of Coverage, noted this age limit on page 743 of our original Technical Proposal submission. This has now been updated to remove the age limit in the Infertility Services benefit and to include the limitation of three cycles per lifetime of in vitro fertilization for Advanced Infertility Services. Please see our updated Attachment 5. Updated Commercial Benefits Chart for this revised information.

21. EmblemHealth did not include Optional Marketing Materials in its submission. Please confirm if EmblemHealth does not intend to send any Optional Marketing Material to NYSHIP members for the 2021 Plan Year. If not confirmed, please submit proposed Optional Marketing Materials.

Yes, EmblemHealth is also including our NYSHIP Enrollment Member Guide which will be an additional material provided to members for 2021. Please see *Attachment 15. NYSHIP Enrollment Member Guide* for our current draft copy included in our submission.

22. The MAP charges a \$5 copay per visit for pre- and post-natal visits. Is this allowed per PPACA?

CMS permits Medicare Advantage plans to apply a copay for each specialist visit. Cost share is not applied to applicable preventive services per the following link: https://www.cms.gov/medicare/prevention/prevntiongeninfo/medicare-preventive-services/mps-quickreferencechart-1.html#HEP_B_SCREEN

23. Please update all Communications materials to members where the 2021 benefit levels are not properly reflected.

Confirmed. For our Commercial plan, please see the following attachments noted previously in our response:

- Attachment 8. Updated Commercial Member-facing Summary of Benefits -Actives with Rx
- Attachment 9. Updated Commercial Member-facing Plan Benefit Comparison -Actives with Rx
- Attachment 10. Updated Commercial Member-facing Summary of Benefits -Actives without Rx
- Attachment 11. Updated Commercial Member-facing Plan Benefit Comparison -Actives without Rx





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In addition, our Commercial cover letters have also been updated, labeled as:

- Attachment 16. Updated Commercial Member-facing Cover Letter Actives with Rx
- Attachment 17. Updated Commercial Member-facing Cover Letter Actives without Rx

Finally, our Medicare member-facing materials have also been updated which include:

- Attachment 18. Updated Medicare Member-facing Cover Letter Retirees with Rx
- Attachment 19. Updated Medicare Member-facing Cost Sharing Guide Retirees with Rx
- Attachment 20. Updated Medicare Member-facing Plan Benefit Comparison Retirees with Rx
- Attachment 21. Updated Medicare Member-facing Cover Letter Retirees without Rx
- Attachment 22. Updated Medicare Member-facing Cost Sharing Guide Retirees without Rx
- Attachment 23. Updated Medicare Member-facing Plan Benefit Comparison Retirees without Rx



Better care. Better value. Better outcomes. For everyone.

Contact: Bonnie Benson

Director, Account Management Phone: (518) 446-8024

Email: bbenson@emblemhealth.com

Name of Physician or Mid-Level	Degree	National Provider Ide	entifier Specialty Description	Provider Street Address	ADDRESS2	Provider City	Provider State	Provider Zip Co	ode COUNTY	Notes/Access Availability
HUSSEIN ASSALLUM	MD	1073883104	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	,
JIN SONG	MD	1720312531	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
BIPINCHANDRA PATEL	MD	1225045057	General Surgery	2 TITUS PL		WALTON	NY	13856	DELAWARE	
JAMES CORSONES	MD	1467423764	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
ALAN MILLER JOAN YOUCHAH	MD MD	1851392328 1013973189	Internal Medicine	53 PINE ST 42084 STATE HIGHWAY 28		DEPOSIT MARGARETVILLE	NY NY	13754 12455	DELAWARE DELAWARE	
DEAN BLOCH	MD	1013973189	Gynecology, OB/GYN Gynecology, OB/GYN	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE	NY NY	12455	DELAWARE	
KEVIN DODD	MD	1437130085	Gastroenterology	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
RANI KAPUR-PADO	DO	1801908553	Internal Medicine	43 PEARL ST W	STE 1A	SIDNEY	NY	13838	DELAWARE	
MUSTAFA KHAN	MD	1861489601	Neurology	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
TIMOTHY COREY	MD	1831270800	Gynecology, OB/GYN	44 PEARL ST W		SIDNEY	NY	13838	DELAWARE	
SOUHEIL SAMAHA	MD	1508863721	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
JOSEPH CHRISTIANA	MD	1205839495	Internal Medicine	RT 22	PALEN PAVILION	MARGARETVILLE	NY	12455	DELAWARE	
JOSEPH CHRISTIANA ROGER SCOTT	MD	1205839495 1144210576	Internal Medicine Internal Medicine	42084 STATE HIGHWAY 28 1 TITUS PL	PALEN BLDG	MARGARETVILLE WALTON	NY NY	12455 13856	DELAWARE DELAWARE	
DIANE GEORGESON	DO MD	1144210576	Gynecology, OB/GYN	1 IIIUS PL 37 PLEASANT ST		SIDNEY	NY NY	13856	DELAWARE	
CORDELIA SHARMA	MD	1003016353	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
SAMWEL OYUGI	MD	1952370678	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
JEFFREY GRAY	MD	1730172792	Internal Medicine	1 TITUS PL		WALTON	NY	13856	DELAWARE	
SUMAN CHOUDHURY	MD	1205047255	Internal Medicine	1 TITUS PL		WALTON	NY	13856	DELAWARE	
SUMAN CHOUDHURY	MD	1205047255	Nephrology	1 TITUS PL		WALTON	NY	13856	DELAWARE	
OWAIS AHMED	MD	1730131426	Internal Medicine	44 PEARL ST W		SIDNEY	NY	13838	DELAWARE	
PEDRO BAEZ PAUL LLOBET	MD MD	1841300191 1518020502	Internal Medicine Internal Medicine	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE MARGARETVILLE	NY NY	12455 12455	DELAWARE DELAWARE	
KEYOOR PATEL	DO	1598984668	Internal Medicine	1 TITUS PL		WALTON	NY	13856	DELAWARE	
HOLLY LLOBET	MD	1851597785	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
DANIEL BLACHMAN	MD	1083931075	Gastroenterology	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
OBIAGELI ANYAOGU	MD	1538392758	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
SINDHU PILLAI	MD	1154568137	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
ADERONKE ADENIJI	MD	1649552159	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
EDRIS ALDERWISH MIKRAM JAFRI	MD MD	1285959858	Internal Medicine Internal Medicine	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE MARGARETVILLE	NY NY	12455 12455	DELAWARE DELAWARE	
MIKRAM JAFRI KARIM RAHIMI	MD	1245518463 1902296163	Internal Medicine Internal Medicine	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE	NY NY	12455	DELAWARE	
MELANIE CHEING	MD	1750701652	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
YIFAN LU	MD	1205240082	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
IRFAN KHAN	MD	1891138756	Neurology	2 TITUS PL		WALTON	NY	13856	DELAWARE	
DORIS HUGHES	FNP	1982711776	Endocrinology	2 TITUS PL		WALTON	NY	13856	DELAWARE	
MARILYN HALPIN	FNP	1851323521	Internal Medicine	42084 STATE HIGHWAY 28		MARGARETVILLE	NY	12455	DELAWARE	
VICTOR MCGREGOR IFFE MONKASH	NP MD	1063514289	Internal Medicine	42084 STATE HIGHWAY 28 71 PROSPECT AVE		MARGARETVILLE HUDSON	NY NY	12455 12534	DELAWARE COLUMBIA	
JAYDE STECKOWYCH	MD	1194813568 1477542389	Gastroenterology ENT/Otolaryngology	1301 RIVER ST	STE L10 STE 6	VALATIE	NY NY	12534	COLUMBIA	
PETER D'SA	MD	1730188129	Gastroenterology	71 PROSPECT AVE	STE L10	HUDSON	NY	12184	COLUMBIA	
JOCELYN CELESTIN	MD	1710989249	Allergy and Immunology	1301 RIVER ST	RM 101	VALATIE	NY	12184	COLUMBIA	
JOCELYN CELESTIN	MD	1710989249	Allergy and Immunology	1301 RIVER ST	STE 106	VALATIE	NY	12184	COLUMBIA	
JOHN CEVERA	MD	1003891847	ENT/Otolaryngology	1301 RIVER ST	RM 101	VALATIE	NY	12184	COLUMBIA	
HENDRIK UYTTENDAELE	MD	1194781039	Dermatology	98 GREEN ST	STE 4	HUDSON	NY	12534	COLUMBIA	
DANIEL BLACHMAN	MD	1083931075	Gastroenterology	71 PROSPECT AVE	STE L10	HUDSON	NY	12534	COLUMBIA	
FILAMER KABIGTING MUHAMMAD PASHA	MD	1295050722	Dermatology	98 GREEN ST		HUDSON VALATIF	NY	12534	COLUMBIA COLUMBIA	
MAURICIO ZAPIACH	MD MD	1710972971 1831260777	Allergy and Immunology Gastroenterology	1301 RIVER ST 71 PROSPECT AVE	STE 106	HUDSON	NY NY	12184 12534	COLUMBIA	
UMESH PATEL	MD	1811146236	Rheumatology	71 PROSPECT AVE	STE 190	HUDSON	NY	12534	COLUMBIA	
STEVEN PARNES	MD	1508866849	ENT/Otolaryngology	1301 RIVER ST	STE 106	VALATIE	NY	12184	COLUMBIA	
JAMES YOVANOFF	MD	1619961083	Rheumatology	48 EAST ST		FORT EDWARD	NY	12828	WASHINGTON	
ASHA GUPTA	MD		1669463691 Allergy and Immunology	260 Riverside Dr		Johnson City	NY		13790 BROOME	No providers servicing in market in Delaware county, only surrounding counties
MOHAN DHILLON	MD		1649379652 Allergy and Immunology	4104 Vestal Rd Ste 108		Vestal	NY		13850 BROOME	No providers servicing in market in Delaware county, only surrounding counties
PAUL STEINBERG MARINA BRAVIN	MD MD		1932150067 Allergy and Immunology 1679538409 Dermatology	1 ATWELL RD 4580 STATE HWY 28		COOPERSTOWN MILFORD	NY NY		13326 OTSEGO 13807 OTSEGO	No providers servicing in market in Delaware county, only surrounding counties No providers servicing in market in Delaware county, only surrounding counties
STEVEN FISHMAN	MD		1528016540 Dermatology	110 BRIDGEVILLE RD		MONTICELLO	NY NY		12701 SULLIVAN	No providers servicing in market in Delaware county, only surrounding counties No providers servicing in market in Delaware county, only surrounding counties
ROSS ZELSTER	MD		1194769851 Dermatology	110 BRIDGEVILLE RD		MONTICELLO	NY		12701 SULLIVAN	No providers servicing in market in Delaware county, only surrounding counties No providers servicing in market in Delaware county, only surrounding counties
BRIDGET GRANT	MD		1336375161 Dermatology	1 ATWELL RD		COOPERSTOWN	NY		13326 OTSEGO	No providers servicing in market in Delaware county, only surrounding counties
GEORGE HAN	MD		1912296963 Dermatology	1 ATWELL RD		COOPERSTOWN	NY		13326 OTSEGO	No providers servicing in market in Delaware county, only surrounding counties
SKYLAR TRAVIS	MD		1528452414 Dermatology	1 ATWELL RD		COOPERSTOWN	NY		13326 OTSEGO	No providers servicing in market in Delaware county, only surrounding counties
CESAR DIONISIO	MD		1164477667 ENT/Otolaryngology	169 RIVERSIDE DR M10		BINGHAMTON	NY		13905 BROOME	No providers servicing in market in Delaware county, only surrounding counties
JEFFREY KING ISSAC MATTA	MD MD		1992795116 ENT/Otolaryngology	169 RIVERSIDE DR 30 HARRISON ST		BINGHAMTON JOHNSON CITY	NY NY		13905 BROOME 13790 BROOME	No providers servicing in market in Delaware county, only surrounding counties
ISSAC MATTA SOMIA MIAN	MD MD		1730157686 ENT/Otolaryngology 1770787053 Gastroenterology	30 HARRISON ST 1 ATWELL RD		JOHNSON CITY COOPERSTOWN	NY NY		13790 BROOME 13326 OTSEGO	No providers servicing in market in Delaware county, only surrounding counties Only 1 provider in the market for Delaware County: the remaining providers are in surrounding counties
LESLIE BANK	MD		1124000310 Gastroenterology	40 MITCHELL AVE		BINGHAMTON	NY NY		13326 UISEGU 13903 BROOMF	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
AMINE HILA	MD		1538190822 Gastroenterology	40 MITCHELL AVE		BINGHAMTON	NY		13903 BROOME	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
AMANKE ORANU	MD		1750544425 Gastroenterology	40 MITCHELL AVE		BINGHAMTON	NY		13903 BROOME	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
ATIF SALEEM	MD		1629279682 Gastroenterology	40 MITCHELL AVE		BINGHAMTON	NY		13903 BROOME	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
RIFAT LATIFI	MD		1760589220 General Surgery	42084 STATE HIGHWAY 28		MARGARETVILLE	NY		12455 DELAWARE	PAR PROVIDER ADDRESS IN CAQH NOT ON FILE
GARY LOMBARDO	MD		1023174471 General Surgery	42084 STATE HIGHWAY 28		MARGARETVILLE	NY		12455 DELAWARE	PAR PROVIDER ADDRESS IN CAQH NOT ON FILE
PREM PATEL ANTHONY POLICASATRO	MD MD		1861434789 General Surgery 1225022429 General Surgery	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE MARGARETVILLE	NY NY		12455 DELAWARE 12455 DELAWARE	PAR PROVIDER ADDRESS IN CAQH NOT ON FILE PAR PROVIDER ADDRESS IN CAQH NOT ON FILE
RICHARD MCNALLY	MD		1225022429 General Surgery 1568452985 Oncology	42084 STATE HIGHWAY 28 42084 STATE HIGHWAY 28		MARGARETVILLE	NY NY		12455 DELAWARE 12455 DELAWARE	FAIL FROMIDER ADDRESS IN CAUTI NOT ON FILE
ERIC BRAVIN	MD		1053375279 Oncology	1 ATWELL RD		COOPERSTOWN	NY		13326 OTSEGO	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
MARCY CANARY	MD		1053400739 Oncology	1 ATWELL RD		COOPERSTOWN	NY		13326 OTSEGO	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
IFTIKHAR-AHMAD CHOUHDRY	MD		1639168933 Oncology	39 OLD MONTICELLO RD		FERNDALE	NY		12734 SULLIVAN	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
KARMRAN CHAUDHRI	MD		1184691065 Opthalmology	460 ANDES RD		DELHI	NY		13753 DELAWARE	
MICHAEL HERCEG	MD		1164423752 Opthalmology	33 MITCHELL AVE		BINGHAMTON	NY		13903 BROOME	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
THEODORE ISSEKS	MD		1164423448 Opthalmology	5518 STATE ROUTE 55		LIBERTY VESTAL	NY		12754 SULLIVAN	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
HENDA BOUALI LINET MATIROSSIAN	MD MD		1053495465 Rheumatology 1346681038 Rheumatology	4433 VESTAL PKWY E 1 ATWELL RD		VESTAL VESTAL	NY NY		13850 BROOME 13326 OTSEGO	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
DONALD RADDATZ	MD		1033175963 Rheumatology	1 ATWELL RD		VESTAL	NY		13326 OTSEGO 13326 OTSEGO	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties Only 1 provider in the market for Delaware County: the remaining providers are in surrounding counties
FARAH ASHRAF	MD		1134123839 Rheumatology	243 NORTH RD	STE 101	POUGHKEEPSIE	NY		12601 DUTCHESS	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
RICHARD BRYAN	MD		1508952953 Rheumatology	2414 15TH ST	- *	TROY	NY		12180 RENSSELAER	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
LUDOVICO CAVALIERE	MD		1235126681 Rheumatology	4 TOWER PL	FL 8	ALBANY	NY		12203 ALBANY	Only 1 provider in the market for Delaware County; the remaining providers are in surrounding counties
JINLIN DU	MD		1760475875 Allergy and Immunology	61 EMERALD PL		ROCKHILL	NY		12775 SULLIVAN	
MICHEL AKL YASMIN RHASIN	MD MD		1154380145 Allergy and Immunology	75 CRYSTAL RUN RD	STE 102	MIDDLETOWN MIDDLETOWN	NY NY		10941 ORANGE 10940 ORANGE	Only 1 provider in the market for Sullivan County; the remaining providers are in surrounding counties
TASMIN BHASIN	MD		1144268749 Allergy and Immunology	15 DUNNING RD	STE 1	MIDDLETOWN	NY		10940 ORANGE	Only 1 provider in the market for Sullivan County; the remaining providers are in surrounding counties

MYRELLE CASTRO	MD	1639216179 Allergy and Immunology	92 OLD ROUTE 9W	STE 200	NEW WINDSOR	NY	12553 ORANGE	Only 1 provider in the market for Sullivan County; the remaining providers are in surrounding counties
BETH LOUIE	MD	1205802055 Allergy and Immunology	30 RONALD REAGAN BLVD		WARWICK	NY	10990 ORANGE	Only 1 provider in the market for Sullivan County; the remaining providers are in surrounding counties
MIHAI BUSUIOC		1679539266 Optometry	343 BROADWAY		MONTICELLO	NY	12701 SULLIVAN	
MICHAEL GEORGESCU		1730150921 Optometry	343 BROADWAY		MONTICELLO	NY	12701 SULLIVAN	
ELLEN COSGROVE	MD	1992735245 Rheumatology	161 CAREY RD		QUEENSBURY	NY	12804 WARREN	Only 1 provider in the market for Washington County; the remaining providers are in surrounding counties
TEJ BHAVSAR	MD	1689725301 Rheumatology	6 CARE LN		SARATOGA SPRINGS	NY	12866 SARATOGA	Only 1 provider in the market for Washington County; the remaining providers are in surrounding counties
JESSICA CHAPMAN	MD	1871814756 Rheumatology	1 WEST AVE	STE 330	SARATOGA SPRINGS	NY	12866 SARATOGA	Only 1 provider in the market for Washington County; the remaining providers are in surrounding counties
FAISAL CHAUDHARY	MD	1194986257 Rheumatology	6 CARE LN		SARATOGA SPRINGS	NY	12866 SARATOGA	Only 1 provider in the market for Washington County; the remaining providers are in surrounding counties
REBECCA ADLER	MD	1427443308 OB/GYN	3 CROSSING BLVD	STE 200	CLIFTON PARK	NY	12065 SARATOGA	No providers servicing in market in Washington county, only surrounding
STEFANIE ALLISON	MD	1265626642 OB/GYN	1 WEST AVE	STE 305	SARATOGA SPRINGS	NY	12866 SARATOGA	No providers servicing in market in Washington county, only surrounding
WILLIAM ANYAEGBUNAM	MD	1699772624 OB/GYN	2 EMMA LN	STE 202	SARATOGA SPRINGS	NY	12065 SARATOGA	No providers servicing in market in Washington county, only surrounding
KENNETH BAKER	MD	1760489157 OB/GYN	2215 BURDETT AVE	STE 200	TROY	NY	12180 RENSSELAER	No providers servicing in market in Washington county, only surrounding
JENNIFER BASHANT	MD	1841411618 OB/GYN	45 HUDSON AVE		GLENS FALLS	NY	12801 WARREN	No providers servicing in market in Washington county, only surrounding
DEBORAH BASSO	MD	1740238203 OB/GYN	2109 15TH ST		TROY	NY	12180 RENSSELAER	No providers servicing in market in Washington county, only surrounding

equal to 49,999 persons with a population density greater than or equal to 1,000 persons per square mile and less than or equal to 4999.9 persons per square mile.

(3) *Micro*. A micro designation is assigned to any of the following combinations of population sizes and density parameters:

- (i) A population size greater than or equal to 50,000 persons and less than or equal to 199,999 persons with a population density greater than or equal to 10 persons per square mile and less than or equal to 99.9 persons per square mile.
- (ii) A population size greater than or equal to 10,000 persons and less than or equal to 49,999 persons with a population density greater than or equal to 50 persons per square mile and less than 999.9 persons per square mile.

- (4) *Rural*. A rural designation is assigned to any of the following combinations of population sizes and density parameters:
- (i) A population size greater than or equal to 10,000 persons and less than or equal to 49,999 persons with a population density of greater than or equal to 10 persons per square mile and less than or equal to 49.9 persons per square mile.
- (ii) A population size less than 10,000 persons with a population density greater than or equal 50 persons per square mile and less than or equal to 999.9 persons per square mile.
- (5) Counties with extreme access considerations (CEAC). For any population size with a population density of less than 10 persons per square mile.

- (d) Maximum time and distance standards—(1) General rule. CMS determines and annually publishes maximum time and distance standards for each combination of provider or facility specialty type and each county type in accordance with paragraphs (d)(2) and (3) of this section.
- (i) Time and distance metrics measure the relationship between the approximate locations of beneficiaries and the locations of the network providers and facilities.
 - (ii) [Reserved]
- (2) By county designation. The following base maximum time (in minutes) and distance (in miles) standards apply for each county type designation, unless modified through customization as described in paragraph (d)(3) of this section.

TABLE 1 TO PARAGRAPH (d)(2)

	Loro	10	Met	70	Micr	~	Rura	ol.	CEA	
	Larg metr		IVIEL	O	IVIICI	0	Huis	ai 	CEA	
Provider/Facility type	Max time	Max distance	Max time	Max distance	Max time	Max distance	Max time	Max distance	Max time	Max distance
Primary Care	10	5	15	10	30	20	40	30	70	60
Allergy and Immunology	30	15	45	30	80	60	90	75	125	110
Cardiology	20	10	30	20	50	35	75	60	95	85
Chiropractor	30	15	45	30	80	60	90	75	125	110
Dermatology	20	10	45	30	60	45	75	60	110	100
Endocrinology	30	15	60	40	100	75	110	90	145	130
ENT/Otolaryngology	30	15	45	30	80	60	90	75	125	110
Gastroenterology	20	10	45	30	60	45	75	60	110	100
General Surgery	20	10	30	20	50	35	75	60	95	85
Gynecology, OB/GYN	30	15	45	30	80	60	90	75	125	110
Infectious Diseases	30	15	60	40	100	75	110	90	145	130
Nephrology	30	15	45	30	80	60	90	75	125	110
Neurology	20	10	45	30	60	45	75	60	110	100
Neurosurgery	30	15	60	40	100	75	110	90	145	130
Oncology—Medical, Surgical	20	10	45	30	60	45	75	60	110	100
Oncology—Radiation/Radi-										
ation Oncology	30	15	60	40	100	75	110	90	145	130
Ophthalmology	20	10	30	20	50	35	75	60	95	85
Orthopedic Surgery	20	10	30	20	50	35	75	60	95	85
Physiatry, Rehabilitative Med-										
icine	30	15	45	30	80	60	90	75	125	110
Plastic Surgery	30	15	60	40	100	75	110	90	145	130
Podiatry	20	10	45	30	60	45	75	60	110	100
Psychiatry	20	10	45	30	60	45	75	60	110	100
Pulmonology	20	10	45	30	60	45	75	60	110	100
Rheumatology	30	15	60	40	100	75	110	90	145	130
Urology	20	10	45	30	60	45	75	60	110	100
Vascular Surgery	30	15	60	40	100	75	110	90	145	130
Cardiothoracic Surgery	30	15	60	40	100	75	110	90	145	130
Acute Inpatient Hospitals	20	10	45	30	80	60	75	60	110	100
Cardiac Surgery Program	30	15	60	40	160	120	145	120	155	140
Cardiac Catheterization Serv-										
ices	30	15	60	40	160	120	145	120	155	140
Critical Care Services—Inten-										
sive Care Units (ICU)	20	10	45	30	160	120	145	120	155	140
Surgical Services (Outpatient										
or ASC)	20	10	45	30	80	60	75	60	110	100
Skilled Nursing Facilities	20	10	45	30	80	60	75	60	95	85
Diagnostic Radiology	20	10	45	30	80	60	75	60	110	100
Mammography	20	10	45	30	80	60	75	60	110	100
Physical Therapy	20	10	45	30	80	60	75	60	110	100
Occupational Therapy	20	10	45	30	80	60	75	60	110	100
Speech Therapy	20	10	45	30	80	60	75	60	110	100
Inpatient Psychiatric Facility										
Services	30	15	70	45	100	75	90	75	155	140
Outpatient Infusion/Chemo-		i I						l	I	1
therapy	20	10	45	30	80	60	75	60	110	100

Contract	ID Effective Di Reason Coc County Stat State Cou	un Service A	Are County Des Specialt	y C Specialty T Admir	n Ove Admin Ove # Of	Acute # Of A	cute # Of A	Acute # Of Ac	cute # Of B	eds F# Of B	eds F# Of	Service# Of Se	ervice Time	/ Dist Thresho	old (Time	Actua Time Me	et Distance Ac Distance	M ACC Status
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '040	Acute Inpal N		85	1762	1384 Yes		1762	1384	11	8	80 CON Sta	ate · N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A		5	5	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '042	Cardiac Cat N	, N/A	-	N/A	N/A	N/A	N/A		8	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '043	Critical Car N	, N/A	-	N/A	N/A	•	•	1098	8	5	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '045	Surgical Sei N	N/A		N/A	N/A	N/A	N/A		21	16	80 CON Sta	•	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '046	Skilled Nur: N	N/A	-	N/A	N/A	,	867	267	8	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '047	Diagnostic N	N/A		N/A	N/A	N/A	N/A	207	16	12	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '048	Mammogra N	N/A	•	N/A	N/A	N/A	N/A		4	2	90	N/A	N/A	99.7 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '049	Physical Th N	N/A	•	N/A	N/A	N/A	N/A		13	9	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '050	Occupation N	N/A	-	N/A	N/A	N/A	N/A		12	8	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '051	Speech The N	N/A		N/A	N/A	N/A	N/A		12	8	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '052	Inpatient P. N	N/A		N/A	N/A		-	1254	10	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Albany, NY '33000	Active	Metro '057	Outpatient N	N/A	•	N/A	N/A	N/A	N/A	1234	6	4	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Albany, NY 33000	Active	Large Metr '040	Acute Inpal N	N/A	-		9171 Yes	•		9171	28	25	80 CON Sta	,	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '041	Cardiac Sur N	N/A		N/A	N/A	N/A	N/A	3171	34	31	90	ate.	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '042	Cardiac Sul N	N/A	-	N/A	N/A N/A	N/A	N/A N/A		37	33	90		100 Yes	100 Yes	Pass
H3330			•		•	-	-		-	-	3435	38	36	90		100 Yes		
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '043	Critical Can N	N/A		N/A	N/A			3433	36 91	88		-4-		100 Yes	Pass
	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '045	Surgical Set N	N/A		N/A	N/A	N/A	N/A	2202			80 CON Sta	ate.	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '046	Skilled Nur: N	N/A		N/A	N/A			3302	117	112			100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '047	Diagnostic N	N/A	-	N/A	N/A	N/A	N/A		96	89	90 90		100 Yes	100 Yes	Pass
H3330 H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '048	Mammogra N	N/A	-	N/A	N/A	N/A	N/A		103 78	100 73	90		100 Yes	100 Yes	Pass
	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '049	Physical Th N	N/A	-	N/A	N/A	N/A	N/A						100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '050	Occupation N	N/A	-	N/A	N/A	N/A	N/A		68	64	90 90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '051	Speech The N	N/A		N/A	N/A	N/A	N/A	04.46	68	64			100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '052	Inpatient P N	N/A		N/A	N/A			0146	88	77	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Bronx, NY '33020	Active	Large Metr '057	Outpatient N	N/A	-	N/A	N/A	N/A	N/A	6747	45	42	90	-1- 01/0	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '040	Acute Inpai N				6747 Yes			6747	20	20	80 CON Sta		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '041	Cardiac Sur N	N/A	-	N/A	N/A	N/A	N/A		1	1	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '042	Cardiac Cat N	N/A		N/A	N/A	N/A	N/A	20	4	3	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '043	Critical Car N	N/A		N/A	N/A		20	20	1	1	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '045	Surgical Sei N	N/A		N/A	N/A	N/A	N/A	_	3	1	80 CON Sta		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '046	Skilled Nur: N	N/A		N/A	N/A		4	4	4	4	90	N/A	N/A	98.8 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '047	Diagnostic N	N/A	-	N/A	N/A	N/A	N/A		10	7	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '048	Mammogra N	N/A	-	N/A	N/A	N/A	N/A		4	3	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '049	Physical Th N	N/A	-	N/A	N/A	N/A	N/A		11	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '050	Occupatior N	N/A		N/A	N/A	N/A	N/A		10	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '051	Speech The N	N/A		N/A	N/A	N/A	N/A		10	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '052	Inpatient P N	N/A	-	N/A	N/A		1175	802	5	3	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Broome, N' '33030	Active	Metro '057	Outpatient N	N/A	-	N/A	N/A	N/A	N/A		4	4	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '040	Acute Inpal N				3252 Yes			3252	24	19	75 CON Sta		N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '041	Cardiac Sur N	N/A	-	N/A	N/A	N/A	N/A		48	48	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Columbia, I'33200	Active	Micro '042	Cardiac Cat N	N/A		N/A	N/A	N/A	N/A		65	64	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Columbia, I'33200	Active	Micro '043	Critical Car N	N/A		N/A	N/A			1687	88	87	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '045	Surgical Sei N	N/A		N/A	N/A	N/A	N/A		54	47	75 CON Sta		N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '046	Skilled Nur: N	N/A	-	N/A	N/A			2169	40	30	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I'33200	Active	Micro '047	Diagnostic N	N/A	-	N/A	N/A	N/A	N/A		41	28	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '048	Mammogra N	N/A	-	N/A	N/A	N/A	N/A		27	18	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I'33200	Active	Micro '049	Physical Th N	N/A	-	N/A	N/A	N/A	N/A		37	26	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Columbia, I '33200	Active	Micro '050	Occupatior N	N/A	-	N/A	N/A	N/A	N/A		33	24	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro '051	Speech Th∈ N	N/A	N/A	N/A	N/A	N/A	N/A		33	24	85	N/A	N/A	100 Yes	Pass

H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'052	Inpatient P N	N/A	N/A	N/A	N/A	3232	3009	28	19	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Columbia, I '33200	Active	Micro	'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A	19	14	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Delaware, I '33220	Active	Rural	'040	Acute Inpal N		18 923	34 87	781 Yes	9234	8781	35	32	75 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active	Rural	'041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A	48	47	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active	Rural	'042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A	N/A	62	62	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active	Rural	'043	Critical Can N	N/A	N/A	N/A	N/A	22216	22208	84	83	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active	Rural	'045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A	N/A	44	39	75 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active	Rural	'046	Skilled Nur: N	N/A	N/A	N/A	N/A	1150	1150	22	22	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Delaware, I '33220	Active	Rural	'047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A	36	33	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I '33220	Active		'048	Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A	17	14	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I'33220	Active		'049	Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A	34	31	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I'33220	Active		'050	Occupation N	N/A	N/A	N/A	N/A	N/A	N/A	31	29	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I'33220	Active		'051	Speech The N	N/A	N/A	N/A	N/A	N/A	N/A	32	29	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, I'33220	Active		'052	Inpatient P. N	N/A	N/A	N/A	N/A	2909	•	15	15	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Delaware, I '33220	Active		'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A	14	12	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Delaware, 1 33220	Active		'040	Acute Inpal N	IN/A	83 358	-	588 Yes	3588		15	15	80 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N 33230	Active		'041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A	17	11	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, 1 33230	Active		'042	Cardiac Sul N	N/A	N/A	N/A	N/A	N/A N/A	N/A	20	12	90	N/A	N/A	100 Yes	Pass
H3330	• •			'043		•	-	-	•	N/A 2680	•	20 14	12	90	•	•	100 Yes	
	7/1/1987 Network At Dutchess, N'33230	Active			Critical Can N	N/A	N/A	N/A	N/A						N/A	N/A		Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A	N/A	35	30	80 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'046	Skilled Nur: N	N/A	N/A	N/A	N/A	2232		33	32	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A	30	24	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'048	Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A	26	22	90	N/A	N/A	99.2 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'049	Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A	26	21	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'050	Occupation N	N/A	N/A	N/A	N/A	N/A	N/A	23	20	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N '33230	Active		'051	Speech The N	N/A	N/A	N/A	N/A	N/A	N/A	23	19	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N'33230	Active		'052	Inpatient P N	N/A	N/A	N/A	N/A	14617		57	33	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Dutchess, N '33230	Active		'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A	15	13	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'040	Acute Inpal N		20 413		083 Yes	4135		23	18	75 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A	49	49	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A	N/A	66	66	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'043	Critical Car N	N/A	N/A	N/A	N/A	22328		89	88	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A	N/A	49	43	75 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active	Micro	'046	Skilled Nur: N	N/A	N/A	N/A	N/A	2119	1722	33	26	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Greene, NY '33300	Active	Micro	'047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A	35	29	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Greene, NY '33300	Active	Micro	'048	Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A	21	15	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active		'049	Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A	33	26	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Greene, NY '33300	Active	Micro	'050	Occupatior N	N/A	N/A	N/A	N/A	N/A	N/A	29	24	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active	Micro	'051	Speech The N	N/A	N/A	N/A	N/A	N/A	N/A	29	24	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active	Micro	'052	Inpatient P. N	N/A	N/A	N/A	N/A	3408	2733	19	17	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Greene, NY '33300	Active	Micro	'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A	15	11	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'040	Acute Inpal N		362 1009	93 100	093 Yes	10093	10093	21	21	80 CON State	· -	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A	27	27	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A	N/A	32	31	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'043	Critical Can N	N/A	N/A	N/A	N/A	11313	11313	34	34	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A	N/A	98	96	80 CON State		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr	'046	Skilled Nur: N	N/A	N/A	N/A	N/A	22160	22160	111	111	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr		Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A	94	94	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr		Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A	117	112	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr		Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A	63	63	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr		Occupation N	N/A	N/A	N/A	N/A	N/A	N/A	57	57	90		100 Yes	100 Yes	Pass
			J		•	,	,	•	•	•	•							

H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr '051	Speech The N	N/A	N/A	N/A	N/A	N/A N/A	58	58	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr '052	Inpatient P. N	N/A	N/A	N/A	N/A	20526 20209	79	78	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Kings, NY '33331	Active	Large Metr '057	Outpatient N	N/A	N/A	N/A	N/A	N/A N/A	39	39	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '040	Acute Inpal N		259 1531	16 94	139 Yes	15316 9439	37	25	80 CON State ·	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A N/A	36	31	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A N/A	43	40	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '043	Critical Car N	N/A	N/A	N/A	N/A	12809 5357	43	27	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A N/A	105	69	80 CON State ·	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '046	Skilled Nur: N	N/A	N/A	N/A	N/A	32010 24253	166	131	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '047	Diagnostic N	N/A	N/A	N/A	N/A	N/A N/A	112	74	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '048	Mammogra N	N/A	N/A	N/A	N/A	N/A N/A	129	90	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '049	Physical Th N	N/A	N/A	N/A	N/A	N/A N/A	89	59	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '050	Occupatior N	N/A	N/A	N/A	N/A	N/A N/A	70	46	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '051	Speech The N	N/A	N/A	N/A	N/A	N/A N/A	70	46	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '052	Inpatient P. N	N/A	N/A	N/A	N/A	23978 21887	104	93	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Nassau, NY '33400	Active	Large Metr '057	Outpatient N	N/A	N/A	N/A	N/A	N/A N/A	53	38	90	100 Yes	99.9 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '040	Acute Inpal N		276 1095	52 109	952 Yes	10952 10952	28	28	80 CON State ·	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A N/A	30	29	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: New York, '33420	Active	Large Metr '042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A N/A	32	31	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '043	Critical Can N	N/A	N/A	N/A	N/A	14462 14462	40	40	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A N/A	112	110	80 CON State	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, '33420	Active	Large Metr '046	Skilled Nur: N	N/A	N/A	N/A	N/A	24918 24918	129	129	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, '33420	Active	Large Metr '047	Diagnostic N	N/A	N/A	N/A	N/A	N/A N/A	111	110	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, '33420	Active	Large Metr '048	Mammogra N	N/A	N/A	N/A	N/A	N/A N/A	131	126	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '049	Physical Th N	N/A	N/A	N/A	N/A	N/A N/A	80	79	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, '33420	Active	Large Metr '050	Occupatior N	N/A	N/A	N/A	N/A	N/A N/A	71	71	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '051	Speech The N	N/A	N/A	N/A	N/A	N/A N/A	72	72	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '052	Inpatient P. N	N/A	N/A	N/A	N/A	20160 20137	77	76	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At New York, 1'33420	Active	Large Metr '057	Outpatient N	N/A	N/A	N/A	N/A	N/A N/A	49	49	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '040	Acute Inpai N	N/A	90 514	-	994 Yes	5144 4994	21	20	80 CON State · N/		93.9 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A N/A	29	20	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '042	Cardiac Sat N	N/A	N/A	N/A	N/A	N/A N/A	34	23	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '043	Critical Car N	N/A	N/A	N/A	N/A	4061 4061	20	20	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY 33540	Active	Metro '045	Surgical Sei N	N/A N/A	N/A	N/A	N/A	N/A N/A	42	40	80 CON State · N/	•	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY 33540		Metro '046	· ·	N/A N/A		-	N/A	4474 3196	46	40	90 N/		100 Yes	Pass
		Active		Skilled Nur: N	•	N/A	N/A	•			40 35	,	•	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active		Diagnostic N	N/A	N/A	N/A	N/A	N/A N/A	41 34					
H3330	7/1/1987 Network At Orange, NY '33540	Active		Mammogra N	N/A	N/A	N/A	N/A	N/A N/A		30		-	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '049	Physical Th N	N/A	N/A	N/A	N/A	N/A N/A	37	32	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '050	Occupation N	N/A	N/A	N/A	N/A	N/A N/A	31	28	90 N/		100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '051	Speech The N	N/A	N/A	N/A	N/A	N/A N/A	31	28	90 N/		100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '052	Inpatient P N	N/A	N/A	N/A	N/A	22360 20876	93	81	90 N/		100 Yes	Pass
H3330	7/1/1987 Network At Orange, NY '33540	Active	Metro '057	Outpatient N	N/A	N/A	N/A	N/A	N/A N/A	17	16	90 N/	•	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '040	Acute Inpal N		27 566		751 Yes	5669 4751	24	17	80 CON State · N/		100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\ '33580	Active	Metro '041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A N/A	27	19	90 N/	•	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A N/A	35	25	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\ '33580	Active	Metro '043	Critical Car N	N/A	N/A	N/A	N/A	4460 3657	23	15	90 N/	•	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A N/A	47	34	80 CON State · N/	-	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '046	Skilled Nur: N	N/A	N/A	N/A	N/A	6751 4034	61	43	90 N/	-	100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N\'33580	Active	Metro '047	Diagnostic N	N/A	N/A	N/A	N/A	N/A N/A	45	34	90 N/	A N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N\'33580	Active	Metro '048	Mammogra N	N/A	N/A	N/A	N/A	N/A N/A	44	32	90 N/		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N\'33580	Active	Metro '049	Physical Th N	N/A	N/A	N/A	N/A	N/A N/A	42	30	90 N/	A N/A	100 Yes	Pass

H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '050	Occupatior N	N/A		N/A	N/A	N/A	N/A	N/A		37	25	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\'33580	Active	Metro '051	Speech Th∈ N	N/A		N/A	N/A	N/A	N/A	N/A		37	25	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\ '33580	Active	Metro '052	Inpatient P N	N/A		N/A	N/A	N/A				02	71	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Putnam, N\ '33580	Active	Metro '057	Outpatient N	N/A		N/A	N/A	N/A	N/A	N/A		25	15	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Queens, NY 33590	Active	Large Metr '040	Acute Inpal N		352	15361	1 1	4292 Yes			292	33	31	80 CON Stat	e ·	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Queens, NY 33590	Active	Large Metr '041	Cardiac Sur N	N/A		N/A	N/A	N/A	N/A	N/A		30	30	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Queens, NY '33590	Active	Large Metr '042	Cardiac Cat N	N/A	. 1	N/A	N/A	N/A	N/A	N/A		36	36	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '043	Critical Car N	N/A	. 1	N/A	N/A	N/A	142	240 14	240	44	44	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '045	Surgical Sei N	N/A	. 1	N/A	N/A	N/A	N/A	N/A	1	22	.22	80 CON Stat	e ·	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '046	Skilled Nur: N	N/A	. 1	N/A	N/A	N/A	322	248 31	158 1	67	.63	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '047	Diagnostic N	N/A	. 1	N/A	N/A	N/A	N/A	N/A	1	24	.23	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '048	Mammogra N	N/A	. 1	N/A	N/A	N/A	N/A	N/A	1	44	.44	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '049	Physical Th N	N/A	. 1	N/A	N/A	N/A	N/A	N/A		89	89	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '050	Occupatior N	N/A	. 1	N/A	N/A	N/A	N/A	N/A		77	77	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Queens, NY '33590	Active	Large Metr '051	Speech Th∈ N	N/A		N/A	N/A	N/A	N/A	N/A		76	76	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Queens, NY '33590	Active	Large Metr '052	Inpatient P. N	N/A		N/A	N/A	N/A	219	958 21	630	91	88	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Queens, NY '33590	Active	Large Metr '057	Outpatient N	N/A		N/A	N/A	N/A	N/A	N/A		59	59	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '040	Acute Inpal N		46	1445	5	1384 Yes	14	145 1	384	9	8	80 CON Stat	e · N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '041	Cardiac Sur N	N/A		N/A	N/A	N/A	N/A	N/A		5	4	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '042	Cardiac Cat N	N/A		N/A	N/A	N/A	N/A	N/A		8	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '043	Critical Car N	N/A		N/A	N/A	N/A	13	398 1	391	7	6	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '045	Surgical Sei N	N/A		N/A	N/A	N/A	N/A	N/A		20	16	80 CON Stat	e N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '046	Skilled Nur: N	N/A		N/A	N/A	N/A	-	-	266	8	5	90	N/A	N/A	98.6 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '047	Diagnostic N	N/A		N/A	N/A	N/A	N/A	N/A		14	13	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '048	Mammogra N	N/A		N/A	N/A	N/A	N/A	N/A		4	3	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '049	Physical Th N	N/A		N/A	N/A	N/A	N/A	N/A		11	10	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '050	Occupatior N	N/A		N/A	N/A	N/A	N/A	N/A		10	9	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '051	Speech Th∈ N	, N/A		, N/A	N/A	N/A	N/A	N/A		10	9	90	N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '052	Inpatient P. N	N/A		N/A	N/A	N/A		-	254	9	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rensselaer, '33600	Active	Metro '057	Outpatient N	N/A		N/A	N/A	N/A	N/A	N/A		5	5	90	N/A	N/A	95.8 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '040	Acute Inpai N	.,	87	4656		4656 Yes	-	-	656	10	10	80 CON Stat	•	94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '041	Cardiac Sur N	N/A		N/A	N/A	N/A	N/A	N/A		12	12	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '042	Cardiac Cat N	N/A		1/A	N/A	N/A	N/A	N/A		14	14	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '043	Critical Car N	N/A		1/A	N/A	N/A	-	-	770	10	10	90		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '045	Surgical Sei N	N/A		1/A	N/A	N/A	N/A	N/A		34	34	80 CON Stat		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '046	Skilled Nur: N	N/A		\/A	N/A	N/A		-	462	44	44	90		97.8 Yes	97.8 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '047	Diagnostic N	N/A		\/A	N/A	N/A	N/A	N/A		32	32	90		94.8 Yes	94.8 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '048	Mammogra N	N/A		1/A	N/A	N/A	N/A	N/A		42	42	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '049	Physical Th N	N/A		N/A	N/A	N/A	N/A	N/A		15	15	90		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '050	Occupation N	N/A		N/A	N/A	N/A	N/A	N/A		15 15	15	90		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '051	Speech The N	N/A		N/A	N/A	N/A	N/A	N/A		15 15	15	90		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '052	Inpatient P. N	N/A		\/A	N/A	N/A	100	-	693	39	39	90		100 Yes	100 Yes	Pass
H3330	7/1/1987 Network At Richmond, '33610	Active	Large Metr '057	Outpatient N	N/A		\/A	N/A	N/A	N/A	N/A	033	13	13	90		94.7 Yes	94.7 Yes	Pass
H3330	7/1/1987 Network At Rockland, 1/33620	Active	Metro '040	Acute Inpai N	14/7	80	18373		5148 Yes	183	-	148	49	43	80 CON Stat		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, 1 33620	Active	Metro '041	Cardiac Sur N	N/A		1657. N/A	N/A	N/A	N/A	N/A	140	49 40	39	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, N 33620	Active	Metro '042	Cardiac Sul N	N/A		N/A N/A	N/A	N/A	N/A	N/A		4 0 50	47	90	N/A	N/A	100 Yes	Pass
		Active	Metro '043	Critical Car N	-				-	•	-	542	57		90		-		
H3330 H3330	7/1/1987 Network A: Rockland, 1 33620 7/1/1987 Network A: Rockland, 1 33620	Active	Metro '045	Surgical Sei N	N/A N/A		N/A N/A	N/A N/A	N/A N/A	N/A	N/A			55 .47	80 CON Stat	N/A	N/A N/A	100 Yes 100 Yes	Pass Pass
H3330	7/1/1987 Network At Rockland, 1 33620	Active	Metro '046	Skilled Nur: N	N/A N/A		N/A N/A	N/A	N/A N/A	•	-			.47 .72	90 CON Stat	N/A	N/A N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, 1 33620	Active	Metro '047		N/A		N/A N/A	N/A	N/A N/A	N/A	276 25 N/A			.72 .45	90	N/A	N/A N/A	100 Yes	Pass
нзээо Н3330	7/1/1987 Network At Rockland, 1 33620	Active	Metro '048	Diagnostic N Mammogra N	N/A N/A		N/A N/A	N/A	N/A N/A	N/A N/A	N/A N/A			.45 .59	90	N/A	N/A N/A	100 Yes	Pass
113330	7, 1, 1507 Network At Nockialia, F 55020	ACTIVE	1410.10 040	IVIGITITIOSI (IV	N/A	۱ ۱	·/ ^	14/7	11/7	14/ //	14/ 🔼		, ,	.55	50	11/7	11/7	100 162	1 033

H3330	7/1/1987 Network At Rockland, N'33620	Active	Metro	'049	Physical Th N	N/A	N/A	-	-	N/A	N/A		14 10		90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, N '33620	Active	Metro	'050	Occupatior N	N/A	N/A	-	-	N/A	N/A			6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, N '33620	Active	Metro	'051	Speech The N	N/A	N/A	-	-	N/A	N/A			5	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, N '33620	Active	Metro	'052	Inpatient P. N	N/A	N/A	-	-	2	5957 2		16 10	9	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Rockland, N '33620	Active	Metro	'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A			6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'040	Acute Inpal N		68	1384	1384 Yes		1384	1384	8	8	80 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'041	Cardiac Sur N	N/A	N/A	N/A	N/A	N/A	N/A		4	4	90	N/A	N/A	99.3 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'042	Cardiac Cat N	N/A	N/A	N/A	N/A	N/A	N/A		6	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N '33640	Active	Metro	'043	Critical Car N	N/A	N/A	N/A	N/A		1391	1391	6	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N '33640	Active	Metro	'045	Surgical Sei N	N/A	N/A	N/A	N/A	N/A	N/A		19 1	7	80 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N '33640	Active	Metro	'046	Skilled Nur: N	N/A	N/A	N/A	N/A		268	267	7	6	90	N/A	N/A	92.2 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N'33640	Active	Metro	'047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A		13 1	2	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N'33640	Active	Metro	'048	Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A		3	3	90	N/A	N/A	99.9 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N'33640	Active	Metro	'049	Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A		10	9	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'050	Occupatior N	N/A	N/A	N/A	N/A	N/A	N/A		9	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'051	Speech Th∈ N	N/A	N/A	N/A	N/A	N/A	N/A		9	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'052	Inpatient P N	N/A	N/A	N/A	N/A		1254	1002	8	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Saratoga, N '33640	Active	Metro	'057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A		5	5	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad '33650	Active	Metro	'040	Acute Inpal N	,	46	1384	1384 Yes	-	-	1384	8	8	80 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad '33650	Active	Metro	'041	Cardiac Sur N	N/A	N/A	N/A		N/A	N/A		4	4	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectac '33650	Active	Metro	'042	Cardiac Cat N	N/A	N/A	-		N/A	N/A		6	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectac '33650	Active	Metro	'043	Critical Can N	N/A	N/A	-	-	-	-	1098		5	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectac '33650	Active	Metro	'045	Surgical Sei N	N/A	N/A	-	-	N/A	N/A				80 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectac '33650	Active	Metro	'046	Skilled Nur: N	N/A	N/A	-	-	.,,	267	265		4	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectac '33650	Active	Metro	'047	Diagnostic N	N/A	N/A	-		N/A	N/A			1	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad '33650	Active	Metro	'048	Mammogra N	N/A	N/A	-		N/A	N/A			2	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A Schenectad 33650	Active	Metro	'049	Physical Th N	N/A	N/A			N/A	N/A		9	8	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad 33650	Active	Metro	'050	Occupation N	N/A	N/A	-	-	N/A	N/A		8	7	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad 33650	Active	Metro	'051	Speech The N	N/A	N/A	-	-	N/A	N/A		8	, 7	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad 33650	Active	Metro	'052	Inpatient P.N	N/A	N/A	-	-	-	-	1002	8	6	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Schenectad 33650	Active	Metro	'057	Outpatient N	N/A	N/A	-	-	N/A	N/A	1002		4	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Suffelle Clau 33030	Active	Large Metr		Acute Inpai N	N/A	280	7857	6941 Yes	-		6941			80 CON State	•	99.5 Yes	94.2 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Cardiac Sur N	N/A	280 N/A			N/A	N/A			9	90 CON State	: •	100 Yes	99.7 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Cardiac Cat N	N/A	N/A	-	-	N/A N/A	N/A N/A			8	90		100 Yes	99.9 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700		-		Critical Car N	N/A	N/A	-	-	-				6	90		99.5 Yes	94.1 Yes	Pass
		Active	Large Metr			•			•					6	80 CON State		99.5 Yes		
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Surgical Set N	N/A	N/A	-		N/A	N/A			4	90 CON State			94.6 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Skilled Nur: N	N/A	N/A	-	-								99 Yes	95.1 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Diagnostic N	N/A	N/A		-	N/A	N/A			9	90		99.5 Yes	94.6 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Mammogra N	N/A	N/A			N/A	N/A			6	90		99.5 Yes	96.5 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Physical Th N	N/A	N/A	-	-	N/A	N/A			9	90		99.5 Yes	95.2 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Occupatior N	N/A	N/A	-	-	N/A	N/A			0	90		99.5 Yes	94.1 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Speech The N	N/A	N/A	-	-	N/A	N/A			1	90		99.5 Yes	94.1 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Inpatient P N	N/A	N/A	-	-					3	90		99.9 Yes	98 Yes	Pass
H3330	7/1/1987 Network At Suffolk, NY '33700	Active	Large Metr		Outpatient N	N/A	N/A		•	N/A	N/A			6	90		99 Yes	92.3 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'040	Acute Inpal N			11625	11625 Yes					9	75 CON State	•	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'041	Cardiac Sur N	N/A	N/A			N/A	N/A			9	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'042	Cardiac Cat N	N/A	N/A	-		N/A	N/A			6	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'043	Critical Car N	N/A	N/A	-	-					9	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'045	Surgical Sei N	N/A	N/A	-	-	N/A	N/A				75 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'046	Skilled Nur: N	N/A	N/A	-	-					8	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A		47 4	6	85	N/A	N/A	100 Yes	Pass

H3330	7/1/1987 Network At Sullivan, N\ '33710	Active	Micro	'048	Mammogra N	N/A	N/A			N/A	N/A	N/A		35	34	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'049	Physical Th N	N/A	N/A	-		N/A	N/A	N/A		44	44	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'050	Occupatior N	N/A	N/A	-		N/A	N/A	N/A		38	38	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'051	Speech Th€ N	N/A	N/A	-		N/A	N/A	N/A		38	38	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'052	Inpatient P. N	N/A	N/A	A N,		N/A	231	03 2	2789	98	93	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Sullivan, N\'33710	Active	Micro	'057	Outpatient N	N/A	N/A	A N,	/A	N/A	N/A	N/A		19	19	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'040	Acute Inpat N		57	2727	1427	Yes	27	27	1427	15	10	80 CON State	· N/A	N/A	99.8 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'041	Cardiac Sur N	N/A	N/A	A N,	/A	N/A	N/A	N/A		10	8	90	N/A	N/A	99.9 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'042	Cardiac Cat N	N/A	N/A	A N,	/A	N/A	N/A	N/A		13	12	90	N/A	N/A	99.9 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'043	Critical Car N	N/A	N/A	A N,	/A	N/A	22	75	1416	14	11	90	N/A	N/A	99.3 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'045	Surgical Sei N	N/A	N/A	A N,	/A	N/A	N/A	N/A		36	31	80 CON State	· N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'046	Skilled Nur: N	N/A	N/A	A N,	/A	N/A	22	34	1721	35	25	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'047	Diagnostic N	N/A	N/A	A N,	/A	N/A	N/A	N/A		31	22	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'048	Mammogra N	N/A	N/A	A N,	/A	N/A	N/A	N/A		25	16	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'049	Physical Th N	N/A	N/A	A N,	/A	N/A	N/A	N/A		28	22	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'050	Occupatior N	N/A	N/A	A N,	/A	N/A	N/A	N/A		25	20	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'051	Speech Th∈ N	N/A	N/A	A N,	/A	N/A	N/A	N/A		25	20	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'052	Inpatient P N	N/A	N/A	A N	/A	N/A	304	43	2058	22	14	90	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Ulster, NY '33740	Active	Metro	'057	Outpatient N	N/A	N/A	A N	/A	N/A	N/A	N/A		13	9	90	N/A	N/A	99.2 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'040	Acute Inpai N	,	29	1384	1384		13		1384	8	8	75 CON State	. N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'041	Cardiac Sur N	N/A	N/A	A N	/A	N/A	N/A	N/A		10	7	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'042	Cardiac Cat N	N/A	N/A			N/A	N/A	N/A		18	13	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY '33750	Active	Micro	'043	Critical Car N	N/A	N/A	-		N/A	36:	•	2726	21	14	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'045	Surgical Sei N	N/A	N/A			N/A	N/A	N/A		20	19	75 CON State	. N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network Ar Warren, NY '33750	Active	Micro	'046	Skilled Nur: N	N/A	N/A	-		N/A	-	69	268	8	7	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY '33750	Active	Micro	'047	Diagnostic N	N/A	N/A			N/A	N/A	N/A		13	12	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY '33750	Active	Micro	'048	Mammogra N	N/A	N/A			N/A	N/A	N/A		3	3	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'049	Physical Th N	N/A	N/A			N/A	N/A	N/A		10	9	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network A: Warren, NY '33750	Active	Micro	'050	Occupation N	N/A	N/A	-		N/A	N/A	N/A		9	8	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY '33750	Active	Micro	'051	Speech The N	N/A	N/A	-		N/A	N/A	N/A		9	8	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY '33750	Active	Micro	'052	Inpatient P. N	N/A	N/A			N/A	100	•	1002	6	6	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Warren, NY 33750	Active	Micro	052	Outpatient N	N/A	N/A	-		N/A	N/A	N/A	1002	5	5	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtor 33760	Active	Micro	'040	Acute Inpal N	N/A	23	1384	1384		13	-	1384	8	8	75 CON State		N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtor 33760	Active	Micro	040	Cardiac Sur N	N/A	N/A			N/A	N/A	N/A	1304	11	8	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtor 33760	Active	Micro	'042	Cardiac Cat N	N/A	N/A			N/A	N/A	N/A		19	13	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtoi 33760	Active	Micro	'043	Critical Car N	N/A	N/A			N/A	44	•	2789	23	15	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtoi 33760	Active	Micro	045	Surgical Sei N	N/A	N/A			N/A	N/A	N/A	2703	20	19	75 CON State	,	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtor 33760	Active	Micro	'046	Skilled Nur: N	N/A	N/A			N/A		69	268	8	7	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washington 33760	Active	Micro	'047	Diagnostic N	N/A	N/A	-		N/A	N/A	N/A	200	13	13	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washingtoi 33760	Active	Micro	'048	Mammogra N	N/A	N/A			N/A	N/A	N/A		3	3	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washington 33760	Active	Micro	'049	-	N/A				N/A	N/A	N/A		10	10	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washington 33760	Active	Micro	'050	Physical Th N Occupatior N	N/A	N/ <i>A</i> N/ <i>A</i>			N/A	N/A	N/A		9	9	85	N/A	N/A	100 Yes	Pass
H3330	7/1/1987 Network At Washington 33760	Active	Micro	050	Speech The N	N/A	N/A	-		N/A	N/A	N/A		9	9	85	N/A	N/A	100 Yes	Pass
H3330		Active	Micro	'052	•	N/A N/A		-			10/A 12:		1002	8	6	85	N/A N/A	-	100 Yes	Pass
	7/1/1987 Network At Washingtor '33760			'052 '057	Inpatient P N	N/A N/A	N/A			N/A			1002	8 5	5	85 85	•	N/A N/A	100 Yes	
H3330	7/1/1987 Network At Washingtor '33760	Active	Micro		Outpatient N	N/A	N/A	-		N/A	N/A	N/A	CECO				N/A	•		Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr		Acute Inpal N	A1/A	171	7395	6568		73!		6568	27	24	80 CON State		100 Yes	96.4 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr		Cardiac Sur N	N/A	N/A	-		N/A	N/A	N/A		35	32	90		100 Yes	96.5 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr		Cardiac Cat N	N/A	N/A	-		N/A	N/A	N/A	7007	40	33	90		100 Yes	96.5 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr		Critical Can N	N/A	N/A			N/A	82:		7987	23	21	90 80 CON State		100 Yes	96.4 Yes	Pass
H3330	7/1/1987 Network At Westchests '33800	Active	Large Metr		Surgical Set N	N/A	N/A			N/A	N/A	N/A	EE26	50 100	43	80 CON State		100 Yes	99 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr	040	Skilled Nur: N	N/A	N/A	ı N,	/A	N/A	165	44 1	5536	100	94	90		100 Yes	98.7 Yes	Pass

H3330	7/1/1987 Network A: Westcheste '33800	Active	Large Metr '047	Diagnostic N	N/A	N/A	N/A	N/A	N/A	N/A	59	52	90	100 Yes	96.4 Yes	Pass
H3330	7/1/1987 Network A: Westcheste '33800	Active	Large Metr '048	Mammogra N	N/A	N/A	N/A	N/A	N/A	N/A	66	55	90	100 Yes	98.4 Yes	Pass
H3330	7/1/1987 Network A: Westcheste '33800	Active	Large Metr '049	Physical Th N	N/A	N/A	N/A	N/A	N/A	N/A	50	44	90	100 Yes	98.1 Yes	Pass
H3330	7/1/1987 Network A: Westcheste '33800	Active	Large Metr '050	Occupation N	N/A	N/A	N/A	N/A	N/A	N/A	44	38	90	100 Yes	96.4 Yes	Pass
H3330	7/1/1987 Network A: Westcheste '33800	Active	Large Metr '051	Speech The N	N/A	N/A	N/A	N/A	N/A	N/A	77	70	90	100 Yes	99.7 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr '052	Inpatient P. N	N/A	N/A	N/A	N/A	1701	12 16120	62	56	90	100 Yes	98.9 Yes	Pass
H3330	7/1/1987 Network At Westcheste '33800	Active	Large Metr '057	Outpatient N	N/A	N/A	N/A	N/A	N/A	N/A	31	26	90	100 Yes	96.4 Yes	Pass

	Effective Di Reason Cor County Stat State													
330 330	7/1/1987 Network A Albany, NY '330 7/1/1987 Network A Albany, NY '330			'001 '002	General Pri N Family Prac N	N/A N/A	9 215	9 N/A 207 N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A
330	7/1/1987 Network A Albany, NY '330			'003	Internal Mr N	N/A N/A	576	575 N/A	N/A	N/A N/A	N/A N/A	N/A	N/A	N/A
330	7/1/1987 Network A Albany, NY '330			'004	Geriatrics N	N/A	17	17 N/A	N/A	N/A	N/A	N/A	N/A	N/A
330	7/1/1987 Network A Albany, NY '330			'005	Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
330	7/1/1987 Network A Albany, NY '330			'006	Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
330	7/1/1987 Network A Albany, NY '330			'S03	Primary Ca N	. 12	817	808 Yes		80 Telehealth N/A	N/A		9.5 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'007	Allergy and N	1	12	12 Yes		80 Telehealth N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'008	Cardiology N	2	133	126 Yes		80 Telehealth N/A	N/A	99	9.6 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'010	Chiropract: N	1	4	4 Yes		90 N/A	N/A	99	9.9 Yes	Pass
330	7/1/1987 Network A Albany, NY '330		Metro	'011	Dermatolo N	2	22	17 Yes		80 Telehealth N/A	N/A	99	9.9 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'012	Endocrinol N	1	39	37 Yes		80 Telehealth N/A	N/A	1	00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330		Metro	'013	ENT/Otolar N	1	36	32 Yes		80 Telehealth N/A	N/A	1	00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'014	Gastroente N	1	73	66 Yes		90 N/A	N/A	1	00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330		Metro	'015	General Su N	2	111	103 Yes		90 N/A	N/A		3.9 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'016	Gynecolog N	1	146	122 Yes		80 Telehealth N/A	N/A	1	00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'017	Infectious I N	1	29	29 Yes		80 Telehealth N/A	N/A	1	00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'018	Nephrolog N	1	37	33 Yes		80 Telehealth N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'019	Neurology N	1	79	66 Yes		80 Telehealth N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330		Metro	'020	Neurosurgi N	1	25	25 Yes		90 N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'021	Oncology - N	2	64	59 Yes		90 N/A	N/A		9.8 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'022	Oncology - N	1	18	18 Yes		90 N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'023	Ophthalmc N	2	96	90 Yes		80 Telehealth N/A	N/A		00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330			'025	Orthopedic N	2	33	33 Yes		90 N/A	N/A		3.9 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'026	Physiatry, I N	1	27	24 Yes		90 N/A	N/A		9.8 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'027	Plastic Sur _E N	1	27	27 Yes		90 N/A	N/A		00 Yes	Pass
330	7/1/1987 Network A Albany, NY '330			'028	Podiatry N	2	20	13 Yes		90 N/A	N/A		00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330			'029	Psychiatry N	1	18	14 Yes		80 Telehealth N/A	N/A	_	00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330			'030	Pulmonolo N	1	62	55 Yes		90 N/A	N/A		9.9 Yes	Pass
30	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'031	Rheumatol N	1	20	18 Yes		90 N/A	N/A	1	00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330			'033	Urology N	1	51	42 Yes		90 N/A	N/A		00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330			'034	Vascular St N	1	23	22 Yes		90 N/A	N/A		00 Yes	Pass
30	7/1/1987 Network A Albany, NY '330	0 Active	Metro	'035	Cardiothor N	1	24	21 Yes		90 N/A	N/A		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330		8		General Pr: N	N/A	116	115 N/A	N/A	N/A	N/A	N/A	N/A	N/A
80	7/1/1987 Network A Bronx, NY '330				Family Prac N	N/A	690	680 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Bronx, NY '330	0 Active	Large Me	tr '003	Internal Mr N	N/A	4696	4656 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Bronx, NY '330		Large Me	tr '004	Geriatrics N	N/A	237	236 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Bronx, NY '330				Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Bronx, NY '330				Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Bronx, NY '330			tr 'S03	Primary Ca N	28	5739	5687 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Allergy and N	1	259	232 Yes		80 Telehealth	100 Yes	_	00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Cardiology N	5	1461	1400 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Chiropract: N	2	177	148 Yes		90	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Dermatolo; N	3	590	574 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Endocrinol N	1	429	404 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				ENT/Otolar N	2	471	439 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Gastroente N	3	721	696 Yes		90	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				General Su N	5	1318	1249 Yes		90	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Gynecolog N	1	1798	1711 Yes		80 Telehealth	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330		Large Me	tr '017	Infectious I N	1	563	543 Yes		80 Telehealth	100 Yes	1	00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330				Nephrolog N	2	594	559 Yes		80 Telehealth	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Neurology N	3	874	841 Yes		80 Telehealth	100 Yes		00 Yes	Pass
80	7/1/1987 Network A Bronx, NY '330				Neurosurgi N	1	210	210 Yes		90	100 Yes		00 Yes	Pass
30	7/1/1987 Network A Bronx, NY '330	0 Active	Large Me	tr '021	Oncology - N	4	962	939 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Oncology - N	2	243	239 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Ophthalmc N	5	938	909 Yes		80 Telehealth	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Orthopedic N	4	645	613 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Physiatry, I N	1	556	527 Yes		90	100 Yes	_	00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Plastic Surg N	1	206	199 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330		-		Podiatry N	4	474	459 Yes		90	100 Yes		00 Yes	Pass
80	7/1/1987 Network A Bronx, NY '330		-		Psychiatry N	3	69	66 Yes		80 Telehealth	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Pulmonolo N	3	696	671 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Rheumatol N	2	265	245 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Urology N	3	405	402 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Vascular St N	1	242	228 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Bronx, NY '330				Cardiothor N	1	258	250 Yes		90	100 Yes		00 Yes	Pass
0	7/1/1987 Network A Broome, N '330			'001	General Pri N	N/A	1	1 N/A	N/A	N/A	N/A	N/A	N/A	N/A
80	7/1/1987 Network A Broome, N '330			'002	Family Prac N	N/A	101	98 N/A	N/A	N/A	N/A	N/A	N/A	N/A
0	7/1/1987 Network A Broome, N '330			'003	Internal Mr N	N/A	194	193 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Broome, N '330			'004	Geriatrics N	N/A	6	6 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Broome, N '330			'005	Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Broome, N '330		Metro	'006	Primary Ca N	N/A	0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
30	7/1/1987 Network A Broome, N '330	0 Active	Metro	'S03	Primary Ca N	9	302	298 Yes		80 Telehealth N/A	N/A	99	9.3 Yes	Pass
30	7/1/1987 Network A: Broome, N' '330	0 Active	Metro	'007	Allergy and N	1	2	2 Yes		80 Telehealth N/A	N/A	1	00 Yes	Pass
30	7/1/1987 Network A Broome, N '330	0 Active	Metro	'008	Cardiology N	2	25	24 Yes		80 Telehealth N/A	N/A	97	7.8 Yes	Pass
30	7/1/1987 Network A Broome, N '330	0 Active	Metro	'010	Chiropracti N	1	2	2 Yes		90 N/A	N/A	1	00 Yes	Pass
30	7/1/1987 Network A Broome, N '330	0 Active	Metro	'011	Dermatolo; N	1	4	4 Yes		80 Telehealth N/A	N/A	99	9.3 Yes	Pass
		0 Active		'012	Endocrinol N		4	3 Yes		80 Telehealth N/A	N/A	1		

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H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'013	ENT/Otolar N		1	6	6 Yes		80 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N' '33030	Active	Metro	'014	Gastroente N		1	14	12 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Broome, N: '33030	Active	Metro	'015	General Su N		2	34	29 Yes		90	N/A	N/A		96.9 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'016	Gynecology N		1	46	44 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'017	Infectious I N		1	8	2 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'018	Nephrolog N		1	6	6 Yes		80 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'019	Neurology N		1	9	8 Yes		80 Telehealth		N/A		100 Yes	Pass
		Active	Metro				1	4				N/A	,			Pass
H3330	7/1/1987 Network A Broome, N '33030			'020	Neurosurgi N				4 Yes				N/A		100 Yes	
H3330	7/1/1987 Network A: Broome, N: '33030	Active	Metro	'021	Oncology - N		1	7	7 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Broome, N: '33030	Active	Metro	'022	Oncology - N		1	2	2 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'023	Ophthalmc N		2	3	3 Yes		80 Telehealth	N/A	N/A		96.4 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'025	Orthopedic N		2	23	21 Yes		90	N/A	N/A		98.6 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'026	Physiatry, I N		1	4	4 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'027	Plastic Surg N		1	3	3 Yes			N/A	N/A		100 Yes	Pass
											50					
H3330	7/1/1987 Network A: Broome, N: '33030	Active	Metro	'028	Podiatry N		1	15	14 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Broome, N: '33030	Active	Metro	'029	Psychiatry N		1	4	3 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'030	Pulmonolo N		1	11	10 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'031	Rheumatol N		1	5	2 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'033	Urology N		1	17	17 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'034	Vascular St N		1	6	5 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Broome, N '33030	Active	Metro	'035	Cardiothor N		1	5	4 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'001	General Pri N	N/A		10	7 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'002	Family Prac N	N/A		228	198 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'003	Internal Mr N	N/A		626	595 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'004	Geriatrics N	N/A		20	18 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'005	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
														,		
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'006	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'S03	Primary Ca N		3	884	818 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'007	Allergy and N		1	43	38 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'008	Cardiology N		1	228	181 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'010	Chiropracts N		1	44	38 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'011	Dermatolo N		1	52	49 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'012	Endocrinol N		1	156	121 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'013	ENT/Otolar N		1	85	77 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'014	Gastroente N		1	147	128 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'015	General Su N		1	235	177 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'016	Gynecology N		1	367	339 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'017	Infectious I N		1	124	90 Yes		75 Telehealth	N/Δ	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'018	Nephrolog N		1	100	80 Yes		75 Telehealth		N/A		100 Yes	Pass
					-1											
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'019	Neurology N		1	132	127 Yes		75 Telehealth	,	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'020	Neurosurgi N		1	100	70 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'021	Oncology - N		1	99	92 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'022	Oncology - N		1	102	92 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'023	Ophthalmc N		1	139	108 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'025	Orthopedic N		1	99	46 Yes			N/A	N/A		100 Yes	Pass
							-	82					,			
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'026	Physiatry, I N		1		66 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'027	Plastic Sur _ξ N		1	117	83 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'028	Podiatry N		1	64	52 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'029	Psychiatry N		1	34	29 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'030	Pulmonolo N		1	112	108 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'031	Rheumatol N		1	92	64 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'033	Urology N		1	80	75 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Columbia, I '33200	Active	Micro	'034	Vascular St N		1	120	89 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Columbia, I '33200	Active	Micro	'035	Cardiothor N		1	103	80 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'001	General Pr: N	N/A		8	5 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'002	Family Prac N	N/A		183	117 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware. '33220	Active	Rural	'003	Internal McN	N/A		350	260 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware, I '33220	Active	Rural	'004	Geriatrics N	N/A		10	8 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware, 1 33220	Active	Rural	'005	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'006	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'S03	Primary Ca N		3	551	390 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, '33220	Active	Rural	'007	Allergy and N		1	39	32 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, '33220	Active	Rural	'008	Cardiology N		1	320	283 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, '33220	Active	Rural	'010	Chiropracts N		1	40	38 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, I '33220	Active	Rural	'011	Dermatolo N		1	54	42 Yes		75 Telehealth		N/A		99.7 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1 33220	Active	Rural	'012	Endocrinol N		1	103	100 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, '33220	Active	Rural	'013	ENT/Otolar N		1	75	66 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'014	Gastroente N		1	142	137 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, '33220	Active	Rural	'015	General Su N		1	283	262 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Delaware, I '33220	Active	Rural	'016	Gynecolog N		1	336	306 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1 33220	Active	Rural	'017	Infectious I N		1	78	76 Yes		75 Telehealth		N/A		100 Yes	Pass
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H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'018	Nephrolog N		1	85	77 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1 '33220	Active	Rural	'019	Neurology N		1	144	135 Yes		75 Telehealth	,	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Delaware, 1'33220	Active	Rural	'020	Neurosurg N		1	62	62 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'021	Oncology - N		1	105	102 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1 33220	Active	Rural	'022	Oncology - N		1	77	77 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'023	Ophthalmc N		1	144	134 Yes		75 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, I '33220	Active	Rural	'025	Orthopedic N		1	139	113 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1 33220	Active	Rural	'026	Physiatry, I N		1	67	65 Yes		85	N/A	N/A		100 Yes	Pass

H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'027	Plastic Surg N		1	74	61 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'028	Podiatry N		1	79	73 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'029	Psychiatry N		1	34	31 Yes		75 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'030	Pulmonolo N		1	130	115 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network Al Delaware, 1'33220	Active	Rural	'031	Rheumatol N		1	58	56 Yes		85	N/A	N/A		100 Yes	Pass
	., .,						-									
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'033	Urology N		1	96	88 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'034	Vascular St N		1	83	80 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Delaware, 1'33220	Active	Rural	'035	Cardiothor N		1	73	73 Yes		85	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'001	General Pri N	N/A		4	4 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Dutchess, 1 '33230	Active	Metro	'002	Family Prac N	N/A		173	167 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Dutchess, 1 33230	Active	Metro	'003	Internal McN	N/A		635	607 N/A	N/A		N/A	N/A	N/A	N/A	N/A
						,				,						
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'004	Geriatrics N	N/A		13	11 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'005	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'006	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'S03	Primary Ca N		12	825	789 Yes		80 Telehealth	N/A	N/A		99.5 Yes	Pass
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'007	Allergy and N		1	42	34 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 33230	Active	Metro	'008	Cardiology N		2	238	207 Yes		80 Telehealth		N/A		98.2 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'010	Chiropract: N		1	59	50 Yes		90	N/A	N/A		98.4 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'011	Dermatolo; N		2	112	86 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'012	Endocrinol N		1	192	123 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'013	ENT/Otolar N		1	81	64 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'014	Gastroente N		1	158	136 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 33230	Active	Metro	'015	General Su N		2	251	197 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'016	Gynecolog N		1	357	296 Yes		80 Telehealth		N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'017	Infectious I N		1	212	109 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'018	Nephrolog N		1	91	75 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'019	Neurology N		1	210	132 Yes		80 Telehealth	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'020	Neurosurg N		1	102	56 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'021	Oncology - N		2	153	106 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'022	Oncology - N		1	107	89 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'023	Ophthalmc N		2	102	85 Yes		80 Telehealth	N/A	N/A		98.2 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'025	Orthopedic N		2	108	86 Yes		90	N/A	N/A		97.1 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'026	Physiatry, FN		1	104	62 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 33230	Active	Metro	'027	Plastic Sure N		1	113	66 Yes		90	N/A	N/A		100 Yes	Pass
											90					
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'028	Podiatry N		2	116	103 Yes			N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'029	Psychiatry N		1	29	28 Yes		80 Telehealth	,	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'030	Pulmonolo N		1	136	128 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'031	Rheumatol N		1	132	69 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'033	Urology N		1	101	84 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Dutchess, 1 '33230	Active	Metro	'034			1	134			90	N/A	N/A		100 Yes	Pass
112220	7/1/1007 Natural A Dutahasa 1/22220				Vascular St N				81 Yes			,				
H3330	7/1/1987 Network A Dutchess, I '33230	Active	Metro	'035	Cardiothor N		1	130	74 Yes		90	N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Greene, NY '33300	Active Active	Metro Micro	'035 '001	Cardiothor N General Pr: N	N/A		130 11	74 Yes 10 N/A	N/A		N/A N/A	N/A N/A	N/A	100 Yes N/A	Pass N/A
H3330 H3330	7/1/1987 Network A Greene, NY '33300 7/1/1987 Network A Greene, NY '33300	Active	Metro Micro Micro	'035 '001 '002	Cardiothor N General Pri N Family Prac N	N/A		130 11 232	74 Yes 10 N/A 186 N/A	N/A		N/A N/A N/A	N/A N/A N/A	N/A	100 Yes N/A N/A	Pass N/A N/A
H3330	7/1/1987 Network A Greene, NY '33300	Active Active	Metro Micro	'035 '001	Cardiothor N General Pr: N			130 11	74 Yes 10 N/A			N/A N/A	N/A N/A		100 Yes N/A	Pass N/A
H3330 H3330	7/1/1987 Network A Greene, NY '33300 7/1/1987 Network A Greene, NY '33300	Active Active Active	Metro Micro Micro	'035 '001 '002	Cardiothor N General Pri N Family Prac N	N/A		130 11 232	74 Yes 10 N/A 186 N/A	N/A		N/A N/A N/A N/A	N/A N/A N/A	N/A	100 Yes N/A N/A	Pass N/A N/A
H3330 H3330 H3330 H3330	7/1/1987 Network A: Greene, NY '33300 7/1/1987 Network A: Greene, NY '33300 7/1/1987 Network A: Greene, NY '33300 7/1/1987 Network A: Greene, NY '33300	Active Active Active Active Active	Metro Micro Micro Micro Micro	'035 '001 '002 '003 '004	Cardiothor N General Pr: N Family Prac N Internal Mc N Geriatrics N	N/A N/A N/A		130 11 232 625 19	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A	N/A N/A N/A		N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A	N/A N/A N/A	100 Yes N/A N/A N/A N/A	Pass N/A N/A N/A N/A
H3330 H3330 H3330 H3330	7/1/1987 Network A: Greene, N1 '33300 7/1/1987 Network A: Greene, N1 '33300	Active Active Active Active Active Active	Metro Micro Micro Micro Micro Micro	'035 '001 '002 '003 '004 '005	Cardiothor N General Pri N Family Prac N Internal Mc N Geriatrics N Primary Ca N	N/A N/A N/A N/A		130 11 232 625 19 0	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A	N/A N/A N/A N/A		N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A	Pass N/A N/A N/A N/A
H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, NY '33300 7/1/1987 Network A. Greene, NY '33300	Active Active Active Active Active Active Active	Metro Micro Micro Micro Micro Micro Micro	'035 '001 '002 '003 '004 '005 '006	Cardiothor. N General Pr: N Family Prac N Internal Mc N Geriatrics N Primary Ca N Primary Ca N	N/A N/A N/A	1	130 11 232 625 19 0	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A	N/A N/A N/A	90	N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A	N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A	Pass N/A N/A N/A N/A N/A
H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, N1 '33300 7/1/1987 Network A. Greene, N1 '33300	Active Active Active Active Active Active Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 'S03	Cardiothor. N General Pr: N Family Prac N Internal Mc N Geriatrics N Primary Ca N Primary Ca N Primary Ca N	N/A N/A N/A N/A	3	130 11 232 625 19 0 0	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes	N/A N/A N/A N/A	90 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A N/A Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, N1 '33300	Active Active Active Active Active Active Active Active Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007	Cardiothor: N General Pr: N Family Prac N Internal Mc N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N	N/A N/A N/A N/A	3 1	130 11 232 625 19 0 0 887 40	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A N/A Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, N1 '33300 7/1/1987 Network A. Greene, N1 '33300	Active Active Active Active Active Active Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 'S03	Cardiothor. N General Pr: N Family Prac N Internal Mc N Geriatrics N Primary Ca N Primary Ca N Primary Ca N	N/A N/A N/A N/A	3	130 11 232 625 19 0 0	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes	N/A N/A N/A N/A	90 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A N/A Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, N1 '33300	Active Active Active Active Active Active Active Active Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007	Cardiothor: N General Pr: N Family Prac N Internal Mc N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N	N/A N/A N/A N/A	3 1	130 11 232 625 19 0 0 887 40	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A N/A Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A. Greene, N1 '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 'S03 '007 '008	Cardiothor: N General Pr: N Family Prac N Internal M: N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropract: N	N/A N/A N/A N/A	3 1 1 1	130 11 232 625 19 0 0 887 40 224 40	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 'S03 '007 '008 '010	Cardiothor. N General Pr: N Family Prac N Internal M: N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropract N Dermatolo, N	N/A N/A N/A N/A	3 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, N' '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011	Cardiothor. N General Pri. N Family Prac N Internal Mi. N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropract N Dermatolo, N Endocrinol N	N/A N/A N/A N/A	3 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 97 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013	Cardiothor. N General Pri. N Family Prac N Internal Mi. N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N Endocrinol N ENT/Otolal N	N/A N/A N/A N/A	3 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 37 Yes 68 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014	Cardiothor. N General Pr. N Family Prac N Internal Mi N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Dermatolo, N Endocrinol· N Ent/Otolai N Gastroente N	N/A N/A N/A N/A	3 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth 75 Telehealth 85	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY 33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014	Cardiothor. N General Pri N Family Prac N Internal Mi N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N Endocrinol N ENT/Otolai N Gastroente N General Su N	N/A N/A N/A N/A	3 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth 75 Telehealth 85 85	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014	Cardiothor. N General Pr. N Family Prac N Internal Mi N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Dermatolo, N Endocrinol· N Ent/Otolai N Gastroente N	N/A N/A N/A N/A	3 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth 75 Telehealth 85	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY 33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014	Cardiothor. N General Pri N Family Prac N Internal Mi N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N Endocrinol N ENT/Otolai N Gastroente N General Su N	N/A N/A N/A N/A	3 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 75 Telehealth 75 Telehealth 85 85	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017	Cardiothor. N General Pr. N Family Prac N Internal Mr. N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Cardiology N Chiropract N Dermatolo, N Endocrinol. N Endocrinol N Gastroente N General Su N Gynecology N Infectious I N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 97 Yes 68 Yes 100 Yes 180 Yes 284 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 75 Telehealth 85 Telehealth 75 Telehealth 75 Telehealth 85 85 85 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY 33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018	Cardiothor. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Infectious I N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84	74 Yes 10 N/A 186 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 34 Yes 35 Yes 35 Yes 35 Yes 68 Yes 100 Yes 180 Yes 284 Yes 70 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019	Cardiothor. N General Pr. N General Pr. N Internal M. N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Endocrinol N Endocrinol N Endocrinol N Gastroente N General Su N Gynecology N Infectious I N Nephrology N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84	74 Yes 10 N/A 106 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 34 Yes 35 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes 180 Yes 284 Yes 70 Yes 124 Yes	N/A N/A N/A N/A	90 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 85 85 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropractt N Dermatolo, N Ent/Otolar N Gastroente N General Su N Gynecology N Neurology N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63	74 Yes 10 N/A 186 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 75 Yes 124 Yes 45 Yes	N/A N/A N/A N/A	75 Telehealth 85 88	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecolog: N Infectious I N Nephrolog N Neurology N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 887 40 60 224 40 60 103 377 144 213 339 80 84 145 63 109	74 Yes 10 N/A 186 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 85	, N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropractt N Dermatolo, N Ent/Otolar N Gastroente N General Su N Gynecology N Neurology N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63	74 Yes 10 N/A 186 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 75 Yes 124 Yes 45 Yes	N/A N/A N/A N/A	75 Telehealth 85 88	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecolog: N Infectious I N Nephrolog N Neurology N Neurology N Neurology N Neurology N Neurology N Neurology N Oncology - N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 887 40 60 224 40 60 103 377 144 213 339 80 84 145 63 109	74 Yes 10 N/A 186 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes	N/A N/A N/A N/A	75 Telehealth 75 Telehealth 85	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '503 '006 '503 '007 '010 '011 '0112 '013 '014 '015 '016 '017 '018 '019 '020 '021	Cardiothor. N General Pr. N General Pr. N Internal M. N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Endocrinol N Endocrinol N General Su N General Su N Nephrolog N Neprolog N Neurosurg N Neurosurg N Oncology N Oncology N Oncology N Oncology N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 11 232 625 19 0 0 887 40 60 103 77 144 213 339 80 84 145 63 109 82	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 7 N/A 181 Yes 34 Yes 35 Yes 35 Yes 35 Yes 17 Yes 68 Yes 180 Yes	N/A N/A N/A N/A	90 75 Telehealth 85 85 85 85	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropract N Dermatolo, N Endocrinol N Endocrinol N General Su N Gynecology N Neurosurg N Neurosurg N Neurosurg N Neurology N Neurosurg N Oncology - N Onchology N Onthalmc N Orthopedic N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 887 40 224 40 60 103 77 144 213 339 80 84 4145 63 109 82 224	74 Yes 10 N/A 186 N/A 573 N/A 16 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 37 Yes 68 Yes 100 Yes 180 Yes 284 Yes 75 Yes 124 Yes 45 Yes 90 Yes 70 Yes 107 Yes	N/A N/A N/A N/A	75 Telehealth 85 85 87 87 87 87 87 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025	Cardiothor. N General Pr. N General Pr. N General Pr. N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracts N Dermatolo, N Endocrinol N ENT/Otolar N Goneral Su N Gynecology N Neurosurg N Neurology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Ophthalme N Orthopedic N Physiatry, I N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63 109 82 122 75 68	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 45 Yes 90 Yes 107 Yes 49 Yes 62 Yes	N/A N/A N/A N/A	75 Telehealth 85 85 85 85 87 Telehealth 88 85 85 85 86 88 85 85 86 86 86 86 86 86 86 86 86 86 86 86 86	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes 10	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '503 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025 '026	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onchalm C Ophthalm C N Orthopedic N Physiatry, I N Plastic Surg N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63 109 82 122 75 68 78	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 35 Yes 36 Yes 180 Yes 180 Yes 284 Yes 124 Yes 45 Yes 90 Yes 70 Yes 45 Yes 90 Yes 107 Yes 49 Yes 62 Yes 55 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 85 85 85 85 85 85 85 85 85 85 85 85 85	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '006 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025 '026 '027	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N Endocrinol N Endocrinol N General Su N General Su N Gynecology N Infectious I N Nephrology N Neurosurg N Neurosurg N Oncology - N Oncology - N Oncology - N Oncology N Oncology N Onthopedic N Physiatry, I N Plastic Surg N Podiatry N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63 109 82 127 568 78 78 68 78 69 69 60 60 60 60 60 60 60 60 60 60	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 100 Yes 124 Yes 45 Yes 90 Yes 107 Yes 49 Yes 62 Yes 55 Yes 50 Yes	N/A N/A N/A N/A	90 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 85 75 Teleheatth 85 85 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 85 85 87 75 Teleheatth 88 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes 100 Ye	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '006 '007 '008 '010 '011 '011 '012 '013 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025 '026 '027 '028	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Cardiology N Endocrinol N ENT/Otolat N General Su N General Su N General Su N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onchopedic N Physiatry, I Plastic Surg N Podiatry N Podiatry N Podiatry N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 60 103 77 144 213 339 80 84 145 63 109 82 122 75 68 78 69 90 90 90 90 90 90 90 90 90 9	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes 170 Yes 171 Yes 172 Yes 172 Yes 173 Yes 174 Yes 175 Yes 177 Yes 177 Yes 178 Yes 179 Yes	N/A N/A N/A N/A	75 Telehealth 85 85 85 85 87 Telehealth 88 88 87 75 Telehealth 87 Telehealth 88 88 87 75 Telehealth	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes 10	Pass N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '006 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025 '026 '027	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Geriatrics N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N Endocrinol N Endocrinol N General Su N General Su N Gynecology N Infectious I N Nephrology N Neurosurg N Neurosurg N Oncology - N Oncology - N Oncology - N Oncology N Oncology N Onthopedic N Physiatry, I N Plastic Surg N Podiatry N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 224 40 60 103 77 144 213 339 80 84 145 63 109 82 127 568 78 78 68 78 69 69 60 60 60 60 60 60 60 60 60 60	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 100 Yes 124 Yes 45 Yes 90 Yes 107 Yes 49 Yes 62 Yes 55 Yes 50 Yes	N/A N/A N/A N/A	90 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 85 75 Teleheatth 85 85 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 75 Teleheatth 85 85 87 75 Teleheatth 88 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes 100 Ye	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '006 '007 '008 '010 '011 '011 '012 '013 '015 '016 '017 '018 '019 '020 '021 '022 '023 '025 '026 '027 '028	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Cardiology N Endocrinol N ENT/Otolat N General Su N General Su N General Su N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onchopedic N Physiatry, I Plastic Surg N Podiatry N Podiatry N Podiatry N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 887 40 60 103 77 144 213 339 80 84 145 63 109 82 122 75 68 78 69 90 90 90 90 90 90 90 90 90 9	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes 170 Yes 171 Yes 172 Yes 172 Yes 173 Yes 174 Yes 175 Yes 177 Yes 177 Yes 178 Yes 179 Yes	N/A N/A N/A N/A	75 Telehealth 85 85 85 85 87 Telehealth 88 88 87 75 Telehealth 87 Telehealth 88 88 87 75 Telehealth	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes 10	Pass N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0003 0003 0005 0006 0006 0006 0006 0006 0007 0008 0007 0007 0008 0007 0007 0008 0007 0007 000	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecolog: N Infectious I N Nephrolog N Neurology N Neurology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Onchology - N Onthalme N Orthopedic N Physiatry, I N Plastic Sur N Poddatry N Psychiatry N Pychiatry N Pychiatry N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 0 0 224 40 60 103 77 144 213 339 80 84 145 63 109 82 27 56 68 69 98 98 98 98 98 98 98 98 98 98 98 98 98	74 Yes 10 N/A 10 N/A 186 N/A 186 N/A 187 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 35 Yes 180 Yes 180 Yes 180 Yes 124 Yes 124 Yes 124 Yes 125 Yes 127 Yes 127 Yes 128 Yes 129 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 85 85 85 87 87 87 87 88 88 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0005 0006 0006 0006 0006 0006 0006 0006 0006 0007 0008 0008 000	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Oncology - N Onchamme N Orthopedic N Physiatry, I Plastic Surg N Podidatry Pulmonolo N Reumatol N Reumatol N Reumatol N	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 0 0 224 40 60 103 77 144 145 80 84 145 63 109 82 75 69 80 78 69 80 80 80 80 80 80 80 80 80 80	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 97 Yes 68 Yes 100 Yes 180 Yes 284 Yes 170 Yes 124 Yes 45 Yes 170 Yes 171 Yes 171 Yes 172 Yes 172 Yes 172 Yes 172 Yes	N/A N/A N/A N/A	90 75 Telehealth 85 85 85 87 87 87 88 88 88 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A 100 Yes 10	Pass N/A N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0003 0004 0005 0006 0006 0006 0006 0006 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0009 0008 0009 0008 0009 0008 0009 0008 0009 000	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N Endocrinol N Endocrinol N Ent/Otola N General Su N Gynecology N Neurosurg, N Neurology N Neurosurg, N Oncology - N Plastic Sur E Podiatry N Pyschiatry, I Pyschiatry N Pyschiatry N Pychiatry N Pychiatry N Pychiatry N Pychiatry N Pychiatry N Pychiatry N Podiatry N Pychiatry N Podiatry N Pychiatry	N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 0 887 40 60 103 77 144 60 103 339 80 84 145 63 84 145 63 84 145 63 63 84 122 85 66 66 67 86 67 87 88 67 88 67 88 68 68 68 68 68 68 68 68 68	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 124 Yes 45 Yes 124 Yes 45 Yes 107 Yes 62 Yes 55 Yes 50 Yes 50 Yes 50 Yes 50 Yes 50 Yes 77 Yes 50 Yes 77 Yes 50 Yes 77 Yes 50 Yes 78 Yes 50 Yes 79 Yes 50 Yes 79 Yes	N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes 100 Ye	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0005 0006 000	Cardiothor. N General Pr. N General Pr. N General Pr. N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N EMT/Otolan N General Su N General Su N General Su N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onchopedic N Physiatry, I Plastic Surg N Pydiatry N Pulmonolo N Rheumatol N Pydiatry N Pulmonolo N Rheumatol N N Rheumatol N N Rheumatol N Vascular Si N Cardiothor N	N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 222 232 625 19 0 0 0 224 40 60 224 40 60 2213 339 80 84 145 663 109 82 122 75 68 87 8 69 30 125 62 88 85 77 77	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 37 Yes 68 Yes 180 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes 107 Yes 49 Yes 62 Yes 55 Yes 57 Yes 101 Yes 55 Yes 27 Yes 101 Yes 50 Yes 77 Yes	N/A N/A N/A N/A N/A	90 75 Telehealth 85 85 85 87 87 87 88 88 88 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes 100 Ye	Pass N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035 '001 '002 '003 '004 '005 '006 '006 '007 '008 '007 '008 '010 '011 '012 '013 '014 '015 '016 '017 '018 '019 '020 '021 '022 '030 '031 '035 '036 '037 '038 '039 '031 '033 '034 '035 '036 '037 '037 '038 '039 '031 '033 '034 '035 '036 '037 '038 '039 '039 '039 '030 '031 '033 '034 '035 '036 '037 '037 '038 '039 '039 '039 '039 '030 '031 '031 '032 '033 '034 '035 '036 '037 '037 '038 '039 '0	Cardiothor. N General Pr. N General Pr. N General Pr. N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onthopedic N Physiatry, I Plastic Surg N Podiatry N Pulmonolo N Rheumatol N Rheumatol N Vascular Su Vascular Su Cardiothor. N General Pr. N	N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 0 224 40 60 103 77 144 145 84 145 63 30 109 82 75 68 69 122 75 68 88 85 77 78	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 170 Yes 124 Yes 45 Yes 90 Yes 70 Yes 170 Yes	N/A N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes N/A	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0003 0004 0005 0006 0006 0006 0006 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 000	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N Endocrinol N Endocrinol N Endocrinol N General Su N Gynecology N Neurosurg N Neurosurg N Neurosurg N Neurosurg N Oncology - N Oncology - N Oncology - N Oncology N Plastic Surg Plastic Surg Plastic Surg N Podiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Cardiothor N Cardiothor N Cardiothor N Cardiothor N General Pr N Family Prac N	N/A N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 2232 625 19 0 0 0 887 40 60 60 103 77 44 4213 339 80 84 445 63 109 82 122 75 68 78 79 90 90 90 90 90 90 90 90 90 90 90 90 90	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 34 Yes 35 Yes 35 Yes 35 Yes 37 Yes 68 Yes 100 Yes 180 Yes 284 Yes 70 Yes 45 Yes 107 Yes 45 Yes 50 Yes 107 Yes 50 Yes 70 Yes 51 Yes 51 Yes 51 Yes 52 Yes 53 Yes 54 Yes 55 Yes 56 Yes 57 Yes 57 Yes 58 Yes 59 Yes 59 Yes 59 Yes 50 Yes 50 Yes 50 Yes 50 Yes 77 Yes 78 Yes 79 Yes	N/A N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes N/A N/A	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	035 0001 0003 0004 0005 0006 0006 0006 0006 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 0007 0008 000	Cardiothor. N General Pr. N General Pr. N General Pr. N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology - N Oncology - N Onthopedic N Physiatry, I Plastic Surg N Podiatry N Pulmonolo N Rheumatol N Rheumatol N Vascular Su Vascular Su Cardiothor. N General Pr. N	N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 232 625 19 0 0 0 224 40 60 103 77 144 145 84 145 63 30 109 82 75 68 69 122 75 68 88 85 77 78	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 181 Yes 35 Yes 35 Yes 35 Yes 100 Yes 180 Yes 284 Yes 170 Yes 124 Yes 45 Yes 90 Yes 70 Yes 170 Yes	N/A N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes N/A	Pass N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330 H3330	7/1/1987 Network A Greene, NY '33300	Active	Metro Micro	'035	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal M. N Geriatrics N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Cardiology N Endocrinol N Endocrinol N Endocrinol N Endocrinol N General Su N Gynecology N Neurosurg N Neurosurg N Neurosurg N Neurosurg N Oncology - N Oncology - N Oncology - N Oncology N Plastic Surg Plastic Surg Plastic Surg N Podiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Psychiatry N Cardiothor N Cardiothor N Cardiothor N Cardiothor N General Pr N Family Prac N	N/A N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 2232 625 19 0 0 0 887 40 60 60 103 77 44 4213 339 80 84 445 63 109 82 122 75 68 78 79 90 90 90 90 90 90 90 90 90 90 90 90 90	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 34 Yes 35 Yes 35 Yes 35 Yes 37 Yes 68 Yes 100 Yes 180 Yes 284 Yes 70 Yes 45 Yes 107 Yes 45 Yes 50 Yes 107 Yes 50 Yes 70 Yes 51 Yes 51 Yes 51 Yes 52 Yes 53 Yes 54 Yes 55 Yes 56 Yes 57 Yes 57 Yes 58 Yes 59 Yes 59 Yes 59 Yes 50 Yes 50 Yes 50 Yes 50 Yes 77 Yes 78 Yes 79 Yes	N/A N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes N/A N/A	Pass N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas
H3330	7/1/1987 Network A Greene, NY '33300 7/1/1987 Network A Kings, NY '33331 7/1/1987 Network A Kings, NY '33331	Active	Metro Micro	'035	Cardiothor. N General Pr. N General Pr. N Family Prac N Internal Mr. N Primary Ca N Primary Ca N Primary Ca N Allergy and N Cardiology N Chiropracti N Dermatolo, N ENT/Otolat N General Su N General Su N General Su N Neurosurg N Oncology -	N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	130 111 2232 625 19 0 0 0 224 40 60 224 103 77 144 145 339 80 84 145 63 109 82 75 69 30 125 77 128 88 88 85 77 128 77 76 76 76 76 76 76 76 76 76 76 76 76	74 Yes 10 N/A 10 N/A 186 N/A 573 N/A 16 N/A 0 N/A 785 Yes 34 Yes 35 Yes 35 Yes 37 Yes 68 Yes 100 Yes 180 Yes 284 Yes 70 Yes 124 Yes 45 Yes 90 Yes 170	N/A N/A N/A N/A N/A N/A	90 75 Telehealth 75 Telehealth 75 Telehealth 85 75 Telehealth 85 85 75 Telehealth 87 75 Telehealth 87 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 75 Telehealth 85 85 85 87 75 Telehealth 88 88 88 88 88 88 88	N/A	N/A	N/A N/A N/A N/A N/A	100 Yes N/A N/A N/A N/A N/A N/A N/A N/A 100 Yes N/A N/A N/A	Pass N/A N/A N/A N/A N/A N/A N/A Pass Pass Pass Pass Pass Pass Pass Pas

H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '006	Primary Ca N	N	I/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr 'S03	Primary Ca N		5	0	6528	6528 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '007	Allergy and N			2	226	225 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '008	Cardiology N			9	1278	1253 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '010	Chiropract: N			3	176	176 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '011	Dermatolo; N			5	548	541 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '012	Endocrinol N			2	398	397 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '013	ENT/Otolar N			2	415	415 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '014	Gastroente N			4	693	679 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '015	General Su N			9	1235	1208 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '016	Gynecolog N			-	1665	1653 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '017	Infectious I N			1	533	533 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '018	Nephrolog N			3	558	550 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '019	Neurology N			4	858	836 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '020	Neurosurg N			1	199	199 Yes		90	100 Yes		100 Yes	Pass
H3330							6	933	885 Yes		90	100 Yes		100 Yes	Pass
	, ,	Active	Large Metr '021	Oncology - N											
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '022	Oncology - N			2	239	239 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '023	Ophthalmc N			8	905	900 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '025	Orthopedic N			6	550	536 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Kings, NY '33331	Active	Large Metr '026	Physiatry, F N			2	536	532 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '027	Plastic Sure N			1	187	187 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '028	Podiatry N			6	473	470 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '029	Psychiatry N			5	108	108 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '030	Pulmonolo N			4	674	649 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '031	Rheumatol N			3	238	238 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '033	Urology N			4	391	355 Yes		90	100 Yes		100 Yes	Pass
											90				
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '034	Vascular St N			1	219	216 Yes			100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Kings, NY '33331	Active	Large Metr '035	Cardiothor N			1	246	236 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '001	General Pr: N	N	I/A		71	54 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '002	Family Prac N	N	I/A		639	524 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '003	Internal McN		ı/A		3197	2400 N/A	N/A	N/A	N/A	N/A	N/A	N/A
	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '004	Geriatrics N		I/A			107 N/A	N/A					,
H3330						,		145		,	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '005	Primary Ca N	N	I/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '006	Primary Ca N	N	I/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr 'S03	Primary Ca N		3	6	4052	3085 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '007	Allergy and N			2	278	261 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active		Cardiology N				1600	1108 Yes		80 Telehealth	100 Yes		100 Yes	Pass
			Large Metr '008												
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '010	Chiropract: N			3	270	251 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '011	Dermatolo; N			4	524	319 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '012	Endocrinol N			1	467	442 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '013	ENT/Otolar N			2	491	468 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '014	Gastroente N			3	741	448 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '015	General Su N				1368	942 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '016	Gynecolog N			1	1975	1844 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '017	Infectious I N			1	598	574 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '018	Nephrolog N			2	648	601 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '019	Neurology N			3	898	490 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '020	Neurosurgi N			1	223	206 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '021	Oncology - N			5	985	441 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '022	Oncology - N			2	256	248 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '023	Ophthalmc N			6	872	652 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '025	Orthopedic N			5	632	422 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '026	Physiatry, FN			1	616	586 Yes		90	100 Yes		100 Yes	Pass
				, , , ,											
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '027	Plastic Sur _ξ N			1	221	201 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Nassau, NY '33400	Active	Large Metr '028	Podiatry N			5	535	421 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '029	Psychiatry N			3	100	73 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '030	Pulmonolo N			3	715	444 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '031	Rheumatol N			2	282	267 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '033	Urology N			3	417	284 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '034	Vascular St N			1	263	248 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Nassau, NY '33400	Active	Large Metr '035	Cardiothor N			1	274	255 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '001	General Pri N	N	I/A		158	158 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '002	Family Prac N		ı/A		835	835 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330								5774							N/A
	7/1/1987 Network A New York, '33420	Active	Large Metr '003	Internal Mr N		I/A			5774 N/A	N/A	N/A	N/A	N/A	N/A	
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '004	Geriatrics N		I/A		272	272 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '005	Primary Ca N	N	I/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '006	Primary Ca N	N	I/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr 'S03	Primary Ca N		3	8	7039	7039 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '007	Allergy and N			2	224	222 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '008	Cardiology N				1389	1356 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '010	Chiropract: N			3	158	152 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '011	Dermatolo; N			4	578	572 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '012	Endocrinol N			1	403	393 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York. '33420	Active	Large Metr '013	ENT/Otolar N			2	447	426 Yes		80 Telehealth	100 Yes		100 Yes	Pass
				,											
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '014	Gastroente N			3	757	740 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '015	General Su N				1363	1329 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '016	Gynecolog N			1	1693	1670 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '017	Infectious I N			1	542	532 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '018	Nephrolog N			3	560	540 Yes		80 Telehealth	100 Yes		100 Yes	Pass
	, ,						-								

H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '019	Neurology N		3	917	894 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '020	Neurosurgi N		1	197	197 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, 33420	Active	Large Metr '021	Oncology - N		5	987	939 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '022	Oncology - N		2	241	238 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '023	Ophthalmc N		6	959	944 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '025	Orthopedic N		5	611	572 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '026	Physiatry, F N		1	539	531 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '027	Plastic Sur _ξ N		1	193	188 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '028	Podiatry N		5	508	502 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '029	Psychiatry N		4	88	88 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: New York, 133420	Active	Large Metr '030	Pulmonolo N		3	713	676 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: New York, 133420	Active	Large Metr '031	Rheumatol N		2	243	239 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '033	Urology N		3	427	386 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '034	Vascular St N		1	223	215 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A New York, '33420	Active	Large Metr '035	Cardiothor N		1	242	240 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '001	General Pri N	N/A	_	11	10 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '002	Family Prac N	N/A		193	154 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '003	Internal Mc N	N/A		840	736 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A Orange, NY 33540	Active	Metro '004	Geriatrics N	N/A		17	13 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A Orange, NY 33540	Active	Metro '005	Primary Ca N	N/A		0	0 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A Orange, NY 33540	Active	Metro '006	Primary Ca N			0	0 N/A		N/A				N/A
				. ,	N/A	13			N/A	,	,	N/A	N/A	Pass
H3330	7/1/1987 Network A Orange, NY '33540	Active		Primary Ca N			1061	913 Yes		80 Telehealth N/A			99.8 Yes	
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '007	Allergy and N		1	67	55 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '008	Cardiology N		2	272	242 Yes		80 Telehealth N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '010	Chiropract: N		1	64	63 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '011	Dermatolo; N		2	142	118 Yes		80 Telehealth N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '012	Endocrinol N		1	423	358 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '013	ENT/Otolar N		1	106	79 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '014	Gastroente N		1	221	168 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '015	General Su N		3	314	239 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '016	Gynecolog N		1	549	481 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '017	Infectious I N		1	540	455 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '018	Nephrolog N		1	129	104 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '019	Neurology N		1	289	229 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '020	Neurosurgi N		1	218	188 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '021	Oncology - N		2	247	135 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '022	Oncology - N		1	251	228 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '023	Ophthalmc N		2	124	99 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY 33540	Active	Metro '025	Orthopedic N		2	136	101 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Orange, NY 33540	Active	Metro '026	Physiatry, I N		1	139	103 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A Orange, NY 33540	Active	Metro '027	Plastic Surg N		1	199	181 Yes		90 N/A			100 Yes	Pass
H3330						2	142	127 Yes					100 Yes	
	7/1/1987 Network A Orange, NY '33540	Active		Podiatry N		-								Pass
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '029	Psychiatry N		2	29	26 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '030	Pulmonolo N		1	201	140 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '031	Rheumatol N		1	260	219 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '033	Urology N		1	122	107 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Orange, NY '33540	Active	Metro '034	Vascular St N		1	240	195 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Orange, NY '33540	Active	Metro '035	Cardiothor N		1	260	209 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '001	General Pr: N	N/A		7	3 N/A	N/A	N/A		N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '002	Family Prac N	N/A		124	104 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '003	Internal Mr N	N/A		648	539 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '004	Geriatrics N	N/A		10	7 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '005	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro 'S03	Primary Ca N		4	789	653 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '007	Allergy and N		1	89	69 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '008	Cardiology N		1	289	242 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '010	Chiropract: N		1	70	65 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N '33580	Active	Metro '011	Dermatolo N		1	175	146 Yes		80 Telehealth N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '012	Endocrinol N		1	417	313 Yes		80 Telehealth N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '013	FNT/Otolar N		1	154	104 Yes		80 Telehealth N/A			100 Yes	Pass
						-								
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '014	Gastroente N		1	281	217 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '015	General Su N		1	324	258 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '016	Gynecolog N		1	701	544 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '017	Infectious I N		1	509	382 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '018	Nephrolog N		1	188	128 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '019	Neurology N		1	367	288 Yes		80 Telehealth N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '020	Neurosurgi N		1	211	173 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '021	Oncology - N		1	313	244 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '022	Oncology - N		1	236	202 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '023	Ophthalmc N		1	135	108 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '025	Orthopedic N		1	156	122 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '026	Physiatry, F N		1	181	141 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '027	Plastic Sur _E N		1	210	158 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '028	Podiatry N		1	182	146 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '029	Psychiatry N		1	35	24 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '030	Pulmonolo N		1	270	203 Yes		90 N/A			100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '031	Rheumatol N		1	255	185 Yes		90 N/A	,		100 Yes	Pass
H3330	7/1/1987 Network A Putnam, N' '33580	Active	Metro '033	Urology N		1	152	118 Yes		90 N/A			100 Yes	Pass
						-					,			

H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '034	Vascular St N		1	230	178 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A: Putnam, N' '33580	Active	Metro '035	Cardiothor N		1	236	190 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '001	General Pr: N	N/A		177	174 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Queens, N\ '33590	Active	Large Metr '002	Family Prac N	N/A		1072	1049 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '003	Internal McN	N/A		7521	7372 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '004	Geriatrics N	N/A		353	347 N/A	N/A	N.		N/A	N/A	N/A
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '005	Primary Ca N	N/A		0	0 N/A	N/A	N.		N/A	N/A	N/A
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '006	Primary Ca N	N/A		0	0 N/A	N/A	N,	,	N/A	N/A	N/A
H3330					N/A	49	9123		IV/A	80 Telehealth		IN/A		
	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr 'S03	Primary Ca N				8942 Yes			100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '007	Allergy and N		2	256	249 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '008	Cardiology N		8	1635	1631 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Queens, N\ '33590	Active	Large Metr '010	Chiropract: N		3	233	223 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '011	Dermatolo N		5	622	621 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '012	Endocrinol N		2	432	427 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '013	ENT/Otolar N		2	455	438 Yes		80 Telehealth	100 Yes		100 Yes	Pass
						4								
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '014	Gastroente N			842	837 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '015	General Su N		9	1498	1491 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '016	Gynecolog N		2	1792	1777 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Queens, N\ '33590	Active	Large Metr '017	Infectious I N		1	565	557 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '018	Nephrolog N		3	598	593 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '019	Neurology N		4	1007	999 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '020	Neurosurg N		1	203	203 Yes		90	100 Yes		100 Yes	Pass
						6				90				
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '021	Oncology - N		-	1065	1061 Yes			100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '022	Oncology - N		2	242	242 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '023	Ophthalmc N		7	1021	1015 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Queens, N\ '33590	Active	Large Metr '025	Orthopedic N		6	672	663 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '026	Physiatry, I N		2	575	567 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '027	Plastic Sure N		1	200	195 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '028	Podiatry N		6	575	570 Yes		90	100 Yes		100 Yes	Pass
H3330							119	111 Yes			100 Yes			
	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '029	Psychiatry N		5				80 Telehealth			100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '030	Pulmonolo N		4	803	800 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '031	Rheumatol N		3	264	255 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '033	Urology N		4	439	437 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A: Queens, N\ '33590	Active	Large Metr '034	Vascular St N		1	234	232 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Queens, N\ '33590	Active	Large Metr '035	Cardiothor N		1	253	252 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '001	General Pri N	N/A		9	9 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '002	Family Prac N	N/A		196	178 N/A	N/A	N.		N/A	N/A	N/A
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '003	Internal McN	N/A		569	534 N/A	N/A	N.		N/A	N/A	N/A
					,				,		,			,
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '004	Geriatrics N	N/A		18	17 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '005	Primary Ca N	N/A		0	0 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '006	Primary Ca N	N/A		0	0 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro 'S03	Primary Ca N		7	792	738 Yes		80 Telehealth N	'A N/A		95.6 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '007	Allergy and N		1	13	13 Yes		80 Telehealth N	'A N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '008	Cardiology N		2	130	130 Yes		80 Telehealth N	'A N/A		95 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '010	Chiropract: N		1	4	4 Yes		90 N			100 Yes	Pass
				,		-								
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '011	Dermatolo N		1	21	20 Yes		80 Telehealth N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '012	Endocrinol N		1	37	34 Yes		80 Telehealth N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '013	ENT/Otolar N		1	36	34 Yes		80 Telehealth N	'A N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '014	Gastroente N		1	72	70 Yes		90 N	'A N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '015	General Su N		2	115	115 Yes		90 N	'A N/A		98.3 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '016	Gynecology N		1	146	127 Yes		80 Telehealth N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '017	Infectious I N		1	29	25 Yes		80 Telehealth N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '018	Nephrolog N		1	35	34 Yes		80 Telehealth N	,		100 Yes	Pass
				-1 - 0							,			
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '019	Neurology N		1	77	68 Yes		80 Telehealth N	,		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '020	Neurosurgi N		1	25	25 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '021	Oncology - N		1	67	65 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '022	Oncology - N		1	18	17 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '023	Ophthalmc N		1	96	96 Yes		80 Telehealth N	'A N/A		95.2 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '025	Orthopedic N		1	34	34 Yes		90 N	'A N/A		94.9 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '026	Physiatry, I N		1	26	25 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '027	Plastic Surg N		1	27	23 Yes		90 N			100 Yes	Pass
													99.9 Yes	
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '028	Podiatry N		1	16	12 Yes		90 N,				Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '029	Psychiatry N		1	15	14 Yes		80 Telehealth N			99.6 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '030	Pulmonolo N		1	61	59 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '031	Rheumatol N		1	19	16 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '033	Urology N		1	44	43 Yes		90 N			100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '034	Vascular St N		1	22	21 Yes		90 N	'A N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rensselaer '33600	Active	Metro '035	Cardiothor N		1	21	20 Yes		90 N	'A N/A		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '001	General Pr: N	N/A		22	22 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '002	Family Prac N	N/A		147	147 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, 33010	Active	Large Metr '003	Internal Mr N	N/A		922	922 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '004	Geriatrics N	N/A		37	37 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '005	Primary Ca N	N/A		0	0 N/A	N/A	N,		N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '006	Primary Ca N	N/A		0	0 N/A	N/A	N,	'A N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr 'S03	Primary Ca N		12	1128	1128 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '007	Allergy and N		1	132	131 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '008	Cardiology N		2	444	444 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '010	Chiropract: N		1	73	73 Yes		90	100 Yes		100 Yes	Pass
H3330		Active		Dermatolo N		2	160	160 Yes			100 Yes		100 Yes	Pass
H333U	7/1/1987 Network A Richmond, '33610	Active	Large Metr '011	Dermatolo; N		2	100	TOO AG2		80 Telehealth	TOO YES		TOO LE2	rass

H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '012	Endocrinol N		1	201	200 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '013	ENT/Otolar N		1	280	280 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '014	Gastroente N		1	263	263 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '015	General Su N		2	488	486 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '016	Gynecolog N		1	909	906 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '017	Infectious I N		1	281	281 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '018			1	283	282 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330						1	254	253 Yes		80 Telehealth				
	7/1/1987 Network A Richmond, '33610	Active	Large Metr '019								100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '020	Neurosurgi N		1	135	135 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '021	Oncology - N		2	162	162 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '022	Oncology - N		1	187	187 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '023	Ophthalmc N		2	391	336 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '025	Orthopedic N		2	159	159 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '026			1	311	310 Yes		90	100 Yes		100 Yes	Pass
										90				
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '027	Plastic Surg N		1	122	122 Yes			100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '028	Podiatry N		2	198	198 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '029	Psychiatry N		1	57	57 Yes		80 Telehealth	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '030	Pulmonolo N		1	203	203 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '031	Rheumatol N		1	126	126 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '033	Urology N		1	120	120 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '034	Vascular St N		1	145	145 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Richmond, '33610	Active	Large Metr '035			1	149	149 Yes		90	100 Yes		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 33620	Active	Metro '001	General Pri N	N/A	-	66	61 N/A	N/A	N/A	N/A	N/A		N/A
													N/A	
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '002		N/A		430	381 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '003		N/A		2425	2165 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '004	Geriatrics N	N/A		84	78 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '005	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro 'S03	Primary Ca N		11	3005	2685 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '007	Allergy and N		1	266	256 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 33620	Active	Metro '008			2	1386	1225 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
						-					,			
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '010			1	220	194 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '011			2	688	664 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '012			1	508	491 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '013	ENT/Otolar N		1	488	476 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '014	Gastroente N		1	969	924 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '015			2	1317	1130 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '016			1	1934	1868 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 33620	Active	Metro '017	.,		1	624	611 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, I '33620	Active	Metro '018			1	632	603 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '019			1	1101	1058 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '020			1	232	222 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '021	Oncology - N		2	1142	1118 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '022	Oncology - N		1	263	263 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1'33620	Active	Metro '023			2	901	772 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '025			2	669	567 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '026			1	585	570 Yes		90 N/A	N/A		100 Yes	Pass
							232							
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '027	Plastic Surg N		1		223 Yes			N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '028	,		2	647	622 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '029	Psychiatry N		1	140	115 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '030	Pulmonolo N		1	910	883 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '031	Rheumatol N		1	306	299 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1'33620	Active	Metro '033	Urology N		1	484	469 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Rockland, 1 '33620	Active	Metro '034	Vascular St. N		1	287	274 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Rockland, 1 '33620	Active	Metro '035	Cardiothor N		1	281	278 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A. Rockland, 1 53620 7/1/1987 Network A. Saratoga, N '33640	Active	Metro '001	General Pr: N	N/A	-	13	12 N/A	N/A	N/A	N/A	N/A	N/A	N/A
											,			
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '002		N/A		247	216 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '003	Internal Mr N	N/A		588	479 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '004	Geriatrics N	N/A		20	18 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '005		N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro 'S03	Primary Ca N		10	868	725 Yes		80 Telehealth N/A	N/A		98.8 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '007	Allergy and N		1	13	13 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '008	Cardiology N		2	135	134 Yes		80 Telehealth N/A	N/A		99.5 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N 33640	Active	Metro '010			1	4	3 Yes		90 N/A	N/A		100 Yes	Pass
H3330		Active	Metro '011			1	20	18 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
	7/1/1987 Network A Saratoga, N '33640					-					,			
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '012			1	34	34 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '013			1	35	35 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '014			1	70	66 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Saratoga, N '33640	Active	Metro '015			2	116	116 Yes		90 N/A	N/A		99.5 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '016	Gynecolog N		1	128	126 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '017			1	23	23 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '018			1	34	32 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N 33640	Active	Metro '019			1	68	66 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
											,			
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '020			1	24	24 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '021			2	65	63 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '022			1	14	14 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '023			2	96	92 Yes		80 Telehealth N/A	N/A		99.4 Yes	Pass
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro '025	Orthopedic N		2	36	36 Yes		90 N/A	N/A		99.5 Yes	Pass

H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'026	Physiatry, F N		1	25	25 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'027	Plastic Surg N		1	23	23 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'028	Podiatry N		2	12	9 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'029	Psychiatry N		1	14	13 Yes		80 Telehealth		N/A		100 Yes		
H3330	7/1/1987 Network A. Saratoga, N. 33640	Active	Metro	'030			1	59	57 Yes		90		N/A		100 Yes		
					Pulmonolo N		-					N/A					
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'031	Rheumatol N		1	16	16 Yes		90	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'033	Urology N		1	43	40 Yes		90	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A: Saratoga, N '33640	Active	Metro	'034	Vascular St N		1	21	21 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Saratoga, N '33640	Active	Metro	'035	Cardiothor N		1	18	18 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'001	General Pri N	N/A		9	9 N/A	N/A		N/A	N/A	N/A	N/A		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'002	Family Prac N	N/A		184	160 N/A	N/A		N/A	N/A	N/A	N/A		
						,				,							
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'003	Internal Mt N	N/A		506	459 N/A	N/A		N/A	N/A	N/A	N/A	,	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'004	Geriatrics N	N/A		15	14 N/A	N/A		N/A	N/A	N/A	N/A	A N/A	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'005	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	A N/A	
H3330	7/1/1987 Network A Schenectar '33650	Active	Metro	'006	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'S03	Primary Ca N	,,,	7	714	642 Yes	,,,	80 Telehealth		N/A	,,,	97.7 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'007	Allergy and N		1	13	12 Yes		80 Telehealth		N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'008	Cardiology N		1	125	124 Yes		80 Telehealth	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'010	Chiropract: N		1	4	3 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'011	Dermatolo N		1	18	15 Yes		80 Telehealth	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'012	Endocrinol N		1	35	34 Yes		80 Telehealth		N/A		100 Yes	s Pass	
H3330																	
	7/1/1987 Network A Schenectac '33650	Active	Metro	'013	ENT/Otolar N		1	32	32 Yes		80 Telehealth		N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'014	Gastroente N		1	64	60 Yes		90	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'015	General Su N		2	109	106 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'016	Gynecolog N		1	122	120 Yes		80 Telehealth	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'017	Infectious I N		1	23	23 Yes		80 Telehealth		N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'018	Nephrolog N		1	33	31 Yes		80 Telehealth	NI/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'019	Neurology N		1	65	63 Yes		80 Telehealth		N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'020	Neurosurgi N		1	25	24 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'021	Oncology - N		1	59	56 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'022	Oncology - N		1	14	14 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'023	Ophthalmc N		1	88	85 Yes		80 Telehealth		N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A: Schenectac '33650						1	30			90						
		Active	Metro	'025	Orthopedic N		-		30 Yes			N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'026	Physiatry, I N		1	25	24 Yes		90	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'027	Plastic Sur _ξ N		1	23	23 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'028	Podiatry N		1	13	9 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'029	Psychiatry N		1	13	13 Yes		80 Telehealth	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'030	Pulmonolo N		1	55	53 Yes		90	N/A	N/A		100 Yes		
				030			1	16			90						
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro		Rheumatol N				16 Yes			N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'033	Urology N		1	42	38 Yes		90	N/A	N/A		100 Yes		
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'034	Vascular St N		1	21	21 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Schenectac '33650	Active	Metro	'035	Cardiothor N		1	22	18 Yes		90	N/A	N/A		100 Yes	s Pass	
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr		General Pr; N	N/A		28	28 N/A	N/A		N/A	N/A	N/A	N/A		
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr		Family Prac N	N/A		447	440 N/A	N/A		N/A	N/A	N/A	N/A	,	
					. ,	,				,			,		,	,	
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr		Internal Mr N	N/A		1367	1359 N/A	N/A		N/A	N/A	N/A	N/A	,	
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	'004	Geriatrics N	N/A		45	45 N/A	N/A		N/A	N/A	N/A	N/A		
H3330	7/1/1987 Network A: Suffolk, NY '33700	Active	Large Metr	'005	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	A N/A	
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	'006	Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A	N/A	A N/A	
H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	r 'S03	Primary Ca N		39	1887	1872 Yes		80 Telehealth		99.9 Yes		99.7 Yes		
H3330	7/1/1987 Network A Suffolk, NY '33700							1007									
			Largo Moto		,		2	124	01 Voc								
H3330	7/4/4007 No. 1 4 6 (first any loogoo	Active	Large Metr		Allergy and N		2	124	81 Yes		80 Telehealth		99.9 Yes		99.3 Yes		
	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	r '008	Allergy and N Cardiology N		7	580	435 Yes		80 Telehealth 80 Telehealth		99.9 Yes 99.9 Yes		99.3 Yes 99.7 Yes	s Pass	
H3330	7/1/1987 Network A Suffolk, NY '33700		Large Metr Large Metr	r '008 r '010	Allergy and N Cardiology N Chiropract(N			580 199	435 Yes 162 Yes		80 Telehealth 80 Telehealth 90		99.9 Yes 99.9 Yes 99.9 Yes		99.3 Yes 99.7 Yes 99.5 Yes	Pass Pass	
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H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	r '008 r '010 r '0110 r '0111 r '012 r '013 r '015 r '016 r '017 r '017 r '018 r '019 r '020 r '021 r '022 r '023 r '025 r '026 r '027 r '028 r '029 r '030 r '031	Allergy and N Cardiology N Cardiology N Chiropract N Dermatolo, N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecology N Infectious I N Nephrology N Neurosurg N Neurology N Neurology N Oncology - N Oncology - N Oncology N Physiatry, I N Physiatry, I N Physiatry, I N Podiatry N Podiatry N Podiatry N Podiatry N Podiatry N N N Urology N Vascular Si N		7 3 4 1 2 3 7 1 1 3 3 1 5 2 6 5 5 1 1 5 4 3 3 7 4 3 3 3 1 5 4 4 3 5 4 4 3 5 4 4 3 5 4 4 3 5 4 3 5 4 4 3 5 4 4 3 5 4 3 5 4 3 5 4 3 5 4 3 5 4 3 5 4 3 3 3 3	580 199 180 161 187 205 451 832 159 276 281 106 294 237 222 111 161 34 276 124 374	435 Yes 162 Yes 143 Yes 95 Yes 109 Yes 154 Yes 343 Yes 91 Yes 167 Yes 205 Yes 54 Yes 186 Yes 230 Yes 211 Yes 130 Yes 28 Yes 28 Yes 28 Yes 27 Yes 28 Yes 28 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes		80 Teleheatth 80 Teleheatth 90 Teleheatth 90 Teleheatth 90 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 90 Teleheatth		99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 100 Yes 99.9 Yes 100 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.6 Yes 99.5 Yes 99.5 Yes 99.5 Yes 99.5 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 98.9 Yes 98.3 Yes 100 Yes		99.3 Yes 99.7 Yes 99.5 Yes 97.6 Yes 98.3 Yes 99.7 Yes 99.7 Yes 99.7 Yes 98.9 Yes 98.9 Yes 98.9 Yes 98.3 Yes 97.9 Yes 97.8 Yes 97.8 Yes 97.8 Yes 97.8 Yes 97.8 Yes 97.9 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 99.8 Yes 97.9 Yes 99.8 Yes 97.9 Yes 99.8 Yes 97.9 Yes 99.8 Yes 99.9 Yes 99.9 Yes	Pass Pass Pass Pass Pass Pass Pass Pass	
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H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr	r '008 r '010 r '0110 r '0111 r '012 r '013 r '015 r '016 r '017 r '018 r '019 r '020 r '021 r '022 r '023 r '025 r '026 r '027 r '028 r '029 r '030 r '033 r '034 r '033 r '034 r '035 r '001	Allergy and N Cardiology N Cardiology N Dermatolo, N Dermatolo, N ENT/Otolai N Gastroente N General Su N Gynecology N Neurology N Neurology N Neurology N Neurology N Oncology - N Oncology N Orthopedit N Plysiatry, I N Podiatry N Pulmonolo N Rheumatol N Rheumatol N Vascular St. N Cardiothor, N General Pr. N	N/A	7 3 4 1 2 3 7 1 1 3 3 1 5 2 6 5 5 1 1 5 4 3 3 1 5 4 3 3 1 5 4 3 3 1 5 4 4 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	580 199 180 161 187 205 451 832 276 281 175 268 106 294 237 222 111 161 34 276 124 276 122 294 237	435 Yes 162 Yes 143 Yes 95 Yes 154 Yes 95 Yes 154 Yes 343 Yes 91 Yes 167 Yes 205 Yes 184 Yes 86 Yes 230 Yes 211 Yes 130 Yes 28 Yes 2121 Yes 136 Yes 28 Yes 28 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 29 Yes 210 Yes 210 Yes 211 Yes 212 Yes 31 Yes 31 Yes 31 Yes	N/A	80 Teleheatth 80 Teleheatth 90 Teleheatth 90 Teleheatth 90 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 90 Teleheatth	N/A	99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.9 Yes 100 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.6 Yes 99.6 Yes 99.6 Yes 99.7 Yes 99.6 Yes 99.7 Yes 99.9 Yes 100 Yes	N/A	99.3 Yes 99.7 Yes 99.5 Yes 97.6 Yes 98.3 Yes 95.8 Yes 99.7 Yes 98.9 Yes 98.9 Yes 94.8 Yes 97.9 Yes 97.9 Yes 97.8 Yes 97.8 Yes 98.3 Yes 97.8 Yes 97.8 Yes 98.3 Yes 97.9 Yes 98.1 Yes 99.8 Yes 98.3 Yes 99.8 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes	Pass Pass Pass Pass Pass Pass Pass Pass	
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr Micro Micro Micro Micro	r '008 r '008 r '001 r '011 r '012 r '013 r '014 r '015 r '016 r '017 r '018 r '020 r '021 r '022 r '023 r '025 r '027 r '028 r '027 r '028 r '030 r '031 r '034 r '035 r '035 r '036 r '037 r '038 r '036 r '037 r '038 r '037 r '038 r '039 r '030 r '031 r '031 r '033	Allergy and N Cardiology N Cardiology N Chiropract N Dermatolo, N Endocrinol N Entocrinol N Gastroente N General Su N Gynecology N Infectious I N Nephrology N Neurosurg, N Neurosurg, N Oncology - N Oncology - N Oncology - N Oncology - N Oncology N Plastic Surg N Podiatry N Psychiatry, I Plastic Surg N Podiatry N Psychiatry N Psychiatry N Vascular Su Vascular Su N Cardiothor N Car	N/A	7 3 4 1 2 3 7 1 1 3 3 1 5 2 6 5 5 1 1 5 4 3 3 1 5 4 3 3 1 5 4 3 3 1 5 4 4 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	580 199 180 161 187 205 451 832 281 75 268 106 294 237 222 111 161 34 276 5 124 374 122 9	435 Yes 162 Yes 162 Yes 143 Yes 95 Yes 109 Yes 154 Yes 343 Yes 91 Yes 167 Yes 205 Yes 14 Yes 86 Yes 230 Yes 211 Yes 130 Yes 130 Yes 28 Yes 28 Yes 28 Yes 28 Yes 28 Yes 280 Yes 280 Yes 281 Yes 162 Yes 6 N/A 79 N/A	N/A	80 Teleheatth 80 Teleheatth 90 Teleheatth 90 Teleheatth 90 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 90 Teleheatth	N/A N/A	99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 100 Yes 99.9 Yes 99.6 Yes 99.7 Yes 99.5 Yes 99.5 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 98.9 Yes 98.9 Yes 98.9 Yes 98.9 Yes 99.7 Yes	N/A	99.3 Yes 99.7 Yes 99.5 Yes 97.6 Yes 98.3 Yes 97.6 Yes 98.3 Yes 97.6 Yes 98.3 Yes 95.8 Yes 99.7 Yes 98.9 Yes 98.3 Yes 97.9 Yes 98.3 Yes 97.9 Yes 98.3 Yes 97.9 Yes 98.1 Yes 97.9 Yes 98.7 Yes 98.9 Yes 97.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 98.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 99.7 Yes N/A	Pass Pass Pass Pass Pass Pass Pass Pass	
H3330 H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr Micro Micro Micro	r '008 r '008 r '001 r '011 r '012 r '011 r '012 r '014 r '015 r '017 r '018 r '017 r '018 r '020 r '021 r '021 r '021 r '022 r '023 r '026 r '027 r '028 r '029 r '030 r '031 r '033 r '034 r '035 r '036 r '037 r '038 r '039 r '0300 r '031	Allergy and N Cardiology N Cardiology N Chiropract N Dermatolo, N Endocrinol N ENT/Otolar N Gastroente N General Su N Gynecolog: N Neurology N Neurology N Neurology N Oncology - N Orthopedic N Physiatry, I Plastic Surg N Podiatry N Pudmonolo N Rheumatol N Urology N Vascular Si, N Cardiothor: N General Pr: N Family Prax N Internal M: N	N/A N/A	7 3 4 1 2 3 7 1 1 3 3 1 5 2 6 5 5 1 1 5 4 3 3 1 5 4 3 3 1 5 4 3 3 1 5 4 4 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	580 199 180 161 187 205 451 832 276 281 75 268 294 237 222 111 161 34 276 124 374 122 9 167 9	435 Yes 162 Yes 162 Yes 143 Yes 95 Yes 159 Yes 154 Yes 343 Yes 91 Yes 167 Yes 205 Yes 54 Yes 184 Yes 230 Yes 230 Yes 130 Yes 136 Yes 24 Yes 250 Yes 250 Yes 6 N/A 79 N/A 270 N/A	N/A N/A	80 Teleheatth 80 Teleheatth 90 Teleheatth 90 Teleheatth 90 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 90 Teleheatth	N/A N/A N/A	99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.9 Yes 99.6 Yes 99.7 Yes 99.6 Yes 99.7 Yes	N/A N/A	99.3 Yes 99.7 Yes 99.7 Yes 97.6 Yes 98.3 Yes 98.3 Yes 98.3 Yes 99.7 Yes 99.7 Yes 98.9 Yes 99.7 Yes 98.9 Yes 98.3 Yes 98.3 Yes 98.3 Yes 98.3 Yes 98.3 Yes 98.5 Yes 98.5 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 98.1 Yes 99.8 Yes 99.8 Yes 99.8 Yes 99.8 Yes 99.8 Yes 99.8 Yes 99.8 Yes 99.9 Yes 99.8 Yes	Pass Pass Pass Pass Pass Pass Pass Pass	
H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330 H3330	7/1/1987 Network A Suffolk, NY '33700	Active	Large Metr Micro Micro Micro	r '008 r '008 r '001 r '011 r '012 r '013 r '014 r '015 r '016 r '017 r '018 r '020 r '021 r '022 r '023 r '025 r '027 r '028 r '027 r '028 r '030 r '031 r '034 r '035 r '035 r '036 r '037 r '038 r '036 r '037 r '038 r '037 r '038 r '039 r '030 r '031 r '031 r '033	Allergy and N Cardiology N Cardiology N Chiropract N Dermatolo, N Endocrinol N Entocrinol N Gastroente N General Su N Gynecology N Infectious I N Nephrology N Neurosurg, N Neurosurg, N Oncology - N Oncology - N Oncology - N Oncology - N Oncology N Plastic Surg N Podiatry N Psychiatry, I Plastic Surg N Podiatry N Psychiatry N Psychiatry N Vascular Su Vascular Su N Cardiothor N Car	N/A	7 3 4 1 2 3 7 1 1 3 3 1 5 2 6 5 5 1 1 5 4 3 3 1 5 4 3 3 1 5 4 3 3 1 5 4 4 3 3 4 3 4 3 4 3 4 3 4 3 4 3 4 3 4	580 199 180 161 187 205 451 832 281 75 268 106 294 237 222 111 161 34 276 5 124 374 122 9	435 Yes 162 Yes 162 Yes 143 Yes 95 Yes 109 Yes 154 Yes 343 Yes 91 Yes 167 Yes 205 Yes 14 Yes 86 Yes 230 Yes 211 Yes 130 Yes 130 Yes 28 Yes 28 Yes 28 Yes 28 Yes 28 Yes 280 Yes 280 Yes 281 Yes 162 Yes 6 N/A 79 N/A	N/A	80 Teleheatth 80 Teleheatth 90 Teleheatth 90 Teleheatth 90 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 80 Teleheatth 90 Teleheatth	N/A N/A	99.9 Yes 99.9 Yes 99.9 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 100 Yes 99.9 Yes 99.6 Yes 99.7 Yes 99.5 Yes 99.5 Yes 99.7 Yes 99.7 Yes 99.7 Yes 99.7 Yes 98.9 Yes 98.9 Yes 98.9 Yes 98.9 Yes 99.7 Yes	N/A	99.3 Yes 99.7 Yes 99.5 Yes 97.6 Yes 98.3 Yes 97.6 Yes 98.3 Yes 97.6 Yes 98.3 Yes 95.8 Yes 99.7 Yes 98.9 Yes 98.3 Yes 97.9 Yes 98.3 Yes 97.9 Yes 98.3 Yes 97.9 Yes 98.1 Yes 97.9 Yes 98.7 Yes 98.9 Yes 97.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 98.9 Yes 98.9 Yes 97.9 Yes 98.9 Yes 99.7 Yes N/A	Pass Pass Pass Pass Pass Pass Pass Pass	

H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'005	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'S03	Primary Ca N		4	693	363 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'007	Allergy and N		1	63	55 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'008	Cardiology N		1	228	171 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'010	Chiropract: N		1	68	67 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'011	Dermatolo N		1	82	65 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'012	Endocrinol N		1	494	476 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'013	ENT/Otolar N		1	91	75 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'014	Gastroente N		1	141	113 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A. Sullivan, N. 33710	Active	Micro	'015	General Su N		1	226	161 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ 33710		Micro	'016	General 30 N		_	527	510 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
		Active			,		1					,			
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'017	Infectious I N		1	610	598 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'018	Nephrolog N		1	118	112 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'019	Neurology N		1	127	96 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'020	Neurosurgi N		1	243	235 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'021	Oncology - N		1	101	68 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'022	Oncology - N		1	274	269 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'023	Ophthalmc N		1	75	50 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'025	Orthopedic N		1	101	84 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'026	Physiatry, I N		1	125	113 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ 33710	Active	Micro	'027	Plastic Surg N		1	236	227 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'028	Podiatry N		1	112	86 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'029	Psychiatry N		1	27	20 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'030	Pulmonolo N		1	119	95 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'031	Rheumatol N		1	295	287 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'033	Urology N		1	85	62 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'034	Vascular St N		1	281	270 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Sullivan, N\ '33710	Active	Micro	'035	Cardiothor N		1	286	281 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'001	General Pr: N	N/A		8	4 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'002	Family Prac N	N/A		201	165 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'003	Internal Mc N	N/A		639	487 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'004	Geriatrics N	N/A		16	10 N/A	N/A	N/A	N/A	N/A	N/A	N/A
										,					
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'005	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'S03	Primary Ca N		8	864	666 Yes		80 Telehealth N/A	N/A		99.2 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'007	Allergy and N		1	33	28 Yes		80 Telehealth N/A	N/A		99.5 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'008	Cardiology N		2	201	183 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'010	Chiropract: N		1	48	38 Yes		90 N/A	N/A		91.3 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'011	Dermatolo; N		1	81	53 Yes		80 Telehealth N/A	N/A		99.7 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'012	Endocrinol N		1	97	82 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'013	ENT/Otolar N		1	63	47 Yes		80 Telehealth N/A	N/A		99.7 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'014	Gastroente N		1	136	110 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'015	General Su N		2	213	161 Yes		90 N/A	N/A		98.3 Yes	Pass
H3330	7/1/1987 Network A. Ulster, NY '33740	Active	Metro	'016	Gynecolog N		1	297	214 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330				'017			1	75	69 Yes		80 Telehealth N/A	,		100 Yes	Pass
	7/1/1987 Network A Ulster, NY '33740	Active	Metro		Infectious I N						,	N/A			
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'018	Nephrolog N		1	67	56 Yes		80 Telehealth N/A	N/A		99.7 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'019	Neurology N		1	134	96 Yes		80 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'020	Neurosurgi N		1	55	48 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Ulster, NY '33740	Active	Metro	'021	Oncology - N		1	99	75 Yes		90 N/A	N/A		99.8 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'022	Oncology - N		1	84	67 Yes		90 N/A	N/A		99.9 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'023	Ophthalmc N		2	72	56 Yes		80 Telehealth N/A	N/A		96.5 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'025	Orthopedic N		1	96	83 Yes		90 N/A	N/A		98.3 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'026	Physiatry, I N		1	55	39 Yes		90 N/A	N/A		99.3 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'027	Plastic Sure N		1	71	44 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'028	Podiatry N		1	101	81 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'029	Psychiatry N		1	28	23 Yes		80 Telehealth N/A	N/A		99.6 Yes	Pass
H3330	7/1/1987 Network A. Ulster, NY '33740			'030				115	25 Tes 86 Yes					100 Yes	
	., _,	Active	Metro	'030	Pulmonolo N		1				,	N/A			Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro		Rheumatol N		1	56	47 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'033	Urology N		1	75	56 Yes		90 N/A	N/A		99.8 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'034	Vascular St N		1	80	70 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Ulster, NY '33740	Active	Metro	'035	Cardiothor N		1	72	65 Yes		90 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'001	General Pri N	N/A		3	3 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'002	Family Prac N	N/A		87	68 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'003	Internal Mr N	N/A		127	113 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'004	Geriatrics N	N/A		3	3 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'005	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'006	Primary Ca N	N/A		0	0 N/A	N/A	N/A	N/A	N/A	N/A	N/A
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'S03	Primary Ca N	.,,,,	4	220	187 Yes	,	75 Telehealth N/A	N/A	.,	99.8 Yes	Pass
H3330	7/1/1987 Network A Warren, N\ 33750	Active	Micro	'007	Allergy and N		1	13	13 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Warren, N1 33750	Active	Micro	'008	Cardiology N		1	115	73 Yes		75 Telehealth N/A	N/A N/A		97.6 Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'010	Chiropract: N		1	4	2 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro	'011	Dermatolo N		1	18	17 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'012	Endocrinol N		1	35	34 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'013	ENT/Otolar N		1	35	34 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'014	Gastroente N		1	66	66 Yes		85 N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'015	General Su N		1	80	63 Yes		85 N/A	N/A		97.8 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'016	Gynecolog N		1	128	126 Yes		75 Telehealth N/A	N/A		100 Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro	'017	Infectious I N		1	23	23 Yes		75 Telehealth N/A	N/A		100 Yes	Pass

H3330	7/1/1987 Network A Warren, N\ '33750	Active		18 Nephrolog N		1	34	32 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active		19 Neurology N		1	66	66 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active		20 Neurosurgi N		1	25	24 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active		21 Oncology - N		1	63	63 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active		22 Oncology - N		1	14	14 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active		23 Ophthalmc N		1	80	39 Yes		75 Telehealth		N/A		98 1		Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active		25 Orthopedic N		1	34	29 Yes		85	N/A	N/A		97.6		Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active		26 Physiatry, f N		1	25	25 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active		27 Plastic Surg N		1	23	23 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro '0	28 Podiatry N		1	9	9 Yes		85	N/A	N/A		96.3 \	Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro '0	29 Psychiatry N		1	12	12 Yes		75 Telehealth	N/A	N/A		95.5 \	Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro '0	30 Pulmonolo N		1	57	57 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro '0	31 Rheumatol N		1	16	16 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro '0	33 Urology N		1	40	40 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A Warren, N\ '33750	Active	Micro '0	34 Vascular St N		1	21	21 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Warren, N\ '33750	Active	Micro '0	35 Cardiothor N		1	22	18 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	01 General Pr: N	N/A		5	4 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	02 Family Prac N	N/A		150	91 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A: Washingto: '33760	Active		03 Internal Mr N	N/A		286	134 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Washingto '33760	Active		04 Geriatrics N	N/A		11	4 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Washingto '33760	Active		05 Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Washingto 33760	Active		06 Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Washingto '33760	Active		03 Primary Ca N	.,,,,	3	452	233 Yes	,,,,	75 Telehealth	,	N/A	,,,	100 \		Pass
H3330	7/1/1987 Network A Washingto 33760	Active		07 Allergy and N		1	13	13 Yes		75 Telehealth		N/A		100		Pass
H3330	7/1/1987 Network A: Washingto: 33760	Active		08 Cardiology N		1	135	130 Yes		75 Telehealth	,	N/A		99.3		Pass
H3330	7/1/1987 Network A: Washingto: 33760	Active		10 Chiropract: N		1	4	4 Yes		85	N/A	N/A		100 \		Pass
						1	20				,	,				
H3330	7/1/1987 Network A: Washingto: '33760 7/1/1987 Network A: Washingto: '33760	Active		11 Dermatolo N 12 Endocrinol N		1	38	18 Yes 34 Yes		75 Telehealth 75 Telehealth		N/A N/A		100 \		Pass Pass
		Active				1										
H3330	7/1/1987 Network A Washingto 33760	Active		13 ENT/Otolar N		_	35	35 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A Washingto 33760	Active		14 Gastroente N		1	70	66 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A Washingto 33760	Active		15 General Su N		1	116	114 Yes		85	N/A	N/A		99 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		16 Gynecolog N		1	128	128 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		17 Infectious I N		1	29	23 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A Washingto '33760	Active		18 Nephrolog N		1	34	34 Yes		75 Telehealth		N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		19 Neurology N		1	68	66 Yes		75 Telehealth	,	N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		20 Neurosurgi N		1	25	24 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		21 Oncology - N		1	65	63 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		22 Oncology - N		1	18	14 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active		23 Ophthalmc N		1	96	84 Yes		75 Telehealth	,	N/A		99.3		Pass
H3330	7/1/1987 Network A Washingto '33760	Active		25 Orthopedic N		1	36	36 Yes		85	N/A	N/A		99 Y		Pass
H3330	7/1/1987 Network A Washingto '33760	Active	Micro '0	26 Physiatry, f N		1	25	25 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A Washingto '33760	Active	Micro '0	27 Plastic Surg N		1	27	23 Yes		85	N/A	N/A		100 \		Pass
H3330	7/1/1987 Network A Washingto '33760	Active	Micro '0	28 Podiatry N		1	10	9 Yes		85	N/A	N/A		96.4	Yes	Pass
H3330	7/1/1987 Network A Washingto '33760	Active	Micro '0	29 Psychiatry N		1	14	13 Yes		75 Telehealth	N/A	N/A		94.1	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	30 Pulmonolo N		1	59	57 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	31 Rheumatol N		1	19	16 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	33 Urology N		1	43	40 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	34 Vascular St N		1	22	21 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A: Washingto: '33760	Active	Micro '0	35 Cardiothor N		1	24	18 Yes		85	N/A	N/A		100 \	Yes	Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0	01 General Pr: N	N/A		77	76 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0	02 Family Prac N	N/A		498	470 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0	03 Internal Mr N	N/A		2864	2746 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westcheste 33800	Active	Large Metr '0		N/A		105	103 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0		N/A		0	0 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westchesti '33800	Active	Large Metr '0	06 Primary Ca N	N/A		0	0 N/A	N/A		N/A	N/A	N/A		N/A	N/A
H3330	7/1/1987 Network A Westchesti '33800	Active	Large Metr 'S			24	3544	3395 Yes		80 Telehealth		99.7 Yes		98.4		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			1	224	206 Yes		80 Telehealth		100 Yes		100 1		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			4	983	760 Yes		80 Telehealth		100 Yes		99.7		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			2	177	140 Yes		90		100 Yes		99.5		Pass
H3330	7/1/1987 Network A Westchesti '33800	Active	Large Metr '0			3	322	287 Yes		80 Telehealth		100 Yes		99.8		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			1	401	373 Yes		80 Telehealth		100 Yes		100 \		Pass
H3330	7/1/1987 Network A Westchesti 33800	Active	Large Metr '0			1	421	401 Yes		80 Telehealth		100 Yes		100		Pass
H3330	7/1/1987 Network A Westchesti 33800	Active	Large Metr '0			2	431	357 Yes		90		100 Yes		99.8		Pass
H3330	7/1/1987 Network A Westchest 133800	Active	Large Metr '0			4	821	705 Yes		90		100 Yes		100 \		Pass
H3330	7/1/1987 Network A Westchesti 33800	Active	Large Metr '0			1	1577	1473 Yes		80 Telehealth		100 Yes		100		Pass
H3330	7/1/1987 Network A Westchesti 33800	Active	Large Metr '0			1	479	461 Yes		80 Telehealth		100 Yes		100		Pass
H3330	7/1/1987 Network A: Westchesti 33800 7/1/1987 Network A: Westchesti 33800	Active				2	479 502	461 Yes 462 Yes		80 Telehealth		100 Yes		100 1		Pass
H3330	7/1/1987 Network A: Westchesti 33800 7/1/1987 Network A: Westchesti 33800	Active	Large Metr '0			2	502	462 Yes 430 Yes		80 Telehealth		100 Yes		99.8		Pass
H3330			Large Metr '0				195	430 Yes 193 Yes		90 reieneaith						Pass
	7/1/1987 Network A. Westchesti '33800	Active	Large Metr '0			1				90		100 Yes		99.2		
H3330	7/1/1987 Network A Westchest 33800	Active	Large Metr '0			3	419	335 Yes		90		100 Yes		99.7		Pass
H3330	7/1/1987 Network A. Westchesti '33800	Active	Large Metr '0			1	234	233 Yes				100 Yes		100 \		Pass
H3330	7/1/1987 Network A Westchest 33800	Active	Large Metr '0			4	547	470 Yes		80 Telehealth		100 Yes		99.3		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			3	430	342 Yes		90		100 Yes		99.8		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			1	483	464 Yes		90		100 Yes		100 \		Pass
H3330	7/1/1987 Network A Westchesti '33800	Active	Large Metr '0			1	195	191 Yes		90		100 Yes		100 \		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0	,		3	308	278 Yes		90		100 Yes		99.4		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			2	38	32 Yes		80 Telehealth		99.9 Yes		97.8		Pass
H3330	7/1/1987 Network A Westchest '33800	Active	Large Metr '0			2	396	314 Yes		90		100 Yes		99.8		Pass
H3330	7/1/1987 Network A: Westchest: '33800	Active	Large Metr '0	31 Rheumatol N		1	241	226 Yes		90		100 Yes		100 \	res	Pass

H3330	7/1/1987 Network A: Westchest: '33800	Active	Large Metr '033	Urology N	2	269	197 Yes	90	100 Yes	99.8 Yes	Pass
H3330	7/1/1987 Network A: Westchest: '33800	Active	Large Metr '034	Vascular St N	1	214	199 Yes	90	100 Yes	100 Yes	Pass
H3330	7/1/1987 Network A: Westchest: '33800	Active	Large Metr '035	Cardiothor N	1	235	222 Yes	90	100 Yes	100 Yes	Pass

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document: Section, etc. and P Certificate of Cov Rider Nu COC - Form # 155-23- LGHMOCERT	age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit, 20% coinsurance	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Change from 2020 Enter: Yes/No and change, e.g., \$5 copay increase, new benefit	Projected Month 202 Individual	•
Office Visit	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32		Approved 12/13/19	\$5 Copay per visit	Unlimited	No	-\$3.28	-\$8.04
Specialty Office Visit	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32		Approved 12/13/19	\$10 Copay per visit	Unlimited	No	-\$6.86	-\$16.79
Chiropractic Care	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 28		Approved 12/13/19	\$10 Copay per visit	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Inpatient Hospital Care	Covered as required by Federal and NYS laws and/or regulation, not subject to deductibles, copays or coinsurance	COC, Sec. XI, Page 43		12/13/19	\$0 Copay per continuous confinement	Unlimited	No	\$843.58	\$2,066.76
Surgery (include all settings) Physician-Inpatient Physician-Outpatient (at a hospital, facility or surgery center) Physician's Office		COC, Sec. IX, Page 28; Sec. XI, Page 43			\$0 Copay \$0 Copay *PCP: \$0 Copay *Specialist: \$0 Copay *The Member is responsible for their office visit copay and not an additional copay for surgery.	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Outpatient Surgery Facility					\$0 Copay				

ATTACHMENT 35

		Source Document: Section, etc. and Pa	: Enter Article,		1 Commercial Plan	Benefit Limitations: e.g.,	Change from 2020	Projected Montl	nly Premium for
Covered Service	HMO Benefits	Certificate of Cov Rider Nu	verage (COC),	NYS DFS Status: Approved (include date) or Filed/	Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit,	20 visits/calendar year, 60 consecutive days	Enter: Yes/No and change, e.g., \$5	20:	-
		COC - Form # 155-23- LGHMOCERT	Rider Number	Pending	20% coinsurance	Indicate "unlimited" if no limitations	copay increase, new benefit	Individual	Family
Skilled Nursing Facilities		COC, Sec. XI, Page 45		Approved 12/13/19	\$0 Copay	Unlimited	No	\$4.09	\$10.01
Hospice Benefits	210 days	COC, Sec. X, Page 40		Approved 12/13/19	\$0 Copay	210 days	No	Included in Standard package cost	Included in Standard package cost
Emergency Room	Covered as required by ACA	COC, Sec. VIII, Pages 26, 27		Approved 12/13/19	\$75 Copay per visit	Unlimited	No	-\$7.77	-\$19.05
Urgent Care Facility		COC, Sec. VIII, Page 27		Approved 12/13/19	\$5 Copay per visit	Unlimited	No	-\$0.11	-\$0.28
Ambulance: Non-airborne		COC, Sec. VII, Pages 24, 25		Approved 12/13/19	\$0 Copay	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Airborne									
Diagnostic/Therapeutic Servi			tings	T .	T		1	T	
Radiology	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32; Sec. XI, Page 43		Approved 12/13/19	Hospital: \$0 Copay Medical/Surgical (Professional): Performed in a PCP office: \$5 Copay Performed in a Specialist office: \$10 Copay Performed in a Freestanding Radiology Facility: \$0 Copay Performed as Outpatient Hospital Services: \$0 Copay	Unlimited	Yes, increase in Copays as follows: Performed in a PCP office: \$5 Copay increase Performed in a Specialist office: \$10 Copay increase	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document Section, etc. and P Certificate of Co Rider Nu	age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit,	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days	Enter: Yes/No and change, e.g., \$5	d 2021	
		COC - Form # 155-23- LGHMOCERT	Rider Number	Pending	20% coinsurance	Indicate "unlimited" if no limitations	copay increase, new benefit	Individual	Family
Lab Tests	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XI, Page 43; Sec. IX, Page 32			Hospital: \$0 Copay Medical/Surgical (Professional): Performed in a PCP office: \$5 Copay Performed in a Specialist office: \$10 Copay Performed in a Freestanding Laboratory Facility: \$0 Copay Performed as Outpatient Hospital Services: \$0 Copay		Yes, increase in Copays as follows: Performed in a PCP office: \$5 Copay increase Performed in a Specialist office: \$10 Copay increase	Included in Standard package cost	Included in Standard package cost
Pathology	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XI, Page 43; Sec. IX, Page 32				Unlimited	No	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document: Section, etc. and P Certificate of Cov Rider Nu COC - Form # 155-23- LGHMOCERT	age Number of verage (COC),	NYS DFS Status: Approved (include date) or Filed/ Pending	Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit, 20% coinsurance	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Change from 2020 Enter: Yes/No and change, e.g., \$5 copay increase, new benefit	Projected Monti 20 Individual	hly Premium for 21 Family
EKG/EEG	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32; Sec. XI, Page 43		Approved 12/13/19	Hospital: \$0 Copay Medical/Surgical (Professional): Performed in a PCP office: \$5 Copay Performed in a Specialist office: \$10 Copay Performed in a Freestanding Radiology Facility: \$0 Copay Performed as Outpatient Hospital Services: \$0 Copay	Unlimited	Yes, increase in Copays as follows: Performed in a PCP office: \$5 Copay increase Performed in a Specialist office: \$10 Copay increase	Included in Standard package cost	Included in Standard package cost
Radiation	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32; Sec. XI, Page 43		Approved 12/13/19	Hospital: \$0 Copay Medical/Surgical (Professional): Performed in a Specialist office: \$10 Copay Performed in a Freestanding Radiology Facility: \$0 Copay Performed as Outpatient Hospital Services: \$0 Copay	Unlimited	Yes, \$10 Copay increase in a Specialist office		

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document: Section, etc. and Poce Certificate of Councider Nur COC - Form # 155-23- LGHMOCERT	Enter Article, age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit, 20% coinsurance	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Change from 2020 Enter: Yes/No and change, e.g., \$5 copay increase, new benefit	Projected Montl 20 Individual	-
Chemotherapy	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 28; Sec. XI, Page 43		Approved 12/13/19	Hospital: \$0 Copay Medical/Surgical (Professional): Performed in a PCP office: \$5 Copay Performed in a Specialist office: \$10 Copay Performed as Outpatient Hospital Services: \$0 Copay	Unlimited	Yes, increase in Copay as follows: Performed in a PCP office: \$5 Copay increase	Included in Standard package cost	Included in Standard package cost
All Members - including but not limited to: annual wellness visit/ physical, standard immunizations (recommended by ACIP), colonoscopy, screening for STDs, HIV. Alcohol/ substance abuse, tobacco use, cholesterol, diabetes and high		COC, Sec. VI, Pages 21, 22		Approved 12/13/19	\$0 Copay	1 visit per Plan Year	No	Included in Standard package cost	Included in Standard package cost
Women's Health - including but not limited to:	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. VI, Pages 22, 23		Approved 12/13/19	\$0 Copay	→ 1 baseline mammogram for Members age 35 through 39; → Upon the recommendation of the Member's Provider, an annual mammogram for Members age 35 through 39 if Medically Necessary; and → 1 mammogram annually for Members age 40 and over. → 1 annual cytology	No	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document: Section, etc. and Proceedings of Conference of Conferen	age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit, 20% coinsurance	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Change from 2020 Enter: Yes/No and change, e.g., \$5 copay increase, new benefit	Projected Monti 20 Individual	•
Men's Health - including but not limited to: prostate cancer screening, abdominal aortic aneurysm screening	Covered as required by Federal and NYS laws and/or regulation	LGHMOCERT COC, Sec. VI, Page 23		Approved 12/13/19	\$0 Copay	→ Prostate Cancer Screening at any age with a prior history of prostate cancer; and → annually for men age 50 and over who are asymptomatic and age 40 and over with a family history of prostate cancer or other prostate cancer risks.	No	Included in Standard package cost	Included in Standard package cost
Children's Health - including but not limited to: certain newborn screenings, metabolic screenings, vision, autism, lead and TB screenings, obesity counseling	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. VI, Page 21		Approved 12/13/19	\$0 Copay	1 visit per plan year	No	Included in Standard package cost	Included in Standard package cost
Women's Health Care/OB GYI Pre- and Post Natal Visits	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. IX, Page 32		Approved 12/13/19	\$0 Copay	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Family Planning	Routine examinations; laboratory tests; birth control counseling; pregnancy testing; genetic counseling	COC, Sec. VI, Pages 22, 23		12/13/19	PCP: \$5 Copay per visit Specialist: \$10 Copay per visit	Unlimited The Copay is waived if it is an ACA preventive care service	No	Included in Standard package cost	Included in Standard package cost
Infertility Services	Covered as required by Federal and NYS laws and/or regulation and the infertility mandates of 2002 and 2019	COC, Sec. IX, Pages 30, 31		Approved 12/13/19	\$10 Copay per visit	Advanced Infertility Services limited to 3 cycles per lifetime of in vitro fertilization	No	Included in Standard package cost	Included in Standard package cost
Contraceptive Drugs and Devices	Covered as required by ACA and NYS laws and/or regulation whichever provides the higher level of benefit	COC, Sec. XIII, Page 51		Approved 12/13/19	\$0 Copay	Unlimited	No	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document: Section, etc. and P Certificate of Cov Rider Nu COC - Form # 155-23-	Enter Article, age Number of verage (COC),	NYS DFS Status: Approved (include date) or Filed/ Pending	Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit, 20% coinsurance	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Change from 2020 Enter: Yes/No and change, e.g., \$5 copay increase, new benefit	Projected Monti 20 Individual	hly Premium for 21 Family
Debeline Complexied	Const. O. Const. Cont. There	LGHMOCERT	Number						
Rehabilitative Care, Physical, Inpatient Rehabilitative Care	speech & Occupational There	COC, Sec. XI, Pages 44, 45		Approved 12/13/19	\$0 Copay	30 days per Plan Year	No	Included in Standard package cost	Included in Standard package cost
Outpatient Rehabilitative Care		COC, Sec. IX, Page 33		Approved 12/13/19	Performed in a PCP office: \$5 Copay per visit Performed in a Specialist office: \$10 Copay per visit Performed in an Outpatient Facility: \$0 Copay	90 visits per Plan Year (total visits include those received for Speech, Occupational, Respiratory and/or Physical Therapies)	Yes, decrease in Copays as follows: Performed in a PCP office: \$5 Copay decrease Performed in an Outpatient Facility: \$10 Copay decrease	\$2.04	\$5.00
Mental Health/Substance Abu	ise								
Outpatient Mental Health	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XII, Pages 47, 48		Approved 12/13/19	\$0 Copay	Unlimited	No	\$18.04	\$44.19
Inpatient Mental Health	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XII, Page 47		Approved 12/13/19	\$0 Copay	Unlimited	No	\$14.43	\$35.35
Coverage for Autism Spectrum Disorder	In compliance with NYS Autism legislation including Habilitative Services, Applied Behavior Analysis (ABA)	COC, Sec. X, Pages 36, 37		Approved 12/13/19	PCP: \$5 Copay per visit Specialist: \$10 Copay per visit	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Alcohol and Substance Abuse Detoxification	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XII, Page 48		Approved 12/13/19	\$0 Copay	Unlimited	No	\$1.11	\$2.72
Outpatient Alcoholism and Substance Abuse Rehabilitation	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. XII, Page 48		Approved 12/13/19	Office Visit: \$5 Copay per visit All Other Outpatient Services: \$5 Copay per visit	Unlimited	Yes, \$5 Copay decrease when performed at All Other Outpatient Services	\$1.11	\$2.72

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document Section, etc. and P Certificate of Co Rider Nu	age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit,	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days	Enter: Yes/No and change, e.g., \$5	Projected Month	•
		COC - Form # 155-23- LGHMOCERT	Rider Number	Pending	20% coinsurance	Indicate "unlimited" if no limitations	copay increase, new benefit	Individual	Family
Inpatient Alcoholism and	Covered as required by	COC, Sec. XII,		Approved	\$0 Copay	Unlimited	No	\$7.93	\$19.44
Substance Abuse	Federal and NYS laws	Page 48		12/13/19					
Rehabilitation	and/or regulation.								
Prescription Drugs: Medically (The copayment for injectable			•			•	•	, -	
Prescription Drugs		COC, Sec. XIII, Pages 50 - 62		12/13/19	Retail 30-Day Supply: \$5 Copay generic / \$20 Copay brand Mail-Order 90-Day Supply: \$7.50 Copay generic / \$30 Copay brand	Unlimited	No	\$290.69	\$712.17
Other			l					l .	
Diabetic Supplies	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. X, Pages 38, 39			\$5 Copay per 34 day supply	Unlimited	No	-\$0.20	-\$0.49
Oral Agents and Insulin	Covered as required by Federal and NYS laws and/or regulation	COC, Sec. X, Pages 38, 39			\$5 Copay per 34 day supply	Unlimited	No	Included in Standard package cost	Included in Standard package cost
Diabetic Shoes		COC, Sec. X, Pages 38, 39, 40		Approved 12/13/19		Limitations subject to prior approval requirements	No	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

Covered Service	HMO Benefits	Source Document Section, etc. and P Certificate of Cov Rider Nu	age Number of verage (COC),		Member Cost: Enter copay/coinsurance amount, e.g., \$25/visit,	Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days	Change from 2020 Enter: Yes/No and change, e.g., \$5	Projected Montl	-
		COC - Form # 155-23- LGHMOCERT	Rider Number	Pending	20% coinsurance	Indicate "unlimited" if no limitations	copay increase, new benefit	Individual	Family
Durable Medical Equipment (DME)	Medically necessary DME which can with- stand repeated use & primarily used to serve a medical purpose must be covered. Examples include but not limited to: wheelchairs, walkers, respiratory equip, oxygen supplies, replacements, repairs & maintenance, not provided for under manufacturer's warranty or purchase agreement must be covered when functionally necessary.	COC, Sec. X, Pages 39, 40		Approved 12/13/19	\$0 Copay	Limitations subject to prior approval requirements	No	\$7.28	\$17.85
Prosthetic Devices	Medically necessary			Approved 12/13/19	\$0 Сорау	Limitations subject to prior approval requirements	No	Included in Standard package cost	Included in Standard package cost

ATTACHMENT 35

		Source Document	: Enter Article,	NLF113 POR 202.	I Commercial Plan				
Covered Service	HMO Benefits	Section, etc. and Page Number of Certificate of Coverage (COC), Rider Number	Approved (include		Benefit Limitations: e.g., 20 visits/calendar year, 60 consecutive days Indicate "unlimited" if no limitations	Enter: Yes/No and change, e.g., \$5	Projected Monthly Premium for 2021		
		COC - Form # 155-23- LGHMOCERT	Rider Number	date) or Filed/ Pending amount, e.g., \$25/visit, 20% coinsurance			Individual	Family	
Orthotic Devices	Medically Necessary custom-made orthotic devices used to support, align, prevent or correct deformities or to improve the function of the foot must be covered. Orthopedic shoes and other supportive devices for treatment of weak, strained, flat, unstable or unbalanced feet should not be included for coverage. Replacements, repairs and maintenance, not provided for under a manufacturer's warranty or purchase agreement, must be covered when functionally necessary.	COC, Sec. X, Pages 39 - 42		Approved 12/13/19	\$0 Copay	Limitations subject to prior approval requirements	No	\$1.18	\$2.89
Additional Benefits	Who is Covered - NYSHIP Eligibility Rider Prescription Drug Rider for Certain Drugs Transportation, Lodging and Meal Expenses for Transplants Rider		155-23- NYSHIP ELIGIBILITY (07/20) 155-23- LGHMOWORX (11/19) 155-23- LGHMOTRANS PLANTS (07/16)	Filed and pending DFS approval Approved 12/13/19 Approved 10/21/16		→ Adds certain coverage for the NYSHIP plan without Prescription Drug benefits. → Coverage is \$10,000 per transplant. → Maximum daily coverage for lodging and meals is \$200. → Expenses are for recipient and 1 companion (2 if candidate is a minor) when travelling outside a 50 mile radius from recipient's home. → Coverage also for donor and 1 companion (2 if donor is a minor) when travelling outside a 50 mile radius from recipient's home.		\$0.00	\$0.00



ATTACHMENT 25

Health Insurance Plan of Greater New York (HIP) Side-by-Side Comparison For New York State Employees 2020 to 2021

MODIFIED BENEFIT	2020 Benefit Level	2021 Benefit Level
PROFESSIONAL SERVICES and OUTPATIENT CARE		
Advanced Imaging Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Allergy Testing and Treatment • Performed in a PCP Office	\$10 Copay	\$5 Copay
Cardiac Rehabilitation • Performed as Outpatient Hospital Services	\$10 Copay	\$0 Copay
Chemotherapy • Performed in a PCP Office	\$0 Copay	\$5 Copay
Diagnostic Radiology Services • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Dialysis Performed in a PCP Office Performed in a Freestanding Center Performed as Outpatient Hospital Services	\$10 Copay \$10 Copay \$10 Copay	\$5 Copay \$0 Copay \$0 Copay

NYSHIP Active Employees with RX Calendar Year 2021



MODIFIED BENEFIT	2020 Benefit Level	2021 Benefit Level
PROFESSIONAL SERVICES and OUTPATIENT CARE – continued		
Habilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office	\$10 Copay	\$5 Copay
Performed in an Outpatient Facility	\$10 Copay	\$0 Copay
Infusion Therapy	\$0 Copay \$0 Copay \$0 Copay	\$5 Copay \$10 Copay \$10 Copay
Laboratory Tests • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Rehabilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office	\$10 Copay	\$5 Copay
Performed in an Outpatient Facility	\$10 Copay	\$0 Copay
Therapeutic Radiology Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
MENTAL HEALTH and SUBSTANCE USE DISORDER SERVICES		
Outpatient Alcoholism and Substance Abuse Rehabilitation • All Other Outpatient Services	\$10 Copay	\$5 Copay

NYSHIP Active Employees with RX Calendar Year 2021



ATTACHMENT 25

Health Insurance Plan of Greater New York (HIP) Side-by-Side Comparison For New York State Employees 2020 to 2021

MODIFIED BENEFIT	2020 Benefit Level	2021 Benefit Level
PROFESSIONAL SERVICES and OUTPATIENT CARE		
Advanced Imaging Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Allergy Testing and Treatment • Performed in a PCP Office	\$10 Copay	\$5 Copay
Cardiac Rehabilitation • Performed as Outpatient Hospital Services	\$10 Copay	\$0 Copay
Chemotherapy • Performed in a PCP Office	\$0 Copay	\$5 Copay
Diagnostic Radiology Services • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Dialysis	\$10 Copay \$10 Copay \$10 Copay	\$5 Copay \$0 Copay \$0 Copay

NYSHIP Active Employees without RX Calendar Year 2021



MODIFIED BENEFIT	2020 Benefit Level	2021 Benefit Level
PROFESSIONAL SERVICES and OUTPATIENT CARE – continued		
Habilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Infusion Therapy	\$0 Copay \$0 Copay \$0 Copay	\$5 Copay \$10 Copay \$10 Copay
Laboratory Tests • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Rehabilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Therapeutic Radiology Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
MENTAL HEALTH and SUBSTANCE USE DISORDER SERVICES		
Outpatient Alcoholism and Substance Abuse Rehabilitation • All Other Outpatient Services	\$10 Copay	\$5 Copay

NYSHIP Active Employees without RX Calendar Year 2021





HIP Prime HMO 2021 Summary of Benefits

SERVICE CATEGORY	COVERAGE	СОРАУ
Physician Services	Primary Care Physician Office Visits	
	Adults	\$5 per visit
	Sick-Child Visits (Age 0-25)	\$5 per visit
	Laboratory Services	\$5 per visit
	X-ray Services	\$5 per visit
	Specialist Office Visits	
	Office Visits	\$10 per visit
	Laboratory Services	\$10 per visit
	Refractive Eye Exams	\$O
	X-ray Services	\$10
	Inpatient Hospital Services	
	Anesthesiology	\$O
	Radiology Visits/Consultations	\$0
Preventive & Wellness Care Services	Well-Baby, Child Care, and Immunizations	\$0
	Adult Physical	\$O
	Mammography & Prostate Cancer Screening	\$O
	Annual Pap Test & OB/GYN Exam	\$ O
	Immunizations for Adults	\$0
	Colonoscopy & Sigmoidoscopy Screening	
	for Adults	\$O
	Bone Density Tests	\$0
Hospital	Hospital Inpatient	\$0 per continuous stay
	Hospital Outpatient Surgery	\$ 0
	Hospital Outpatient X-ray	\$0
	Hospital Outpatient Laboratory	\$0
Maternity	Physician Services	\$0
	Hospital Services	\$O
	Nursery Care	\$0
Emergency Room (ER) Visit		\$75 per visit
Ambulance		\$ 0
Chiropractic Benefit		\$10 per visit
Durable Medical Equipment		\$0
Mental Health	Inpatient	\$0
	Outpatient	\$ 0
Substance Abuse Diagnosis &	Inpatient	\$0
Treatment	Rehabilitation Outpatient:	
	 Primary Care Physician Office 	\$5 per visit
	Specialist Office	\$5 per visit
Physical/Occupational/Speech Therapy	Outpatient	\$0; Combined 90 visits per year
	Primary Care Physician Office	\$5 per visit

(Continued)

HIP Prime HMO 2021 Summary of Benefits

SERVICE CATEGORY	COVERAGE	СОРАУ
Home Health Care		\$0 – 200 visits per calendar year
Prescription Coverage ¹	Retail 30-Day Supply Mail Order 90-Day Supply	\$5 generic / \$20 brand \$7.50 generic / \$30 brand
Lifetime Maximum Coverage		No maximums
Additional Benefits		
Autism Spectrum Disorder	Inpatient Outpatient:	\$O
	Primary Care Physician Office	\$5 per visit
	 Specialist Office 	\$10 per visit
	Assistive Communication Devices	\$10 per visit
Diabetic Supplies		\$5 per 34-day supply
Dialysis Treatment	Primary Care Physician Office	\$5 per visit
	Freestanding Center	\$ O
	Outpatient Hospital	\$O
Hospice Care		\$0 - 210 days
Out-of-Pocket Maximum		\$6,850 per individual
(per calendar year)		\$13,700 per family
Skilled Nursing Facility Care		\$0
Urgent Care		\$5 per visit

¹Drugs are dispensed in accordance with HIP's Drug Formulary. Please refer to your Prescription Drug Rider for details.

Except for emergency care, the above benefits and services are covered only when provided or referred by a HIP primary care physician and/or approved in advance by our HIP Care Management Program. HIP participating physicians and providers have contracted with HIP to provide care to our members; they are not employees, agents, servants, or representatives of HIP. This summary is provided for information only; it does not contain complete details of the Plan, which are available only in the Contract or Certificate of Coverage, and it does not constitute an Agreement.





HIP Prime HMO Plan Benefit Comparison

For New York State Employees — 2020 TO 2021

There are benefit changes to your HIP Prime HMO plan for 2021.

MODIFIED BENEFIT	2020 BENEFIT LEVEL	2021 BENEFIT LEVEL
Professional Services and Outpatient Care		
Advanced Imaging Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Allergy Testing and Treatment • Performed in a PCP Office	\$10 Copay	\$5 Copay
Cardiac Rehabilitation • Performed as Outpatient Hospital Services	\$10 Copay	\$0 Copay
Chemotherapy • Performed in a PCP Office	\$0 Copay	\$5 Copay
Diagnostic Radiology Services • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Dialysis • Performed in a PCP Office • Performed in a Freestanding Center • Performed as Outpatient Hospital Services	\$10 Copay \$10 Copay \$10 Copay	\$5 Copay \$0 Copay \$0 Copay
Habilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Infusion Therapy • Performed in a PCP Office • Performed in a Specialist Office • Home Infusion Therapy	\$0 Copay \$0 Copay \$0 Copay	\$5 Copay \$10 Copay \$10 Copay
Laboratory Tests • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Rehabilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Therapeutic Radiology Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Mental Health And Substance Use Disorder Services		
Outpatient Alcoholism and Substance Abuse Rehabilitation • All Other Outpatient Services	\$10 Copay	\$5 Copay





HIP Prime HMO 2021 Summary of Benefits

SERVICE CATEGORY	COVERAGE	COPAY
Physician Services	Primary Care Physician Office Visits	
	Adults	\$5 per visit
	Sick-Child Visits (Age 0-25)	\$5 per visit
	Laboratory Services	\$5 per visit
	X-ray Services	\$5 per visit
	Specialist Office Visits	
	Office Visits	\$10 per visit
	Laboratory Services	\$10 per visit
	Refractive Eye Exams	\$0
	X-ray Services	\$10
	Inpatient Hospital Services	
	Anesthesiology	\$0
	Radiology Visits/Consultations	\$0
Preventive & Wellness Care Services	Well-baby, Child care, and Immunizations	\$0
	Adult Physical	\$ 0
	Mammography & Prostate Cancer Screening	\$0
	Annual Pap Test & OB/GYN Exam	\$0
	Immunizations for Adults	\$0
	Colonoscopy & Sigmoidoscopy Screening	
	for Adults	\$0
	Bone Density Tests	\$0
Hospital	Hospital Inpatient	\$0 per continuous stay
	Hospital Outpatient Surgery	\$ 0
	Hospital Outpatient X-ray	\$0
	Hospital Outpatient Laboratory	\$0
Maternity	Physician Services	\$0
	Hospital Services	\$0
	Nursery Care	\$0
Emergency Room (ER) Visit		\$75 per visit
Ambulance		\$O
Chiropractic Benefit		\$10 per visit
Durable Medical Equipment		\$O
Mental Health	Inpatient	\$0
	Outpatient	\$0
Substance Abuse Diagnosis & Treatment	Inpatient	\$O
	Rehabilitation Outpatient:	
	 Primary Care Physician Office 	\$5 per visit
	Specialist Office	\$5 per visit
Physical/Occupational/Speech Therapy	Outpatient	\$0; Combined 90 visits per year
, , , , , , , , , , , , , , , , , , , ,	Primary Care Physician Office	\$5 per visit
	<u> </u>	

(Continued)

HIP Prime HMO 2021 Summary of Benefits

SERVICE CATEGORY	COVERAGE	СОРАУ
Home Health Care		\$0 – 200 visits per calendar year
Lifetime Maximum Coverage		No maximums
Additional Benefits		
Autism Spectrum Disorder	Inpatient Outpatient:	\$O
	Primary Care Physician Office	\$5 per visit
	Specialist Office	\$10 per visit
	Assistive Communication Devices	\$10 per visit
Diabetic Supplies		\$5 per 34-day supply
Dialysis Treatment	Primary Care Physician Office	\$5 per visit
	Freestanding Center	\$0
	Outpatient Hospital	\$0
Hospice Care		\$0 - 210 days
Out-of-Pocket Maximum		\$6,850 per individual
(per calendar year)		\$13,700 per family
Skilled Nursing Facility Care		\$ 0
Urgent Care		\$5 per visit

Except for emergency care, the above benefits and services are covered only when provided or referred by a HIP primary care physician and/or approved in advance by our HIP Care Management Program. HIP participating physicians and providers have contracted with HIP to provide care to our members; they are not employees, agents, servants, or representatives of HIP. This summary is provided for information only; it does not contain complete details of the Plan, which are available only in the Contract or Certificate of Coverage, and it does not constitute an Agreement.





HIP Prime HMO Plan Benefit Comparison

For New York State Employees — 2020 TO 2021

There are benefit changes to your HIP Prime HMO plan for 2021.

MODIFIED BENEFIT	2020 BENEFIT LEVEL	2021 BENEFIT LEVEL
Professional Services and Outpatient Care		
Advanced Imaging Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Allergy Testing and Treatment • Performed in a PCP Office	\$10 Copay	\$5 Copay
Cardiac Rehabilitation • Performed as Outpatient Hospital Services	\$10 Copay	\$0 Copay
Chemotherapy • Performed in a PCP Office	\$0 Copay	\$5 Copay
Diagnostic Radiology Services • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Dialysis • Performed in a PCP Office • Performed in a Freestanding Center • Performed as Outpatient Hospital Services	\$10 Copay \$10 Copay \$10 Copay	\$5 Copay \$0 Copay \$0 Copay
Habilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Infusion Therapy • Performed in a PCP Office • Performed in a Specialist Office • Home Infusion Therapy	\$0 Copay \$0 Copay \$0 Copay	\$5 Copay \$10 Copay \$10 Copay
Laboratory Tests • Performed in a PCP Office • Performed in a Specialist Office	\$0 Copay \$0 Copay	\$5 Copay \$10 Copay
Rehabilitation Services (Physical Therapy, Occupational Therapy or Speech Therapy) • Performed in a PCP Office • Performed in an Outpatient Facility	\$10 Copay \$10 Copay	\$5 Copay \$0 Copay
Therapeutic Radiology Services • Performed in a Specialist Office	\$0 Copay	\$10 Copay
Mental Health And Substance Use Disorder Services		
Outpatient Alcoholism and Substance Abuse Rehabilitation • All Other Outpatient Services	\$10 Copay	\$5 Copay



Coverage Period: 1/1/2021 - 12/31/2021

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services

EmblemHealth: HIP Prime HMO Coverage for: Individual/Family Plan Type: HMO

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately.

This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, call 1-800-624-2414. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossarv at www.emblemhealth.com or call 1-800-624-2414 to request a copy.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	\$0	See the Common Medical Events chart below for your costs for services this <u>plan</u> covers.
before you meet your deductible?	In network medical and hospital services are not subject to a deductible.	This <u>plan</u> covers some items and services even if you haven't yet met the <u>deductible</u> amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers certain <u>preventive</u> <u>services</u> without <u>cost-sharing</u> and before you meet your <u>deductible</u> . See a list of covered <u>preventive services</u> at https://www.healthcare.gov/coverage/preventive-care-benefits/.
Are there other deductibles for specific services?	No	You don't have to meet <u>deductibles</u> for specific services.
What is the <u>out-of-pocket</u> <u>limit</u> for this <u>plan</u> ?	For in network providers \$6,850 Individual / \$13,700 Family.	The <u>out-of-pocket limit</u> is the most you could pay in a year for covered services. If you have other family members in this <u>plan</u> , they have to meet their own <u>out-of-pocket limits</u> until the overall family <u>out-of-pocket limit</u> has been met.
What is not included in the out-of-pocket limit?	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a <u>network provider</u> ?	Yes. See www.EmblemHealth.com or call 1-800-447-8255 for a list of participating providers.	This <u>plan</u> uses a <u>provider network</u> . You will pay less if you use a <u>provider</u> in the <u>plan's network</u> . You will pay the most if you use an <u>out-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider's</u> charge and what your <u>plan</u> pays (<u>balance billing</u>). Be aware, your <u>network provider might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider before you get services</u>.</u>
Do you need a <u>referral</u> to see a <u>specialist</u> ?	Yes, written approval is required to see a specialist.	This <u>plan</u> will pay some or all of the costs to see a <u>specialist</u> for covered services but only if you have a <u>referral</u> before you see the <u>specialist</u> .



All **copayment** and **coinsurance** costs shown in this chart are after your **deductible** has been met, if a **deductible** applies.

Common		What You Will Pay		*I imitations Eventions 9 Other
Medical Event	Services You May Need	Network Provider (You will pay the least)	Out-of-Network Provider (You will pay the most)	*Limitations, Exceptions, & Other Important Information
If you viols a boolsh	Primary care visit to treat an injury or illness	\$5 co-pay visit	Not covered	None
If you visit a health care provider's office	<u>Specialist</u> visit	\$10 co-pay visit	Not covered	None
or clinic	Preventive care/screening/immunization	No charge	Not covered	Applies to Well Child Visits; Adult Annual Physical Exams; Well Woman Exams; Bone Density Testing.
If you have a test	<u>Diagnostic test</u> (x-ray, blood work)	PCP office: \$5 co-pay visit SCP office: \$10 co-pay visit	Not covered	None
ii you nave a test	Imaging (CT/PET scans, MRIs)	PCP office: \$5 co-pay visit SCP office: \$10 co-pay visit	Not covered	Preauthorization required
If you need drugs to treat your illness or condition More information about	Generic drugs (Tier 1)	Retail: \$5 co-pay/30 day supply Mail Order: \$7.50 co-pay/90 day supply	Not covered	Tier 1 and Tier 2 drugs are covered.
	Preferred brand drugs (Tier 2)	Retail: \$20 co-pay/30 day supply Mail Order: \$30 co-pay/90 day supply	Not covered	
prescription drug coverage is available at www.EmblemHealth.com.	Non-preferred brand drugs (Tier 3)	Not Covered	Not covered	
www.Emblemrieatti.com.	Specialty drugs	Tier 1: \$5 co-pay/30 day supply Tier 2: \$20 co-pay/30 day supply	Not covered	Written referral required.
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	No charge	Not covered	Preauthorization required
	Physician/surgeon fees	No charge	Not covered	None
	Emergency room care	\$75 co-pay	\$75 co-pay	Applies to facility charge, waived if admitted.
If you need immediate medical attention	Emergency medical transportation	No charge	No charge	None
	<u>Urgent care</u>	\$5 co-pay visit	Not covered	Applies to facility charge.

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

Common		What You Will Pay		*Limitations, Exceptions, & Other
Medical Event Services You May		<u>Network Provider</u> (You will pay the least)	Out-of-Network Provider (You will pay the most)	Important Information
If you have a hospital	Facility fee (e.g., hospital room)	No charge	Not covered	Preauthorization required
stay	Physician/surgeon fee	No charge	Not covered	None
If you need mental health, behavioral	Outpatient services	\$5 co-pay visit	Not covered	Unlimited visits. For Substance Abuse care, up to 20 visits per plan year may be used for family counseling
health, or substance abuse services	Inpatient services	No charge	Not covered	Preauthorization required. However, Preauthorization is not required for emergency admissions.
	Office visits	No charge	Not covered	Office visit copay applies to first visit only. No charge thereafter.
If you are pregnant	Childbirth/delivery professional services	No charge	Not covered	None
	Childbirth/delivery facility services	No charge	Not covered	Limited to 48 hours for natural delivery and 96 hours for caesarean delivery. Preauthorization required
If you need help recovering or have other special health	Home health care	No charge	Not covered	200 visits per plan year. Preauthorization required.
	Rehabilitation services	Inpatient: No charge Outpatient Facility: No charge PCP office: \$5 co-pay visit	Not covered	Inpatient: 30 days per plan year combined therapies. Preauthorization required.
	Habilitation services	Inpatient: No charge Outpatient Facility: No charge PCP office: \$5 co-pay visit	Not covered	Outpatient: 30 visits per plan year combined therapies. Preauthorization required.
needs	Skilled nursing care	No charge	Not covered	Unlimited days. Preauthorization required.
	Durable medical equipment	No charge	Not covered	Preauthorization required
	Hospice services	No charge	Not covered	210 days per lifetime. Preauthorization required.
	Children's eye exam	No charge	Not covered	Refractive eye exam
If your child needs	Children's glasses	Not covered	Not covered	
dental or eye care	Children's dental check- up	\$5 co-pay/visit	Not covered	One oral exam every six months

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

- Acupuncture
- Cosmetic surgery
- Dental care

- Hearing aids
- Long-term care
- Most coverage provided outside the United States
- Non-emergency care when traveling outside the U.S.
- Private-duty nursing
- Routine eye care
- Routine foot care
- Weight loss programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Bariatric surgery (Prior Approval required)
- Chiropractic care

• Infertility treatment (Prior Approval required)

Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: New York State Department of Financial Services at 1-800-342-3736 or www.dfs.ny.gov/, U.S. Department of Health and Human Services at 1-877-267-2323 x1565 or www.cciio.cms.gov, U.S. Department of Labor, Employee Benefits Security Administration at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. Other coverage options may be available to you too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit www.HealthCare.gov or call 1-800-318-2596.

Your Grievance and Appeals Rights: There are agencies that can help if you have a complaint against your plan for a denial of a claim. This complaint is called a grievance or appeal. For more information about your right, look at the explanation of benefits you will receive for that medical claim. Your plan documents also provide complete information to submit a claim, appeal, or a grievance for any reason to your plan. For more information about your rights, this notice, or assistance, contact:

EmblemHealth

By Phone:

Please call the number on your ID card.

In writing:

EmblemHealth

Grievance and Appeals Department

P.O. Box 2801

New York, NY 10116-2807

Website: www.emblemhealth.com

For All Coverage Types

New York State Department of Financial Services

By Phone: 1-800-342-3736

In writing:

New York State Department of Financial Services

Consumer Assistance Unit One Commerce Plaza Albany, NY 12257

Website: www.dfs.ny.gov

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

For HMO Coverage

New York State Department of Health

By Phone: 1-800-206-8125

In writing:

New York State Department of Health Office of Health Insurance Programs

Bureau of Consumer Services – Complaint Unit

Corning Tower – OCP Room 1607

Albany, NY 12237

Email: managedcarecomplaint@health.ny.gov

Website: www.health.ny.gov

Consumer Assistance Program

New York State Consumer Assistance Program

By Phone: 1-888-614-5400

In writing:

Community Health Advocates 633 Third Avenue, 10th Floor

New York, NY 10017 Email: cha@cssny.org

Website: www.communityhealthadvocates.org

For Group Coverage:

U.S. Department of Labor

Employee Benefits Security Administration at 1-866-444-EBSA (3272)

Website: www.dol.gov/ebsa/healthreform

Does this plan provide Minimum Essential Coverage? Yes

If you don't have Minimum Essential Coverage for a month, you'll have to make a payment when you file your tax return unless you qualify for an exemption from the requirement that you have health coverage for that month.

Does this plan meet the Minimum Value Standards? Yes

If your plan doesn't meet the Minimum Value Standards, you may be eligible for a premium tax credit to help you pay for a plan through the Marketplace.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-624-2414

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-624-2414

Chinese (中文): 如果需要中文的帮助,**请拨打这个号码** 1-800-624-2414 Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 1-800-624-2414

-To see examples of how this plan might cover costs for a sample medical situation, see the next section.-

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.



This is not a cost estimator. Treatments shown are just examples of how this <u>plan</u> might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your <u>providers</u> charge, and many other factors. Focus on the <u>cost sharing</u> amounts (<u>deductibles</u>, <u>copayments</u> and <u>coinsurance</u>) and <u>excluded services</u> under the <u>plan</u>. Use this information to compare the portion of costs you might pay under different health <u>plans</u>. Please note these coverage examples are based on self-only coverage.

Peg is having a baby

(9 months of in-network pre-natal care and a hospital delivery)

	The	plan'	<u>s</u> overall	deductible	\$0
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■ <u>Specialist</u> (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing \$60

This EXAMPLE event includes services like:

Specialist office visits (prenatal care)
Childbirth/Delivery Professional Services
Childbirth/Delivery Facility Services Diagnostic
tests (ultrasounds and blood work) Specialist
visit (anesthesia)

Total Example Cost	\$12,800
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In the example, Peg would pay:

Cost Sharing				
<u>Deductibles</u>	\$0			
<u>Copayments</u>	\$125			
Coinsurance	\$0			
What isn't covered				
Limits or exclusions	\$60			
The total Peg would pay is	\$185			

Managing Joe's type 2 diabetes

(a year of routine in-network care of a well-controlled condition)

■ The plan's overall deductible \$0

■ Specialist (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing \$55

This EXAMPLE event includes services

like: Primary care physician office visits

(including disease education)

Diagnostic tests (blood work)

Prescription drugs

Durable medical equipment (glucose meter)

Total Example Cost	\$7,400
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In the example, Joe would pay:

<u>Cost Sharing</u>				
<u>Deductibles</u>	\$0			
<u>Copayments</u>	\$725			
<u>Coinsurance</u>	\$0			
What isn't covered				
Limits or exclusions	\$55			
The total Joe would pay is	\$780			

Mia's Simple Fracture

(in-network emergency room visit and follow up care)

■ The plan's overall deductible \$0

■ Specialist (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing

This EXAMPLE event includes services like:

Emergency room care (including medical supplies)

Diagnostic test (x-ray)

Durable medical equipment (crutches)

Rehabilitation services (physical therapy)

Total Example Cost \$1,900

In the example, Mia would pay:

<u>Cost Sharing</u>	
<u>Deductibles</u>	\$0
<u>Copayments</u>	\$80
<u>Co-insurance</u>	\$0
What isn't covered	
Limits or exclusions	\$0
The total Mia would pay is	\$80



ATTENTION: Language assistance services, free of charge, are available to you. Call **1-877-411-3625**. TTY/TDD: **711**.

Español (Spanish)

ATENCIÓN: Usted tiene a su disposición, gratis, servicios de ayuda para idiomas. Llame al 1-877-411-3625 (TTY/TDD: 711).

中文 (Traditional Chinese)

注意:我們免費提供相關的語言協助服務。請致電 1-877-411-3625 (TTY/TDD: 711)。

Русский (Russian)

ВНИМАНИЕ! Вам доступны бесплатные услуги переводчика. Звоните по тел. **1-877-411-3625** (служба текстового телефона TTY/TDD: **711**).

Kreyòl Ayisyen (Haitian Creole)

ATANSYON: Gen sèvis èd nan lang gratis ki disponib pou ou. Rele nimewo 1-877-411-3625 (TTY/TDD: 711).

한국어 (Korean)

주의: 귀하에게 언어 지원 서비스가 무료로 제공됩니다. 1-877-411-3625(TTY/TDD: 711)번으로 전화하십시오.

Italiano (Italian)

ATTENZIONE: sono disponibili servizi gratuiti di assistenza linguistica. Chiami il numero 1-877-411-3625 (TTY/TDD: 711).

אידיש (Yiddish)

אכטונג: שפראך הילף סערוויסעס, אהן קיין פרייז, זיינען דא צו באקומען פאר אייך. רופט **1-877-411 (TTY/TDD: 711)**.

বাংলা (Bengali)

মনোযোগ দিন: ভাষা সহায়তা পরিষেবাগুলি আপনার জন্য বিনামূল্যে উপলব্ধ আছে। 1-877-411-3625 (TTY/TDD: 711) নম্বরে ফোন করুন।

Polski (Polish)

UWAGA: dostępna jest bezpłatna pomoc językowa. Prosimy zadzwonić pod numer 1-877-411-3625 (TTY/TDD: 711).

(Arabic) العربية

يُرجى الانتباه: تتوفر لك خدمات المساعدة اللغوية مجاناً، اتصل على الرقم 3625-411-877-1 أو (TTY/TDD: 711).

Français (French)

ATTENTION : une assistance d'interprétation gratuite est à votre disposition. Veuillez composer le **1-877-411-3625** (TTY/TDD : **711**).

(Urdu) اردو

توجه دین:آپ کے لیے زبان سے متعلق اعانت کی خدمات، مفت دستیاب ہیں۔ 3625-411 -877 (TTY/TDD: 711) پر کال کریں۔

Tagalog (Tagalog)

NANANAWAGAN NG PANSIN: Mayroon kang magagamit na mga serbisyo para sa tulong sa wika nang walang bayad. Tawagan ang **1-877-411-3625** (TTY/TDD: **711**).

Ελληνικά (Greek)

ΠΡΟΣΟΧΗ: Διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε το **1-877-411-3625** (για άτομα με προβλήματα ακοής (TTY/TDD): **711**).

Shqip (Albanian)

VINI RE: Shërbime ndihmore për gjuhën, falas, janë në dispozicionin tuaj. Telefononi në 1-877-411-3625 (TTY/TDD: 711).

NOTICE OF NONDISCRIMINATION POLICY

EmblemHealth complies with Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. EmblemHealth does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

EmblemHealth:

- Provides free aids and services to people with disabilities to help
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose first language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call member services at **1-877-411-3625** (TTY/TDD: **711**).

If you believe that EmblemHealth has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with EmblemHealth Grievance and Appeals Department, PO Box 2844, New York, NY 10116, or call member services at **1-877-411-3625**. (Dial **711** for TTY/TDD services.) You can file a grievance in person, by mail or by phone. If you need help filing a grievance, EmblemHealth's Grievance and Appeals Department is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office of Civil Rights electronically through the Office of Civil Rights Complaint Portal, available at **ocrportal.hhs.gov/ocr/portal/lobby.jsf** or by mail or phone at **U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201**; **1-800-368-1019**, (dial **1-800-537-7697** for TTY services).

Complaint forms are available at hhs.gov/ocr/office/file/index.html.



Coverage Period: 1/1/2021 - 12/31/2021

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services

EmblemHealth: HIP Prime HMO Coverage for: Individual/Family Plan Type: HMO

The Summary of Benefits and Coverage (SBC) document will help you choose a health <u>plan</u>. The SBC shows you how you and the <u>plan</u> would share the cost for covered health care services. NOTE: Information about the cost of this <u>plan</u> (called the <u>premium</u>) will be provided separately.

This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, call 1-800-624-2414. For general definitions of common terms, such as <u>allowed amount</u>, <u>balance billing</u>, <u>coinsurance</u>, <u>copayment</u>, <u>deductible</u>, <u>provider</u>, or other <u>underlined</u> terms see the Glossary. You can view the Glossary at www.emblemhealth.com or call 1-800-624-2414 to request a copy.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	\$0	See the Common Medical Events chart below for your costs for services this <u>plan</u> covers.
before you meet your deductible?	In network medical and hospital services are not subject to a deductible.	This <u>plan</u> covers some items and services even if you haven't yet met the <u>deductible</u> amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers certain <u>preventive</u> <u>services</u> without <u>cost-sharing</u> and before you meet your <u>deductible</u> . See a list of covered <u>preventive services</u> at https://www.healthcare.gov/coverage/preventive-care-benefits/.
Are there other deductibles for specific services?	No	You don't have to meet <u>deductibles</u> for specific services.
What is the <u>out-of-pocket</u> <u>limit</u> for this <u>plan</u> ?	For in network providers \$6,850 Individual / \$13,700 Family.	The <u>out-of-pocket limit</u> is the most you could pay in a year for covered services. If you have other family members in this <u>plan</u> , they have to meet their own <u>out-of-pocket limits</u> until the overall family <u>out-of-pocket limit</u> has been met.
What is not included in the out-of-pocket limit?	Premiums, penalties, balanced-bill charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a <u>network provider</u> ?	Yes. See www.EmblemHealth.com or call 1-800-447-8255 for a list of participating providers.	This <u>plan</u> uses a <u>provider network</u> . You will pay less if you use a <u>provider</u> in the <u>plan's network</u> . You will pay the most if you use an <u>out-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider's</u> charge and what your <u>plan</u> pays (<u>balance billing</u>). Be aware, your <u>network provider might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider before you get services</u>.</u>
Do you need a <u>referral</u> to see a <u>specialist</u> ?	Yes, written approval is required to see a specialist.	This <u>plan</u> will pay some or all of the costs to see a <u>specialist</u> for covered services but only if you have a <u>referral</u> before you see the <u>specialist</u> .



All **copayment** and **coinsurance** costs shown in this chart are after your **deductible** has been met, if a **deductible** applies.

Common	What You Will Pay		Will Pay	*Limitations, Exceptions, & Other
Medical Event	Services You May Need	<u>Network Provider</u> (You will pay the least)	Out-of-Network Provider (You will pay the most)	Important Information
If you violate boolsh	Primary care visit to treat an injury or illness	\$5 co-pay visit	Not covered	None
If you visit a health care provider's office	<u>Specialist</u> visit	\$10 co-pay visit	Not covered	None
or clinic	Preventive care/screening/immunization	No charge	Not covered	Applies to Well Child Visits; Adult Annual Physical Exams; Well Woman Exams; Bone Density Testing.
If you have a test	<u>Diagnostic test</u> (x-ray, blood work)	PCP office: \$5 co-pay visit SCP office: \$10 co-pay visit	Not covered	None
ii you nave a test	Imaging (CT/PET scans, MRIs)	PCP office: \$5 co-pay visit SCP office: \$10 co-pay visit	sit Not covered	Preauthorization required
If you need drugs to	Generic drugs (Tier 1)	Not covered	Not covered	
treat your illness or condition	Preferred brand drugs (Tier 2)	Not covered	Not covered	
More information about prescription drug coverage is available at www.EmblemHealth.com.	Non-preferred brand drugs (Tier 3)	Not covered	Not covered	
	Specialty drugs	Not covered	Not covered	
If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	No charge	Not covered	Preauthorization required
	Physician/surgeon fees	No charge	Not covered	None
	Emergency room care	\$75 co-pay	\$75 co-pay	Applies to facility charge, waived if admitted.
If you need immediate medical attention	Emergency medical transportation	No charge	No charge	None
	<u>Urgent care</u>	\$5 co-pay visit	Not covered	Applies to facility charge.
If you have a hospital	Facility fee (e.g., hospital room)	No charge	Not covered	Preauthorization required
stay	Physician/surgeon fee	No charge	Not covered	None

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

	Services You May Need	What You Will Pay		*Limitations, Exceptions, & Other
Common Medical Event		<u>Network Provider</u> (You will pay the least)	Out-of-Network Provider (You will pay the most)	Important Information
If you need mental health, behavioral	Outpatient services	\$5 co-pay visit	Not covered	Unlimited visits. For Substance Abuse care, up to 20 visits per plan year may be used for family counseling
health, or substance abuse services	Inpatient services	No charge	Not covered	Preauthorization required. However, Preauthorization is not required for emergency admissions.
	Office visits	No charge	Not covered	Office visit copay applies to first visit only. No charge thereafter.
If you are pregnant	Childbirth/delivery professional services	No charge	Not covered	None
	Childbirth/delivery facility services	No charge	Not covered	Limited to 48 hours for natural delivery and 96 hours for caesarean delivery. Preauthorization required
	Home health care	No charge	Not covered	200 visits per plan year. Preauthorization required.
If you need help recovering or have other special health	Rehabilitation services	Inpatient: No charge Outpatient Facility: No charge PCP office: \$5 co-pay visit	Not covered	Inpatient: 30 days per plan year combined therapies. Preauthorization required.
	Habilitation services	Inpatient: No charge Outpatient Facility: No charge PCP office: \$5 co-pay visit	Not covered	Outpatient: 30 visits per plan year combined therapies. Preauthorization required.
needs	Skilled nursing care	No charge	Not covered	Unlimited days. Preauthorization required.
	Durable medical equipment	No charge	Not covered	Preauthorization required
	Hospice services	No charge	Not covered	210 days per lifetime. Preauthorization required.
	Children's eye exam	No charge	Not covered	Refractive eye exam
If your child needs	Children's glasses	Not covered	Not covered	
dental or eye care	Children's dental check- up	\$5 co-pay/visit	Not covered	One oral exam every six months

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

- Acupuncture
- Cosmetic surgery
- Dental care

- Hearing aids
- Long-term care
- Most coverage provided outside the United States
- Non-emergency care when traveling outside the U.S.
- Private-duty nursing
- Routine eye care
- Routine foot care
- Weight loss programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Bariatric surgery (Prior Approval required)
- Chiropractic care

• Infertility treatment (Prior Approval required)

Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is: New York State Department of Financial Services at 1-800-342-3736 or www.dfs.ny.gov/, U.S. Department of Health and Human Services at 1-877-267-2323 x1565 or www.cciio.cms.gov, U.S. Department of Labor, Employee Benefits Security Administration at 1-866-444-3272 or www.dol.gov/ebsa/healthreform. Other coverage options may be available to you too, including buying individual insurance coverage through the Health Insurance Marketplace. For more information about the Marketplace, visit www.HealthCare.gov or call 1-800-318-2596.

Your Grievance and Appeals Rights: There are agencies that can help if you have a complaint against your plan for a denial of a claim. This complaint is called a grievance or appeal. For more information about your right, look at the explanation of benefits you will receive for that medical claim. Your plan documents also provide complete information to submit a claim, appeal, or a grievance for any reason to your plan. For more information about your rights, this notice, or assistance, contact:

EmblemHealth

By Phone:

Please call the number on your ID card.

In writing:

EmblemHealth

Grievance and Appeals Department

P.O. Box 2801

New York, NY 10116-2807

Website: www.emblemhealth.com

For All Coverage Types

New York State Department of Financial Services

By Phone: 1-800-342-3736

In writing:

New York State Department of Financial Services

Consumer Assistance Unit One Commerce Plaza Albany, NY 12257

Website: www.dfs.ny.gov

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

NYSHIP 1/1/2021 - 12/31/2021

For HMO Coverage

New York State Department of Health

By Phone: 1-800-206-8125

In writing:

New York State Department of Health Office of Health Insurance Programs

Bureau of Consumer Services – Complaint Unit

Corning Tower – OCP Room 1607

Albany, NY 12237

Email: managedcarecomplaint@health.ny.gov

Website: www.health.ny.gov

Consumer Assistance Program

New York State Consumer Assistance Program

By Phone: 1-888-614-5400

In writing:

Community Health Advocates 633 Third Avenue, 10th Floor

New York, NY 10017 Email: cha@cssny.org

Website: www.communityhealthadvocates.org

For Group Coverage:

U.S. Department of Labor

Employee Benefits Security Administration at 1-866-444-EBSA (3272)

Website: www.dol.gov/ebsa/healthreform

Does this plan provide Minimum Essential Coverage? Yes

If you don't have Minimum Essential Coverage for a month, you'll have to make a payment when you file your tax return unless you qualify for an exemption from the requirement that you have health coverage for that month.

Does this plan meet the Minimum Value Standards? Yes

If your plan doesn't meet the Minimum Value Standards, you may be eligible for a premium tax credit to help you pay for a plan through the Marketplace.

Language Access Services:

Spanish (Español): Para obtener asistencia en Español, llame al 1-800-624-2414

Tagalog (Tagalog): Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-624-2414

Chinese (中文): 如果需要中文的帮助, 请拨打这个号码 1-800-624-2414 Navajo (Dine): Dinek'ehgo shika at'ohwol ninisingo, kwiijigo holne' 1-800-624-2414

To see examples of how this plan might cover costs for a sample medical situation, see the next section.—

^{*} For more information about limitations and exceptions, see the plan or policy document at www.emblemhealth.com/sbc.

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This is not a cost estimator. Treatments shown are just examples of how this <u>plan</u> might cover medical care. Your actual costs will be different depending on the actual care you receive, the prices your <u>providers</u> charge, and many other factors. Focus on the <u>cost sharing</u> amounts (<u>deductibles</u>, <u>copayments</u> and <u>coinsurance</u>) and <u>excluded services</u> under the <u>plan</u>. Use this information to compare the portion of costs you might pay under different health <u>plans</u>. Please note these coverage examples are based on self-only coverage.

Peg is having a baby

(9 months of in-network pre-natal care and a hospital delivery)

■ The p	<u>lan's</u> overa	III <u>deductible</u>	\$0
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■ Specialist (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing \$96

This EXAMPLE event includes services like:

Specialist office visits (prenatal care)
Childbirth/Delivery Professional Services
Childbirth/Delivery Facility Services Diagnostic
tests (ultrasounds and blood work) Specialist
visit (anesthesia)

Total Example Cost	\$12,800
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In the example, Peg would pay:

in the example, regineara pay.		
Cost Sharing		
<u>Deductibles</u>	\$0	
<u>Copayments</u>	\$125	
<u>Coinsurance</u>	\$0	
What isn't covered		
Limits or exclusions	\$96	
The total Peg would pay is	\$221	

Managing Joe's type 2 diabetes

(a year of routine in-network care of a well-controlled condition)

■ The <u>plan's</u> overall <u>deductible</u> \$0

■ <u>Specialist</u> (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing \$4,313

This EXAMPLE event includes services

like: Primary care physician office visits

(including disease education)

Diagnostic tests (blood work)

Prescription drugs

Durable medical equipment (glucose meter)

Total Example Cost	\$7,400
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In the example, Joe would pay:

<u>Cost Sharing</u>		
<u>Deductibles</u>	\$0	
<u>Copayments</u>	\$725	
<u>Coinsurance</u>	\$0	
What isn't covered		
Limits or exclusions	\$4,313	
The total Joe would pay is	\$5,038	

Mia's Simple Fracture

(in-network emergency room visit and follow up care)

■ The plan's overall deductible \$0

■ Specialist (cost sharing) \$10

■ Hospital (facility) cost sharing \$0

Other cost sharing

This EXAMPLE event includes services like:

Emergency room care (including medical supplies)

Diagnostic test (x-ray)

Durable medical equipment (crutches)

Rehabilitation services (physical therapy)

Total Example Cost \$1,900

In the example, Mia would pay:

<u>Cost Sharing</u>		
<u>Deductibles</u>	\$0	
<u>Copayments</u>	\$80	
<u>Co-insurance</u>	\$0	
What isn't covered		
Limits or exclusions	\$0	
The total Mia would pay is	\$80	



ATTENTION: Language assistance services, free of charge, are available to you. Call **1-877-411-3625**. TTY/TDD: **711**.

Español (Spanish)

ATENCIÓN: Usted tiene a su disposición, gratis, servicios de ayuda para idiomas. Llame al 1-877-411-3625 (TTY/TDD: 711).

中文 (Traditional Chinese)

注意:我們免費提供相關的語言協助服務。請致電 1-877-411-3625 (TTY/TDD: 711)。

Русский (Russian)

ВНИМАНИЕ! Вам доступны бесплатные услуги переводчика. Звоните по тел. **1-877-411-3625** (служба текстового телефона TTY/TDD: **711**).

Kreyòl Ayisyen (Haitian Creole)

ATANSYON: Gen sèvis èd nan lang gratis ki disponib pou ou. Rele nimewo 1-877-411-3625 (TTY/TDD: 711).

한국어 (Korean)

주의: 귀하에게 언어 지원 서비스가 무료로 제공됩니다. 1-877-411-3625(TTY/TDD: 711)번으로 전화하십시오.

Italiano (Italian)

ATTENZIONE: sono disponibili servizi gratuiti di assistenza linguistica. Chiami il numero **1-877-411-3625** (TTY/TDD: **711**).

אידיש (Yiddish)

אכטונג: שפראך הילף סערוויסעס, אהן קיין פרייז, זיינען דא צו באקומען פאר אייך. רופט **1-877-411 (TTY/TDD: 711)**.

বাংলা (Bengali)

মলোযোগ দিন: ভাষা সহায়তা পরিষেবাগুলি আপনার জন্য বিনামূল্যে উপলব্ধ আছে। 1-877-411-3625 (TTY/TDD: 711) নম্বরে ফোন করুন।

Polski (Polish)

UWAGA: dostępna jest bezpłatna pomoc językowa. Prosimy zadzwonić pod numer 1-877-411-3625 (TTY/TDD: 711).

NYSHIP 1/1/2021 - 12/31/2021

(Arabic) العربية

يُرجى الانتباه: تتوفر لك خدمات المساعدة اللغوية مجاناً، اتصل على الرقم 3625-411-877-1 أو (TTY/TDD: 711).

Français (French)

ATTENTION : une assistance d'interprétation gratuite est à votre disposition. Veuillez composer le **1-877-411-3625** (TTY/TDD : **711**).

(Urdu) اردو

توجه دین:آپ کے لیے زبان سے متعلق اعانت کی خدمات، مفت دستیاب ہیں۔ 3625-411 -877 (TTY/TDD: 711) پر کال کریں۔

Tagalog (Tagalog)

NANANAWAGAN NG PANSIN: Mayroon kang magagamit na mga serbisyo para sa tulong sa wika nang walang bayad. Tawagan ang **1-877-411-3625** (TTY/TDD: **711**).

Ελληνικά (Greek)

ΠΡΟΣΟΧΗ: Διατίθενται για σας υπηρεσίες γλωσσικής βοήθειας, δωρεάν. Καλέστε το **1-877-411-3625** (για άτομα με προβλήματα ακοής (TTY/TDD): **711**).

Shqip (Albanian)

VINI RE: Shërbime ndihmore për gjuhën, falas, janë në dispozicionin tuaj. Telefononi në 1-877-411-3625 (TTY/TDD: 711).

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NOTICE OF NONDISCRIMINATION POLICY

EmblemHealth complies with Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. EmblemHealth does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

EmblemHealth:

- Provides free aids and services to people with disabilities to help
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose first language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, please call member services at **1-877-411-3625** (TTY/TDD: **711**).

If you believe that EmblemHealth has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with EmblemHealth Grievance and Appeals Department, PO Box 2844, New York, NY 10116, or call member services at 1-877-411-3625. (Dial 711 for TTY/TDD services.) You can file a grievance in person, by mail or by phone. If you need help filing a grievance, EmblemHealth's Grievance and Appeals Department is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office of Civil Rights electronically through the Office of Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf or by mail or phone at U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201; 1-800-368-1019, (dial 1-800-537-7697 for TTY services).

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

Section V

Who is Covered

This Rider amends Your Certificate by deleting in its entirety "Section V – Who is Covered" and replacing with the following:

A. Definitions.

Terms used in this Rider are defined as follows. (Other defined terms can be found in the Definitions section of the Certificate).

- 1. "Young Adult" means an unmarried child, including adopted and stepchild through the age of 29 (until the Young Adult's 30th birthday) of an employee or member insured under NYSHIP, regardless of financial dependence, who is not insured by or eligible for coverage under any employee health benefit plan as an employee or member, whether insured or self-insured, and who lives, works or resides in New York State or the service area of the insurer and who is not covered under Medicare.
- 2. "Young Adult Option" means the right of a Young Adult who exceeds the age for dependent coverage under his or her parent's health insurance policy to independently purchase coverage through the parent's policy through the age of 29.

B. NYSHIP Eligibility.

The Subscriber, as a result of his or her relationship with the Group, is covered hereunder, and if such person has selected family coverage, the following family members of the Subscriber are also covered:

- 1. Your spouse, including a legally separated spouse, is eligible. If you are divorced or your marriage has been annulled, your former spouse is not eligible, even if a court orders you to maintain coverage.
- 2. Your Domestic Partner. You may cover your same or opposite sex domestic partner as your dependent under NYSHIP. A domestic partnership, for eligibility under NYSHIP, is one in which you and your partner are 18 years of age or older, unmarried and not related in a way that would bar marriage, living together, involved in an exclusive mutually committed relationship and financially interdependent. To enroll a domestic partner, you must have been in the partnership for six months and be able to provide proof of 6 months of cohabitation and 6 months of financial interdependence. There is a one year waiting period from the termination date of your previous partner's coverage before you may again enroll a domestic partner.
- 3. Your children under 26 years of age are eligible. This includes your natural children, legally adopted children, children in a waiting period prior to finalization of adoption, your stepchildren and children of your domestic partner who are covered without regard to financial dependence, residency with you, student status or employment. Other children who reside permanently with you in your household, who are chiefly dependent on you and

for whom you have assumed legal responsibility, in place of the parent, also are eligible; you must verify eligibility and provide documentation to your Employer upon enrollment and every two years thereafter. For "other children," legal responsibility by you must have commenced before the child reached 19.

- 4. For purposes of eligibility for health insurance coverage as a dependent, you may deduct from your dependent's age up to four years for service in a branch of the U.S. Military between the age of 19 and 25 for those dependents that return to school on a full-time basis, are unmarried and are otherwise not eligible for employer group coverage. You must be able to provide written documentation from the U.S. Military. Proof of full-time student status at an accredited secondary or preparatory school, college or other educational institution will be required by the HMO for verification.
- 5. Your unmarried dependent children 26 or over who are incapable of self-sustaining employment by reason of mental illness, developmental disability, mental retardation as defined in the mental hygiene law, or physical handicap who became so incapable prior to attainment of the age at which dependent coverage would otherwise be terminated are eligible.

The HMO will accept determinations of total disability under the above standards made by other group health plans provided that there has not been a break in coverage between plans.

- 6. Your unmarried children, including adopted, stepchildren and children of your domestic partner through age twenty-nine ("Young Adult"), who live, work, or reside in New York State or the service area of the HMO's network-based NYSHIP policy and who:
 - a) are not insured by or eligible for coverage through the Young Adult's own employersponsored health plan, whether insured or self-funded, provided that the health plan includes both hospital and medical benefits; and
 - b) are not covered under Medicare;

are eligible for coverage under the Young Adult Option.

In addition:

- c) the Young Adult need not live with the parent, be financially dependent upon the parent, or be a student;
- d) the Young Adult's eligibility for health insurance coverage through a former employer under federal COBRA or State continuation coverage does not disqualify the Young Adult from electing the Young Adult Option under NYSHIP;
- e) the Young Adult's children are not eligible for coverage under the Young Adult Option, but may be eligible for health insurance coverage under other programs, such as the Child Health Plus program;

- f) the parent need not have family coverage for the Young Adult to enroll in the Young Adult Option; and
- g) the Young Adult need not have been previously covered under the parent's NYSHIP coverage.

The HMO must accept all NYSHIP determinations of eligibility for enrollment in this coverage. Coverage of a Young Adult as described in this paragraph shall consist of coverage which is identical to the coverage provided to a NYSHIP enrollee. If the parent is enrolled in the HMO, coverage is available for the Young Adult who lives, works or resides outside of the parent's HMO service area but within New York State. However, the parent of the Young Adult need not be enrolled in the HMO in order for the Young Adult to have NYSHIP coverage through the plan in which he/she is enrolling as long as the Young Adult lives, works or resides in that HMO's service area. The parent must only be a NYSHIP enrollee (including under COBRA).

Coverage shall terminate on the first of the following to occur:

- a) the Young Adult voluntarily terminates coverage;
- b) The Young Adult's parent no longer is enrolled in NYSHIP;
- c) the Young Adult no longer meets the eligibility requirements for the Young Adult Option as outlined above;
- d) the NYSHIP premium for the Young Adult is not paid in full within the 30-day grace period; or
- e) the group contract is terminated and not replaced.

The dependent child does not have a separate federal COBRA or New York State continuation right at the time coverage through this option terminates.

A Young Adult and his/her parent have the following opportunities to enroll in the Young Adult Option:

1. When the Young Adult Would Otherwise Lose Coverage Due to Age

Coverage may be elected within 60 days of the date that the Young Adult otherwise would lose eligibility for coverage as his/her parent's dependent due to age. Coverage is retroactive to the date that the Young Adult otherwise would have lost coverage due to age. This is the only circumstance in which the Young Adult Option will be effective on a retroactive basis.

2. When the Young Adult is Newly Qualified Due to a Change in Circumstances

Coverage may be elected within 60 days of the date that the Young Adult newly meets the eligibility requirements for the Young Adult Option, such as due to loss of coverage through his/her employer; moves his/her residence into New York State; or gets divorced. It is possible for a Young Adult to elect coverage under this option on multiple occasions due to changes in the Young Adult's eligibility over time. Coverage will be effective prospectively, no later than 30 days after NYSHIP receives written notice of the election and payment of the first premium.

3. During the Young Adult Option Annual 30-Day Open Enrollment Period

Coverage may be elected during the Young Adult Option's annual 30-day open enrollment period which is expected to coincide with NYSHIP's Annual Option Transfer Period. Coverage under this option will be effective prospectively.

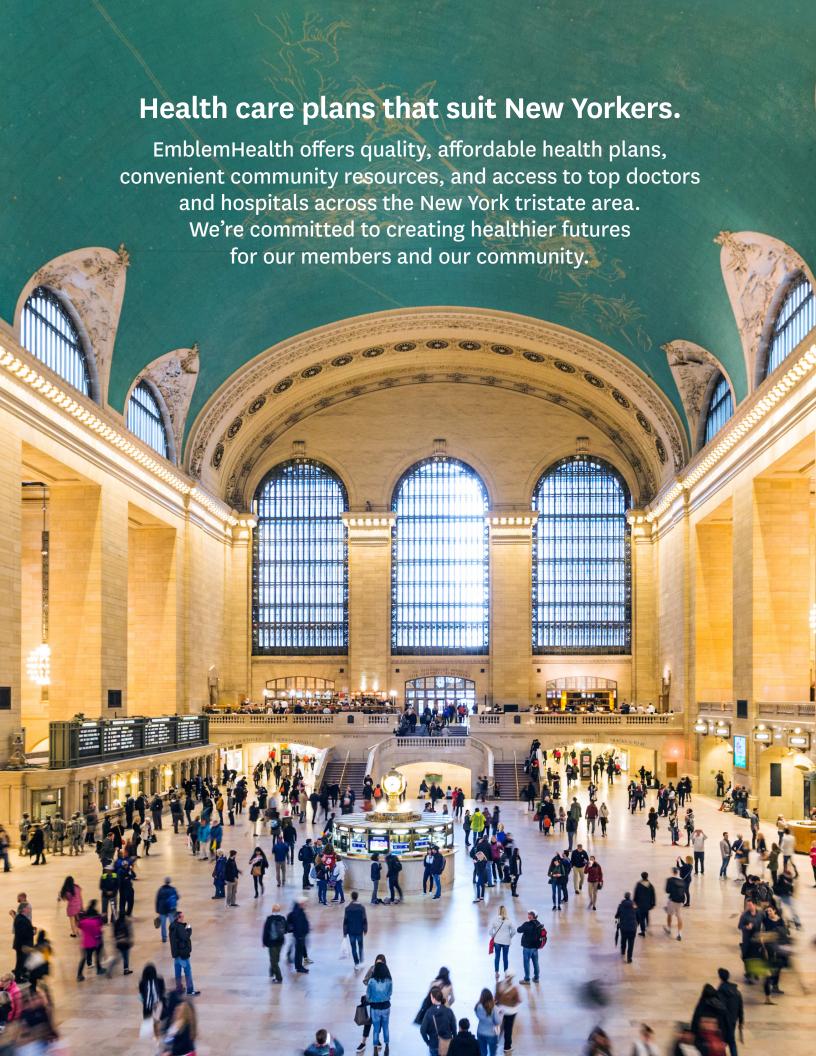
C. Controlling Certificate.

All of the terms, conditions, limitations, and exclusions of Your Certificate to which this Rider is attached shall also apply to this rider except where specifically changed by this Rider.

HEALTH INSURANCE PLAN OF GREATER NEW YORK

(1)[Karen Ignagni President and CEO]





HIP Prime HMO: Your Health Care Plan for 2021

New York State offers our HIP Prime HMO plan as one of the health care plans you can choose for your 2021 health benefits.

It's a choice you can feel good about.

Plan Features

When you enroll in the 2021 HIP Prime HMO plan, you can count on:

- More than 71,000 doctors and health care professionals to choose from across New York State.
- Low out-of-pocket costs and copays (the amount you pay for health services).
- Access to leading hospitals throughout your plan's service area.
- Health and wellness programs, as well as discounts on gym memberships, weight loss services, hearing aids, and more.
- Drug coverage, through retail pharmacies and our home delivery drug program.
- Access to online tools at myEmblemHealth to help you take care of your health needs and meet your personal wellness goals.

Ouestions?

If you have questions, call us at **877-861-0175 (TTY: 711)**. Our hours are 8 am to 6 pm, Monday to Friday. A Customer Service representative will be happy to help. Or, visit **emblemhealth.com**.

If you are already enrolled in the HIP Prime HMO plan, you don't need to do anything. You will continue to be covered through the end of 2021.

1

Our Prime Network: Connect with the Care You Need

Our HIP Prime HMO plan gives you access to quality health care. You may even have no copays for some services. A copay is the set dollar amount you pay for health services each time you use them.

Plus, there are no out-of-pocket costs like deductibles (the amount you pay before your plan starts to pay) or coinsurance (the percentage you pay after your plan starts to pay).

The HIP Prime HMO plan uses our Prime Network. A network is a group of health care professionals and facilities that contract with EmblemHealth. They provide covered products and services to members. You'll usually pay less when you use your network.

The Prime Network has over 71,000 private and group practice doctors, health care professionals, facilities, and 144 hospitals in 28 New York State counties — all five boroughs of New York City (the Bronx,* Brooklyn, Manhattan, Queens, and Staten Island), plus Nassau, Suffolk, Orange, Rockland, and Westchester counties and upstate areas that stretch north of Albany.

The Prime Network also includes:

- ConnectiCare HMO Network, which has over 21,000 primary care providers and specialists, and 28 hospitals in all eight counties in Connecticut.
- QualCare HMO Network, which has over 28,000 primary care providers and specialists, and 73 hospitals in all 21 counties in New Jersey.

You also have coverage at many of the area's most acclaimed hospitals, such as:

- Hospital for Special Surgery
 Montefiore Medical Center
- NYU Hospital Center

- Lenox Hill Hospital
- North Shore LIJ Health System
- Staten Island University Hospital

Your Doctor: A Partner in Good Health

The first thing you should do when you enroll in the HIP Prime HMO plan is choose a primary care doctor for yourself and your enrolled family members.

Your primary care doctor is the doctor who provides your everyday care. They help you and your family stay healthy. Your primary care doctor:

- Provides most of your health and preventive care.
- Refers you to specialists.
- Arranges for hospital admissions, when necessary.

You can change your primary care doctor at any time, by phone or online.

When you call to make an appointment with your doctor, tell them you're a HIP Prime HMO plan member. Remember to bring your member ID card to your appointment.

Find Out More

If you have questions, visit emblemhealth.com or call 877-861-0175 (TTY: 711). Our hours are 8 am to 6 pm, Monday to Friday. A Customer Service representative will be happy to help.

^{*} BronxDocs medical offices are affiliates of AdvantageCare Physicians, an EmblemHealth partner.



2021 HIP Prime HMO Plan Benefit Highlights for NYSHIP

Primary Care Doctor (PCP) Office Visits: Adults \$5 Sick-child visits (age 0-25) \$5 Laboratory services \$5 Specialist Office Visits: Office visits \$10 Laboratory services \$5 Specialist Office Visits: Office visits \$10 Laboratory services \$10 Refractive eye exams \$0 X-ray services \$10 Inpatient Hospital Services: Anesthesiology \$0 Inpatient Hospital Services \$0 Inpatient Services \$0 Inpatient Private And Wellness Care Services Well-baby, child care, and immunizations Covered in full Ammunizations for adults Covered in full Immunizations for adults Covered in full Colonoscopy and sigmoidoscopy screening for adults Covered in full Immunizations for adults Covered in full Inpatient \$0 Inpatient S0 Inpat	SERVICE CATEGORY/COVERAGE	COPAY*
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	Specialist office	\$5 per visit



SERVICE CATEGORY/COVERAGE	COPAY*
Physical/Occupational/Speech Therapy	
Outpatient Primary Care Physician Office	\$0 per visit; Combined 90 visits per year \$5 per visit
Home Health Care	200 visits per calendar year; Covered in full
Prescription Coverage ¹	
Retail 30-day supply Mail-order 90-day supply	\$5 generic / \$20 brand \$7.50 generic / \$30 brand
Lifetime Maximum Coverage	No maximum
ADDITIONAL BENEFITS	COPAY
Autism Spectrum Disorder	
Inpatient Outpatient:	\$0
PCP office Specialist office Assistive communication devices	\$5 \$10 \$10
Diabetes Supplies	\$5 per 34-day supply
Dialysis Treatment	
Primary Care Physician Office Freestanding Center Outpatient Hospitall	\$5 per visit \$0 \$0
Hospice Care	210 days; Covered in full
Skilled Nursing Facility Care	\$0
Urgent Care	\$5 per visit

Annual Out-of-Pocket Maximum: The highest amount you have to pay for in-network services in a calendar year is \$6,850 per individual and \$13,700 per family.

*Copays for active employees and early retirees. A copay is the set dollar amount you pay for health services each time you use them.
¹Drugs are dispensed in accordance with HIP's Drug Formulary. Please refer to your Prescription Drug Rider for details.

Except for emergency care, the above benefits and services are covered only when provided or referred by a HIP Primary Care Physician and/or approved in advance by our HIP Care Management Program. HIP Participating Physicians and Providers have contracted with HIP to provide care to our members; they are not employees, agents, servants, or representatives of HIP. This summary is provided for information only; it does not contain complete details of the Plan, which are available only in the Contract or Certificate of Coverage, and it does not constitute an Agreement.

Full details of the Plan are set forth in the Certificate of Coverage. Please refer to HIP certificate form number 155-23-HMOCERT (3/99).

To get a copy of the Summary of Benefits and Coverage (SBC), visit **emblemhealth.com/SBC**. To get a printed copy, call Customer Service at **800-447-8255 (TTY: 711)**. Our hours are 8 am to 6 pm, Monday to Friday. A Customer Service representative will be happy to help.

If you have questions about your plan, visit emblemhealth.com or call the Customer Service number above.



Caring for the Whole You: AdvantageCare Physicians

Complete health starts with a complete picture of you: your health history, your daily habits, your ups and downs.

We're in your neighborhood.

With locations in all five boroughs* and Long Island, we have an office near where you live, where you work, and in between.

Our care is comprehensive.

Across our practice, you'll find diagnostic, lab, and other services, and virtual visits — all designed to give you access to convenient, complete care.

We get to know you.

Your Primary Care Provider leads a Care Team that shares all information about your care. Together, they make sure you get the right type of care, when you need it.

With us, you're connected.

Through your **myACPNY** patient portal account, information and history about your care is safely shared across our entire practice, so your records go wherever you go.

For more information about AdvantageCare Physicians, visit acpny.com.

^{*}BronxDocs is an affiliate of AdvantageCare Physicians.



Neighborhood Care

Wellness is about much more than just your physical health. It's about the different dimensions of wellness, including physical, financial, intellectual, social, and emotional.

EmblemHealth Neighborhood Care offers in-person customer services* to help you navigate your total health, including free health and wellness classes, and resources to manage your health — right in your neighborhood.

There are 12 Neighborhood Care locations across Manhattan, Queens, Brooklyn, and Staten Island — with more coming soon. Each EmblemHealth Neighborhood Care is tailored to the unique needs of your community, with different programs and classes in each location.

Our free classes and programs include:

- Zumba
- Chair Yoga
- Tai Chi
- Art Therapy

- Diabetes Management
- Cell Phone Literacy
- Spanish 101
- Support Groups

Neighborhood Care isn't just for EmblemHealth members; we're a resource for the entire community. Members and non-members can visit Neighborhood Care and take advantage of our classes, tools, and face-to-face support.

Visit **emblemhealth.com/neighborhood** for upcoming classes and programs at Neighborhood Care.

^{*}Due to the COVID-19 virus, please check our website for more information about the availability of in-person services.



myEmblemHealth

Your Secure Health Services Website

Having the right information and tools like **myEmblemHealth** can help you stay healthy. **myEmblemHealth** keeps your personal health care information in one convenient place.

To register for myEmblemHealth, go to emblemhealth.com/sign-in. The information you enter is secure.

Once you're registered, you can check:

- The status of a claim, approval, or the amount you have paid toward your deductible, if any. A deductible is the amount you pay before your plan starts to pay.
- Descriptions of your health benefits.
- Messages in your secure Document Center. You can also send secure messages to us.
- A list of your covered drugs.

You can also order member ID cards, download forms, and update your email address.

Get Your Documents Online

When you register for **myEmblemHealth**, you can go paperless by signing up to get your documents online. They will be neatly stored in your secure Document Center on **myEmblemHealth**.

You can choose to get:

- Explanations of Benefits (EOBs).
- Alerts about when your claims are processed.
- Personalized information about your health.
- Your plan newsletter.
- Updated information about your coverage and benefits.

Manage Your Health Online

myEmblemHealth has lots of tools to help you take care of your health and meet your personal wellness goals.

- **Health Assessment:** Gives you an overall picture of your health and shows you steps you can take to make healthy lifestyle changes. Both you and your covered dependents can fill out your own individual Health Assessment.
- **Health Action Plans:** These personalized programs help you make healthy choices and manage your health conditions. Each Action Plan is based on your personal choices to help you change things like sleep and nutrition habits or improve your blood pressure and cholesterol. They can last anywhere from a few days to a few weeks, depending on your unique needs..

myEmblemHealth Mobile App

With the **myEmblemHealth** mobile app, you have useful benefit and plan information at your fingertips. Sign in to manage your health benefits whenever and wherever you want.

The myEmblemHealth app is available for download from the App Store or from Google Play.

Your Health and Wellness Are Important to Us

We know good health is worth holding onto. That's why we want to make staying healthy as easy as possible for you, with programs, tools, and more to help you stay fit and enhance your quality of life.

In addition to your doctor's care, when you enroll in this plan, you may have access to the following services that help you and your enrolled family members stay healthy.

To see the full list, visit emblemhealth.com/stayhealthy.

- Heart disease support.
- Diabetes support.
- Preventive cancer screenings.
- Domestic and intimate partner violence victim support and resources.
- Pregnancy management and support after giving birth.
- Help to stop smoking.
- Chronic obstructive pulmonary disease (COPD) support.
- Checkups and immunizations for children and adults.

We know good health is worth holding onto. That's why we want to make staying healthy as easy as possible for you, with programs, tools, and more to help you stay fit and enhance your quality of life.

More Than Just Coverage

In addition to your doctor's care, when you enroll in this plan, you'll have access to a range of services, programs, and discounts that help you and your enrolled family members stay healthy, including:

- **Wellness Programs** that provide you with a personalized approach to managing your health and wellbeing.
- Healthy Futures, a program with helpful resources, education, and support for expecting mothers.
- Tobacco-Free Ouit Smoking Program, designed to help you quit smoking and tobacco use for good.
- **Care Management**, available to EmblemHealth members, at no additional cost, who have multiple health conditions or behavioral health issues.
- Telehealth, so you can see a doctor anytime, day or night, on a computer, mobile device, or phone.

Learn more about all our <u>benefits and programs</u>. We also have helpful health information on a range of topics like preventive health guidelines, and managing chronic conditions like asthma and diabetes on our <u>Live Well</u> site.



Mental Health and Substance Use

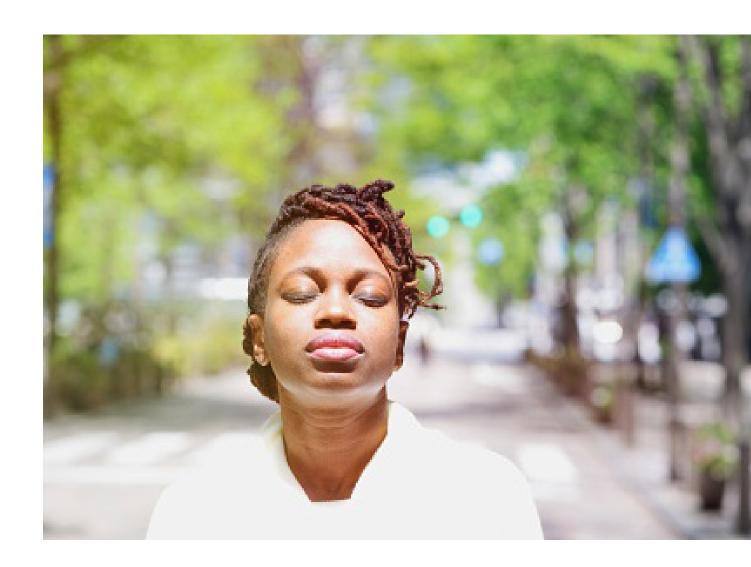
Dealing with life's ups and downs is difficult. And this year, living in the time of coronavirus (Covid-19) has made it more important than ever to remember that caring for your mind is just as important as caring for your body.

Maybe you're going through a divorce, recently had a death in the family, have been diagnosed with a chronic illness, or are struggling with the effects of COVID-19 on your family life. Or, perhaps you have been drinking alcohol more often or fear you have developed an addiction problem.

Don't worry — we're here to help. Our Emblem Behavioral Health Services program can help you understand your coverage for behavioral health and substance use treatments and explain your eligibility for additional support services and programs.

To find out more about the mental health and substance abuse services we offer, visit our <u>Mental Health</u> and <u>Substance Use</u> page.

For more information about COVID-19, visit Coronavirus (COVID-19) Frequently Asked Questions.





Healthy Futures Program: Understanding Your Health Needs During Pregnancy

It's important to take good care of yourself and your baby during your pregnancy. That's why we offer the **Healthy Futures Program***, at no additional cost to you. This program can help you better understand your pregnancy and your health needs. We can work with your doctor or midwife to make sure you have the healthiest pregnancy possible.

The program includes:

- Weekly emails with pregnancy tips, resources, and program updates starting from 20 weeks all the way through your delivery and postpartum care. These emails will include nutritious recipes, tips to increase your physical activity, what to pack in your hospital bag and more.
- Free access to question-and-answer sessions with our medical experts, virtual meet-ups with other moms and moms-to-be, and online classes with Neighborhood Care.
- Toll-free telephone access to a nurse who can answer your questions about pregnancy, child care, family planning, and more. You can call **877-444-7988**, 24 hours a day, seven days a week throughout your pregnancy, and up to six weeks after your baby is born.
- Three health assessments with a nurse case manager throughout your pregnancy. The first assessment will be done early in your pregnancy, the second one will be done about halfway through, and the third one will be done after you deliver your baby.
- Resources to help you navigate a high-risk pregnancy or your other chronic conditions.
- A free EmblemHealth onesie for your baby.

Once you become an EmblemHealth member, it's easy to join.

- Sign up for the Healthy Futures Program at emblemhealth.com/healthypregnancy.
- Call us at **888-447-0337 (TTY: 711)** Monday through Friday, from 9 am to 5 pm Resources to help you navigate a high-risk pregnancy or your other chronic conditions.



Healthy Discounts*

Just for being an EmblemHealth member, you get access to discounts on health-related services. From weight loss to massage therapy, we're here to make sure you get what you need at an affordable price.

- Weight loss services: Save on programs including Jenny Craig® and Nutrisystem®.
- **Health club memberships:** We've partnered with American Specialty Health to give you discounted health club membership rates.
- Massage therapy: Save up to 25% on therapeutic massage.
- Acupuncture therapy: Save up to 25% on acupuncture therapy.
- Registered dietitians: Save up to 25% on nutrition counseling from credentialed dietitians.
- Vitamins and natural supplements: Order online and save up to 45%.
- Hearing care: Save on hearing aid purchases and get other discounts through HearX, HearUSA, and Amplifon centers. At Amplifon centers, you also get a low-price guarantee on hearing aids, free batteries, follow-up care, screenings, and a 60-day trial period with a 100% money-back guarantee.
- Vision Affinity discount program: Get discounts on certain vision care services at participating EyeMed centers.
- Laser vision care: Save as much as 15% on laser vision correction.

For more informwbout these services, call us at the number on the back of your member ID card or visit our Healthy Discount page.

* Please note: Services included in the Healthy Discounts program are available only through participating vendors. These discount programs are not health care benefits and we do not insure them. For more about these services, please visit emblemhealth.com/healthydiscounts.







Make HIP Prime® HMO your choice today.

This booklet provides general information about the HIP health insurance program. Coverage will be subject to the terms, conditions, limitations, and exclusions set forth in the Certificate of Coverage. Refer to HIP certificate form number 155-23-HMOCERT (3/99).

55 Water Street, New York, NY 10041-8190

Important plan information

MONTH DD, YYYY

25400 JP51160 <FIRSTNAME> <LASTNAME> <ADDRESS1> <ADDRESS2> <CITY,> <STATE> <ZIPCODE> <IMB BAR CODE, IF NEEDED>

Dear <FIRSTNAME> <LASTNAME>,

When you enroll in the 2021 HIP Prime plan, you can count on:

- More than 71,000 doctors and health care professionals to choose from.
- Low out-of-pocket costs and copays (the set dollar amount you pay for health services each time you use them).
- Access to leading hospitals throughout your plan's service area.
- Benefits and services that help keep you healthy, plus discounts on weight loss programs, acupuncture, massages, and more.
- Drug coverage available through network retail pharmacies and our home delivery program.

Enclosed are the following:

- Plan Benefit Comparison: This shows there are benefit changes to your plan for 2021.
- **2021 Summary of Benefits:** This shows some of the products and services your health plan covers.

If you have any questions, visit **emblemhealth.com** or call us at **800-447-8255** (**TTY: 711**). Our hours are 8 a.m. to 6 p.m., Monday to Friday. A Customer Service representative will be happy to help.

We're committed to supporting you.

Sincerely,

George Babitsch Senior Vice President, Account Management Enclosures 55 Water Street, New York, NY 10041-8190

Important plan information

MONTH DD, YYYY

25400 JP 51160 <FIRSTNAME> <LASTNAME> <ADDRESS1> <ADDRESS2> <CITY,> <STATE> <ZIPCODE> <IMB BAR CODE, IF NEEDED>

Dear <FIRSTNAME> <LASTNAME>,

Thank you for choosing EmblemHealth.

When you enroll in the 2021 HIP Prime plan, you can count on:

- More than 71,000 doctors and health care professionals to choose from.
- Low out-of-pocket costs and copays (the set dollar amount you pay for health services each time you use them).
- Access to leading hospitals throughout your plan's service area.
- Benefits and services that help keep you healthy, plus discounts on weight loss programs, acupuncture, massages, and more.

Enclosed are the following:

- Plan Benefit Comparison: This shows there are benefit changes to your plan for 2021.
- **2021 Summary of Benefits:** This shows some of the products and services your health plan covers.

If you have any questions, visit **emblemhealth.com** or call us at **800-447-8255** (**TTY: 711**). Our hours are 8 a.m. to 6 p.m., Monday to Friday. A Customer Service representative will be happy to help.

We're committed to supporting you.

Sincerely,

George Babitsch Senior Vice President, Account Management Enclosures 55 Water Street, New York, NY 10041-8190

Important plan information

MONTH DD, YYYY

25400 JP51160 <FIRSTNAME> <LASTNAME> <ADDRESS1> <ADDRESS2> <CITY,> <STATE> <ZIPCODE> <IMB BAR CODE, IF NEEDED>

Dear <FIRSTNAME> <LASTNAME>,

Thank you for choosing EmblemHealth.

We want to let you know about your 2021 benefits. There are many advantages to being a member in the 2021 VIP Premier (HMO) Medicare plan:

- More than 71,000 doctors and health care professionals to choose from.
- Low out-of-pocket costs and copays (the set dollar amount you pay for health services each time you use them).
- Access to leading hospitals throughout your plan's service area.
- Benefits and services that help keep you healthy, plus discounts on weight loss programs, acupuncture, massages, and more.
- Drug coverage through retail pharmacies and our home delivery program.

Enclosed are the following:

- Plan Benefit Comparison: This shows there are benefit changes to your plan for 2021.
- **2021 Cost Sharing Guide:** This shows what your share of the cost is for some of the plan's products and services.

Prescription drug coverage benefit for 2021

The HIP VIP Premier Medicare plan offers drug coverage.

When you get your prescription drugs at a pharmacy that offers "preferred" cost-sharing, you will pay less for medicines and refills. Cost-sharing means that you and EmblemHealth share the costs of some services that are covered in your plan. These costs include premiums, deductibles, copayments, and coinsurance.

(Continued)

To find a "preferred" pharmacy, visit our website at **emblemhealth.com/medicare**, and look in "Find a Pharmacy." Or, call us at **877-344-7364**. Our hours are 8 a.m. to 8 p.m., seven days a week. A Customer Service representative will be happy to help.

Since your eligibility may be different than the guidelines listed in your contract, please refer to your New York State Health Insurance Program (NYSHIP) general information booklet for complete guidelines.

If you have any questions, visit **emblemhealth.com** or call us at **877-344-7364** (**TTY: 711**). Our hours are 8 a.m. to 8 p.m., seven days a week. A Customer Service representative will be happy to help.

We're committed to supporting you.

Sincerely,

George Babitsch Senior Vice President, Account Management

Enclosures



VIP PREMIER (HMO) GROUP (NYSHIP) 2021 Cost-Sharing Guide

For Medicare Members Residing in Bronx, Kings, New York, Queens, Richmond, Nassau, Suffolk, Westchester, Albany, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Rensselaer, Saratoga, Schenectady, Sullivan, Ulster, Warren and Washington Counties

Benefits	Your Cost-Sharing
Deductible – The amount you pay	
before your plan starts to pay.	\$0
Maximum out-of-pocket – The most	\$3,400 per year. This includes copays (the set dollar
you will have to pay for services. This	amount you pay for health services each time you use
does not include prescription drugs.	them) and deductibles.

Inpatient Hospital Coverage		
Inpatient hospital coverage* – You		
pay this amount if you are admitted to a	\$0	
hospital.		

Outpatient Hospital Coverage	
Ambulatory surgery*	\$0
Outpatient surgery*	\$0
Renal (Kidney) dialysis	\$0

	Doctor Visits
Primary care provider	\$0 per visit
Specialist	\$5 per visit
Routine foot care	\$5 per visit
Chiropractic care*	\$5 per visit

Preventive Care (e.g., annual	
physical exam, flu, and pneumonia	Covered in full
vaccines)	

	\$25 per visit
Emergency Care	\$0 if admitted within 1 day
	Worldwide coverage

Urgently Needed Services	\$5 per visit
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Diagnostic Services/Labs/Imaging*	
Diagnostic services including MRIs, MRAs, PET, and CAT scans	\$0
Lab tests	\$0
X-ray	\$0
Radiation therapy	\$0



VIP PREMIER (HMO) GROUP (NYSHIP) 2021 Cost-Sharing Guide

For Medicare Members Residing in Bronx, Kings, New York, Queens, Richmond, Nassau, Suffolk, Westchester, Albany, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Rensselaer, Saratoga, Schenectady, Sullivan, Ulster, Warren and Washington Counties

Hearing Services	
Medicare-covered hearing exam	\$5
Routine hearing exam	\$5 per yearly visit
Hearing aid	Plan pays up to \$500 toward the purchase of a hearing aid every 36 months

Dental Services	
Preventive dental care	Not covered
Comprehensive dental care	Not covered
Dental discount	\$5 for one examination (comprehensive or periodic) every
	6 months
	\$10 per visit for one prophylaxis (cleaning) every 6 months
	Additional services, including but not limited to
	x-rays, fillings, crowns or dentures, will be provided at a
	discounted rate subject to a fee schedule.

Vision Services	
Routine eye exam	\$5 per yearly visit
Medicare-covered eyewear	\$0 if you get a new prescription as a result of cataract surgery
Routine eyewear	\$0 for one pair of eyeglasses or contact lenses

Mental Health Services*	
Inpatient: no limit in a general	
hospital; 190-day lifetime limit in a	\$0
psychiatric facility	
Outpatient mental health therapy	\$5 per visit

Skilled Nursing Facility*	
Nursing home following hospital stay	\$0
Up to 100 days per benefit period	Prior hospital stay not required

Substance Abuse Services*	
Outpatient alcohol and substance	\$0 per vicit
abuse therapy	\$0 per visit



VIP PREMIER (HMO) GROUP (NYSHIP) 2021 Cost-Sharing Guide

For Medicare Members Residing in Bronx, Kings, New York, Queens, Richmond, Nassau, Suffolk, Westchester, Albany, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Rensselaer, Saratoga, Schenectady, Sullivan, Ulster, Warren and Washington Counties

Rehabilitation Therapies*	
Physical therapy	\$5 per visit
Speech therapy	\$5 per visit
Occupational therapy	\$5 per visit
Cardiac/pulmonary rehabilitation	\$0 per visit
Supervised exercise therapy (SET)	\$0 per visit

Transportation	
Ground ambulance	\$0 per trip
Routine transportation	Not covered

Part B Drugs* \$0	Part B Drugs*	\$0
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Prescription Drug Coverage					
Tier Level	Initial Coverage and Coverage Gap \$0 – \$6,550			Catastrophic Over \$6,550	
	At Preferred Pharmacies 30-day supply	At Standard Pharmacies 30-day supply	Mail Order 90-day supply	You Pay	
Tier 1: Generic	\$0	\$5	\$0	\$3.70 or 5% of the cost	
Tier 2: Preferred Brand	\$0	\$5	\$0	\$9.20 or 5% of the cost	
Tier 3: Non-Preferred Drug	\$45	\$45	\$67.50	\$3.70, \$9.20 or 5% of the cost	

Other Benefits			
Durable medical equipment (DME)*	\$0		
Diabetic supplies and services	\$5		
(non-Part D)			
Home health care (non-custodial) *	\$0		
Acupuncture	\$5 per visit		
	Up to 20 visits per year for chronic low back pain		
Fitness benefit - SilverSneakers®	Not covered		



VIP PREMIER (HMO) GROUP (NYSHIP) 2021 Cost-Sharing Guide

For Medicare Members Residing in Bronx, Kings, New York, Queens, Richmond, Nassau, Suffolk, Westchester, Albany, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Rensselaer, Saratoga, Schenectady, Sullivan, Ulster, Warren and Washington Counties

Hospice care	Not covered
Private duty nursing	Not covered
Over-the-counter medication (OTC)	Not covered
Telehealth	PCP: \$0 per visit
	Specialist: \$5 per visit
	Individual Session - Mental Health: \$5
	Individual Session - Psychiatry: \$5
	Individual Session - Substance Abuse: \$0;
	Unlimited visits

^{*} Prior authorization rules may apply.

IMPORTANT INFORMATION

You can find a full list of the preventive services in your Evidence of Coverage (EOC) at emblemhealth.com/Medicare.

All services covered in this cost-sharing guide are subject to medical necessity review.

For an actual description of your benefits, including exclusions, limitations or specific conditions, see your 2021 Medicare Plan EOC. In the event of a discrepancy between the information contained in the guide and the provisions of your 2021 Medicare EOC, the specific provisions of the EOC shall prevail over the cost-sharing guide.

This information is not a complete description of benefits. Call 877-344-7364 (TTY: 711) for more information.

If you have questions, or want to request a copy of the EOC, call Customer Service at 877-344-7364 (TTY: 711). Our hours are 8 a.m. to 8 p.m., seven days a week. Or, visit us at emblemhealth.com/medicare.





VIP Premier (HMO) Medicare Plan Benefit Comparison

For New York State Employees — 2020 TO 2021

There are benefit changes to your VIP Premier (HMO) plan for 2021.

MODIFIED BENEFIT	2020 BENEFIT LEVEL	2021 BENEFIT LEVEL
Outpatient Mental Health Therapy	\$0 per visit	\$5 per visit
Acupuncture	N/A	\$5 Copay per visit; Up to 20 visits per year for chronic low back pain
Telehealth	N/A	PCP: \$0 Copay Specialist: \$5 Copay Individual Session - Mental Health: \$5 Copay Individual Session - Psychiatry: \$5 Copay Individual Session - Substance Abuse: \$0 Copay; Unlimited visits
Prescription Drug Coverage		
Initial Coverage and Coverage Gap	\$0 - \$6,350	\$0 - \$6,550
Catastrophic Coverage: Tier 1 – Generic	Catastrophic Coverage over \$6,350 You Pay: \$3.46 or 5% of the cost	Catastrophic Coverage over \$6,550 You Pay: \$3.70 or 5% of the cost
Catastrophic Coverage: Tier 2 – Preferred Brand	Catastrophic Coverage over \$6,350 You Pay: \$8.95 or 5% of the cost	Catastrophic Coverage over \$6,550 You Pay: \$9.20 or 5% of the cost
Catastrophic Coverage: Tier 3 – Non-Preferred Drug	Catastrophic Coverage over \$6,350 You Pay: \$3.46, \$8.95 or 5% of the cost	Catastrophic Coverage over \$6,550 You Pay: \$3.70, \$9.20 or 5% of the cost



55 Water Street, New York, NY 10041-8190

Important plan information

MONTH DD, YYYY

25400 JP51160 <FIRSTNAME> <LASTNAME> <ADDRESS1> <ADDRESS2> <CITY,> <STATE> <ZIPCODE> <IMB BAR CODE, IF NEEDED>

Dear <FIRSTNAME> <LASTNAME>,

Thank you for choosing EmblemHealth.

We want to let you know about your 2021 benefits. There are many advantages to being a member in the 2021 VIP Premier (HMO) Medicare plan:

- More than 71,000 doctors and health care professionals to choose from.
- Low out-of-pocket costs and copays (the set dollar amount you pay for health services each time you use them).
- Access to leading hospitals throughout your plan's service area.
- Benefits and services that help keep you healthy, plus discounts on weight loss programs, acupuncture, massages, and more.

Enclosed are the following:

- Plan Benefit Comparison: This shows there are benefit changes to your plan for 2021.
- **2021 Cost Sharing Guide:** This shows what your share of the cost is for some of the plan's products and services.

Since your eligibility may be different than the guidelines listed in your contract, please refer to your New York State Health Insurance Program (NYSHIP) general information booklet for complete guidelines.

If you have any questions, visit **emblemhealth.com** or call us at **877-344-7364** (**TTY: 711**). Our hours are 8 a.m. to 8 p.m., seven days a week. A Customer Service representative will be happy to help.

(Continued)

We're committed to supporting you.

Sincerely,

George Babitsch Senior Vice President, Account Management

Enclosures



VIP Rx Carveout (HMO) Group (NYSHIP)

2021 Cost-Sharing Guide

For Medicare Members Residing in

Richmond, Nassau, Bronx, Kings, New York, Queens,

Suffolk Westchester Albany Columbia Delaware

Suffolk, Westchester, Albany, Columbia, Delaware,
Dutchess, Greene, Orange, Putnam, Rensselaer,
Saratoga, Schenectady, Sullivan, Ulster, Warren and
Washington counties

Benefits	Your Cost-Sharing
Deductible – The amount you pay	
before your plan starts to pay.	\$0
Maximum out-of-pocket – The most	\$3,400 per year. This includes copays (the set dollar
you will have to pay for services. This	amount you pay for health services each time you use
does not include prescription drugs.	them) and deductibles.

Inpatient Hospital Coverage		
Inpatient hospital coverage* – You		
pay this amount if you are admitted to	\$0	
a hospital.		

Outpatient Hospital Coverage				
Ambulatory surgery*			\$0	
Outpatient surgery*			\$0	
Renal (Kidney) dialysis			\$0	

	Doctor Visits
Primary care provider	\$0 per visit
Specialist	\$5 per visit
Routine foot care	\$5 per visit
Chiropractic care*	\$5 per visit

Preventive Care (e.g., annual	
physical exam, flu, and pneumonia	Covered in full
vaccines)	

	\$25 per visit
Emergency Care	\$0 if admitted within 1 day
	Worldwide coverage

Urgently Needed Services \$5 per visit

Diagnostic Services/Labs/Imaging*	
Diagnostic services including MRIs, MRAs, PET, and CAT scans	\$0



VIP Rx Carveout (HMO) Group (NYSHIP) 2021 Cost-Sharing Guide For Medicare Members Residing in

Richmond, Nassau, Bronx, Kings, New York, Queens, Suffolk, Westchester, Albany, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Rensselaer, Saratoga, Schenectady, Sullivan, Ulster, Warren and Washington counties

Lab tests	\$0	
X-ray	\$0	
Radiation therapy	\$0	
Hearing Services		
Medicare-covered hearing exam	\$5	
Routine hearing exam	\$5 per yearly visit	
Hearing aid	Plan pays up to \$500 toward the purchase of a hearing aid every 36 months	

Dental Services		
Preventive dental care	Not covered	
Comprehensive dental care	Not covered	
Dental discount	\$5 for one examination (comprehensive or periodic)	
	every 6 months	
	\$10 per visit for one prophylaxis (cleaning) every 6	
	months	
	Additional services, including but not limited to	
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Routine eye exam	\$5 per yearly visit	
Medicare-covered eyewear	\$0 if you get a new prescription as a result of cataract surgery	
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Mental Health Services*	
Inpatient: no limit in a general	
hospital; 190-day lifetime limit in a	\$0
psychiatric facility	
Outpatient mental health therapy	\$5 per visit

Skilled Nursing Facility*	
Nursing home following hospital stay	\$0
Up to 100 days per benefit period	Prior hospital stay not required



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2021 Cost-Sharing Guide
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Substance Abuse Services*	
Outpatient alcohol and substance abuse therapy	\$0 per visit

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Physical therapy	\$5 per visit	
Speech therapy	\$5 per visit	
Occupational therapy	\$5 per visit	
Cardiac/pulmonary rehabilitation	\$0 per visit	
Supervised exercise therapy (SET)	\$0 per visit	

Transportation	
Ground ambulance	\$0 per trip
Routine transportation	Not covered

Part B Drugs*	\$0
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Other Benefits		
Durable medical equipment (DME)*	\$0	
Diabetic supplies and services	\$5	
(non-Part D)		
Home health care (non-custodial)*	\$0	
Acupuncture	\$5 per visit	
	Up to 20 visits per year for chronic low back pain	
Fitness benefit - SilverSneakers®	Not covered	
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Over-the-counter medication (OTC)	Not covered	
Telehealth	PCP: \$0 per visit	
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	Individual Session - Mental Health: \$5	
	Individual Session - Psychiatry: \$5	
	Individual Session - Substance Abuse: \$0;	
	Unlimited visits	

^{*} Prior authorization rules may apply.



VIP Rx Carveout (HMO) Group (NYSHIP)

2021 Cost-Sharing Guide
For Medicare Members Residing in
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Dutchess, Greene, Orange, Putnam, Rensselaer,
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ANDREW M. CUOMO Governor LOLA W. BRABHAM Commissioner

September 15, 2020

Mr. George Babitsch Senior Vice President, Account Management EmblemHealth 55 Water Street New York, NY 10041

VIA U.S. POSTAL MAIL & ELECTRONIC MAIL:

gbabitsch@emblemhealth.com

RE: Clarification Request #2 - Solicitation entitled: "Health Maintenance Organizations Specifications for the New York State Health Insurance Program"

Dear Mr. Babitsch:

On July 24, 2020, Health Insurance Plan of Greater New York (dba EmblemHealth) submitted a proposal in response to the Department of Civil Service's above solicitation. In addition to the clarifying questions sent to you on August 18, 2020, the Department is requesting the following clarifying information:

Technical Proposal:

1. Please confirm that TeleDoc® services are not factored into the current premium rates that are under consideration for the NYSHIP plans. The Department, in consultation with the JLMC, is unwilling to incur additional premium costs on behalf of NYSHIP enrollees for enhanced telemedicine or telehealth services. If EmblemHealth is amenable to including this service at no additional premium cost, the Department and JLMC would offer no objection.

A response to this request is due no later than September 21, 2020. Your response should be sent to the Department at DCSprocurement@cs.ny.gov. We look forward to your timely response and advancing to the next stage of the implementation process.

Sincerely

James DeWan

Director

Employee Benefits Division



Health Maintenance Organizations Specifications for the New York State Health Insurance Program (NYSHIP)

September 17, 2020

Submitted to:

New York State Department of Civil Service

Attn: Jim DeWan, Director, Employee Benefits Division

Swan Street Building Core 1 Albany, New York 12239 **Phone:** (518) 473-1977

Email: DCSprocurement@cs.ny.gov





Disclaimer Information

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EmblemHealth benefit plans are underwritten by Group Health Incorporated (GHI), Health Insurance Plan of Greater New York (HIP), and HIP Insurance Company of New York.

GHI, HIP, HIP Insurance Company of New York, and EmblemHealth Services Company, LLC are all EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to EmblemHealth companies.

Corporate Headquarters

EmblemHealth 55 Water Street New York, NY 10041 emblemhealth.com

Contact Information

Bonnie Benson

Director, Account Management

Phone: (518) 446-8024

Email: bbenson@emblemhealth.com



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A. Clarifying Question: Technical Proposal

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Confirmed. Teladoc services have not been factored into our premium rates. To avoid further costs, EmblemHealth is hereby removing the Teladoc option.



Better care. Better value. Better outcomes. For everyone.

Contact: Bonnie Benson

Director, Account Management Phone: (518) 446-8024

Email: bbenson@emblemhealth.com