

Dear City of New York Employee or Non-Medicare Eligible Retiree:

Through the joint efforts of the City of New York Office of Labor Relations and the City’s Unions, represented by the Municipal Labor Committee, there are important changes to your GHI Comprehensive Benefits Plan (CBP) and Empire BlueCross BlueShield Plan effective on July 1, 2016. Please read this notification carefully and keep it with your important papers.

GHI CBP Medical Plan

The GHI CBP program will:

- Enhance coverage to provide for **in-network** preventive services* (such as those listed below.)
 - Routine physicals
 - Immunizations
 - Colonoscopies
 - Mammograms
 - Birth control prescriptions and other preventive prescriptions as listed on **emblemhealth.com/city**

These services will be available with **\$0** copayments. Visit **emblemhealth.com/city** for a full list of preventive services.

- Allow for a **\$0** copayment when you visit a primary care physician (PCP) or specialist affiliated with the multispecialty physician practice of AdvantageCare Physicians (ACPNY). For more information, visit **emblemhealth.com/city** or **acpny.com**.
- Increase or decrease copayments for certain in-network services. (Refer to the table below.)

Benefits Summary	Current Copay	July 1, 2016 Copay	Out-of-Network Cost
ACPNY PCP	\$15 copay	\$0 copay	There will be no changes to your current out-of-pocket costs. You will still pay any applicable out-of-network cost-sharing plus the difference between the provider’s fee and GHI’s reimbursement (which may be substantial.)
ACPNY Specialist	\$20 copay	\$0 copay	
All other PCPs	\$15 copay	\$15 copay	
All other specialty providers	\$15 or \$20 copay	\$30 copay	
Urgent Care	\$15 copay	\$50 copay	
Diagnostic/Lab	\$15 copay	\$20 copay	
MRI/CAT/Hi-Tech Radiology	\$15 copay	\$50 copay	
Physical Therapy	\$15 copay	\$20 copay	

For a list of Primary Care Physicians, please visit **emblemhealth.com/city**.

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Empire BlueCross BlueShield Hospitalization Plan

Benefits Summary	Current Copay	July 1, 2016 Copay	NOTE
Emergency Room	\$50 copay	\$150 copay	Waived if admitted to hospital within 24 hours

Reminder: New Pre-certification Requirements

As we previously communicated, many procedures require pre-certification. Your provider should call NYC Healthline at **1-800-521-9574** for pre-certifications including:

- In-patient admissions
- Within 48 hours of an emergency admission
- Ambulatory surgery
- Physical and speech therapy after the 16th visit

Maximum Out-of-Pocket (MOOP)

MOOP refers to the maximum amount of in-network cost-sharing expenses that you will pay in each plan year for covered services/essential health benefits received from Participating Providers under the GHI/Empire BlueCross BlueShield plans combined. MOOP includes deductibles, coinsurance and copay charge amounts that you must pay for covered in-network services and any applicable riders in a policy year. Cost-sharing amounts attributable to services received from Non-Participating Providers generally do not count toward MOOP. Amounts incurred for non-covered services and other non-covered expenses, such as amounts in excess of plan allowances as well as any financial penalties do not count toward MOOP. Premiums and/or premium contributions also do not count toward MOOP. The MOOP amount may change from plan year to plan year**.

For July 1, 2016 – December 31, 2016

	Individual MOOP	Family MOOP
GHI Medical MOOP	\$2,175	\$4,350
EBCBS Hospital MOOP	\$1,250	\$2,500

For calendar years beginning January 1, 2017 – December 31, 2017** (*Subject to indexing by the federal government*)

	Individual MOOP	Family MOOP
GHI Medical MOOP	\$4,550	\$9,100
EBCBS Hospital MOOP	\$2,600	\$5,200

Telehealth

Effective July 1st, you will have access to a telehealth benefit through American Well (AmWell) for a \$15 copayment. This is a telehealth company which uses technology that allows you to access remote clinical health care via online video interaction or telephone. This service is *not* a substitute for visiting your PCP, but rather an alternative method for receiving care for minor, everyday ailments which may not require a visit to your doctor. For more information regarding this new benefit visit **emblemhealth.amwell.com**.

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Member ID Cards

Your new member ID card will be mailed to you approximately 10 days prior to the July 1, 2016 effective date of your plan changes. Please begin using it when claiming benefits, and be sure to destroy your previous card once you receive your new one.

Questions?

If you have any questions about the changes to your GHI CBP medical benefits, please call EmblemHealth Customer Service at **1-800-624-2414**, Monday to Friday, 8 am to 6 pm (closed on weekends.) If you have a hearing or speech impairment and use a TTY/TDD, please call 711. Or, visit the website at **emblemhealth.com/city**. You can also visit the City of New York Office of Labor Relations at **NYC.gov/olr**.

If you have any questions about changes to your Empire BlueCross BlueShield hospital benefits, call **1-800-433-9592**. Or visit the website at **empireblue.com/nyc**.

Additional Enhancements

Zocdoc

This is an online service you can use to find and book in-network doctors' appointments, often for the same day. For more information regarding this new benefit visit **zocdoc.com/nyc**.

Weight Watchers

Beginning June 1, 2016, employees will be able to take advantage of special NYC employee pricing, along with monthly discounted pricing when they join Weight Watchers. You will be able to attend meetings in your workplace, where available, and unlimited meetings in your local community or follow the plan online with digital and mobile tools through *Weight Watchers OnlinePlus*.

Weight Watchers Meetings		Weight Watchers OnlinePlus	
Special Monthly Pricing	\$30.00	Special Monthly Pricing	\$14.00
NYC/Union Contribution	<u>15.00</u>	NYC/Union Contribution	<u>7.00</u>
Employee Monthly Cost	\$15.00	Employee Monthly Cost	\$ 7.00

In addition, your spouse/domestic partner will be able to take advantage of the Special Monthly Pricing. Visit **NYC.gov/olr** for more information.

**Coverage is available for preventive health services, including the services listed above at times and frequencies recommended by the following sources: Services that have an "A" or "B" rating from the United States Preventive Services Task Force; immunizations pursuant to the Advisory Committee on Immunization Practices ("ACIP") recommendations; preventive care and screenings for infants, children and adolescents provided for in comprehensive guidelines supported by the Health Resources and Services Administration ("HRSA"); and preventive care and screenings for women provided for in comprehensive guidelines supported by "HRSA"*

Dear City of New York Employee or Non-Medicare Eligible Retiree:

Through the joint efforts of the City of New York Office of Labor Relations and the City's Unions, represented by the Municipal Labor Committee, there are important updates to your HIP HMO plan that will become effective on July 1, 2016. Please read this notification carefully and keep it with your important papers.

Your HIP HMO plan continues to offer you \$0 copayments for office visits when you choose a Preferred Primary Care Physician (PCP) provider from the Prime Network. If you choose a non-preferred PCP provider within the Prime Network, you will have modest copayments for services.

How the plan works

- As a HIP HMO member, you are required to select a participating PCP. When you choose a preferred PCP from among the participating providers, you will have no copayment for primary and specialty care office visits. Additional services, such as diagnostic and lab tests, will also be provided with no copayment.
- If you choose a PCP that is not a preferred provider, you will have a \$10 copayment for primary care and specialty office visits, and diagnostic and lab tests.
- To see a list of participating and preferred providers, visit emblemhealth.com/city.

Effective July 1, 2016, your plan will be administered as follows:

PCP Selection	PCP Copay	Specialist Copay (when referred by a PCP)*
Preferred Provider	\$0	\$0
All other participating PCPs in the Prime Network	\$10	\$10

* Some services, regardless of PCP selection, have a different copay level, such as emergency, ambulatory surgery and hospital care.

Member ID Cards

- **Preferred PCP**
If you are currently using a preferred PCP, you may continue to use the member ID card you already have.
- **Non-Preferred PCP**
If you choose a non-preferred PCP, your new member ID card will be mailed to you approximately 10 days prior to the July 1, 2016 effective date of your new plan. Please begin using it when claiming benefits, and be sure to destroy your previous card once you receive your new one.

Questions?

If you have any questions about your new HIP HMO Preferred plan, call **1-800-447-8255**, Monday to Friday, 8 am to 6 pm (closed on weekends.) If you have a hearing or speech impairment and use a TTY/TDD, please call 711. Or, visit our website at emblemhealth.com/city. You can also visit the City of New York Office of Labor Relations website at NYC.gov/olr.

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Special Monthly Pricing	\$30.00	Special Monthly Pricing	\$14.00
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<i>Employee Monthly Cost</i>	<i>\$15.00</i>	<i>Employee Monthly Cost</i>	<i>\$ 7.00</i>

In addition, your spouse/domestic partner will be able to take advantage of the Special Monthly Pricing. Visit NYC.gov/olr for more information.

**City of New York and MLC Health Benefits
Plan Modifications for Active Employees
and Non-Medicare Eligible Retirees
Effective July 1, 2016**

The Detectives' Endowment Association along with the Municipal Labor Committee (MLC) have worked with the City's Office of Labor Relations to fulfill our last collectively bargained agreement where all parties agreed to health care savings. Specifically, this agreement required a \$3.4 billion savings over a 4 year period and in return City workers and retirees would continue to have access to health coverage without an annual premium. We are pleased to report that we have been successful in achieving our target savings to date and your zero premium will continue.

In order to achieve the required savings, there will be upcoming changes to the health care plans negotiated by the City and MLC. These changes will be effective July 1, 2016 for all active employees and non-Medicare eligible retirees.

- **GHI subscribers currently pay \$15 for Primary Care Physicians and this will not change. Members who use physicians at the Advantage Care Physicians (ACP) offices will have no co-pay.** There are 36 ACP centers owned by Emblem Health in the New York City area with more centers coming soon. New Bronx locations will be announced soon with expansions also planned for Westchester, Rockland and other northern counties.
- **GHI subscribers will also have \$0 co-pays for preventive health. All preventive health services, including prescriptions for birth control, immunizations, mammography, pre-natal vitamins and colonoscopies will be available at no cost to members.** Emblem Health will be mailing further detailed information to its subscribers in the months ahead.
- The most expensive form of care are hospital based emergency room visits. The average ER visit is many time more expensive then a typical physician's office visit or urgent care facility. Further, Emblem Health data presented to the City and MLC shows significant over-utilization of emergency rooms by many city employees and retirees.
To discourage use of ERs when a physician's office visit would suffice and be more appropriate, the co-pay for hospital-based emergency room visits will increase from \$50 to \$150.
- * **NOTE: There is \$0 co-pay if you visit a physician at Emblem Health's Advantage Care Physicians offices or a participating Urgent Care facility with a \$50 co-pay.**
- Wellness Programs will be introduced in the upcoming months and will include Telemedicine that will allow members immediate access to an internet-based physician that can guide their care and also provide a prescription if necessary.

Also City Health Plan subscribers will soon be able to join Weight Watchers at a substantial 50% discount. More information to follow.

- HIP/HMO subscribers will have a new plan introduced to them called HIP Preferred. HIP subscribers can continue to use their HIP physician with a \$0 co-pay if a HIP Preferred Network physician is used. HIP subscribers will have a \$10 co-pay if their physician is not in the HIP Preferred Network.

*NOTE: Presently 65% of HIP Physicians are part of the HIP Preferred Network of Physicians.

The Chart below reflects the GHI-CBP co-pay changes effective July 1, 2016:

<u>GHI-CBP Plan</u>	<u>Current Co-Pay</u>	<u>New Co-Pay</u>
Primary Care Physician - PCP (GHI Participating Provider)	\$15	\$ 15
Advantage Care Physician - ACP (Generalist PCP)	\$15	\$ 0
Advantage Care Physician - ACP (Specialist)	\$20	\$ 0
Non-Advantage Care Physician (Surgical Specialists)	\$20	\$ 30
All other Specialists	\$20	\$ 30
Emergency Room	\$50	\$150
Urgent Care Facility	\$15	\$ 50
MRI/CT (Hi-Tech Radiology)	\$15	\$ 50
Diagnostic Lab (Blood, X-Ray, etc)	\$15	\$ 20
Physical Therapy	\$15	\$ 20
All Preventive Services under the Affordable Care Act including Immunizations, Colonoscopy and Prescriptions for Contraception	N/A	\$ 0

The Chart below reflects the HIP co-pay changes effective July 1, 2016:

<u>HIP HMO PLAN</u>	<u>Current Co-pay</u>	<u>New Co-pay</u>
HIP Preferred Network (New)	\$ 0	\$ 0
HIP Non-Preferred Physician	\$ 0	\$ 10

To learn more about Emblem Health www.emblemhealth.com and Emblem Health Advantage Care Physicians www.acpny.com please visit their websites.

The DEA will provide updated information to our members via our website as it becomes available. If you have any questions do not hesitate to contact our Health Benefits office at (212) 587-9120.