



New York State Correctional Officers & Police Benevolent Association, Inc.

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TO: NYSOPBA Chief Sector Stewards –
Southern Region and Mid-Hudson Region

FROM: Sharon Smith, Health Benefits Specialist

DATE: November 1, 2010

RE: Empire Plan/Blue Cross/Blue Shield Hospital Network
Empire Blue Cross/Blue Shield HMO

This memo is a follow-up to a letter members received from Empire Blue Cross/Blue Shield (affecting both the Empire Plan and their HMO product) concerning Westchester Medical Center and contract negotiations. Since no settlement was reached, Westchester no longer participates effective 11/1/10.

As a result, members covered under the Empire Plan (except in cases of emergency) will be covered out-of-network, as follows:

Services (other than cases of emergency) shall be reimbursed at 90 percent of charges and the member will be responsible for the additional 10 percent. There will be a combined annual inpatient/outpatient coinsurance maximum of \$1500 for enrollee, \$1500 for enrolled spouse/domestic partner and \$1500 for all dependent children combined for non-network hospital services. This coinsurance maximum cannot be combined with any coinsurance maximums for other Empire Plan components.

Covered outpatient services received at this hospital effective 11/1/10 will be reimbursed at 90 percent of charges or a \$75 copayment, whichever is greater. The non-network outpatient coinsurance will be applied toward the \$1500 annual coinsurance maximum.

Once the enrollee, enrolled spouse/domestic partner or all dependent children combined have incurred \$500 in non-network expenses, a claim may be filed with the medical carrier (United HealthCare) for reimbursement of the next \$500 in out-of-pocket expenses.

Empire Plan services received at Westchester will be reimbursed at the network level of benefits effective November 1, 2010, under the following situations only:

- cases of emergency;
- inpatient/outpatient treatment needed is only offered by one of these hospitals;
- access to a network hospital exceeds 30 miles or does not exist;
- for continuation of care for pregnancy or health risk; or
- for any services that were previously preauthorized.

Due to this termination, the following may also occur:

patients may be refused treatment for non-emergency services or elective treatment at Westchester Medical Center;

although Westchester cannot refuse emergency treatment to a patient, once the patient is stabilized, this hospital might choose to transfer the patient to another hospital;

patients may be required to make payment up front, before services are rendered at Westchester;

patients may be required to sign a guarantee of payment before receiving services which may include an outline of a payment schedule, as well as interest, that can be charged on any outstanding balance; and

Westchester will no longer be required to bill Empire Blue Cross/Blue Shield directly so enrollees may be responsible for filing claims to obtain reimbursement.

Below is a list of alternative area hospitals which continue to participate:

Columbia Presbyterian, New York, New York
Good Samaritan Hospital, Suffern, New York
Hudson Valley Hospital Center, Cortlandt Manor, NY
Jacobi Medical Center, Bronx, NY
Montefiore Medical Center, Bronx, NY
Mt. Vernon Hospital, Mt. Vernon, NY
NY Westchester Square Medical Center, Bronx, NY
North Central Bronx Hospital, Bronx, NY
Nyack Hospital, Nyack, NY
Sound Shore Medical Center, New Rochelle, NY
St. John's Riverside Hospital, Yonkers, NY
St. Joseph's Medical Center, Yonkers, NY
Lawrence Hospital, Bronxville, NY
Phelps Memorial Hospital, Sleepy Hollow, NY
Northern Westchester Hospital, Mt. Kisco, NY
White Plains Hospital, White Plains, NY

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Members covered under the HMO product should check with their plan for alternative facilities.

Please share this information with your membership.

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cc: NYSCOPBA Executive Board
NYSCOPBA Jt. Committee of Health Benefits