

## **FAQ for City of New York retirees moving to NYC Medicare Advantage Plus for Medicare Advantage PPO network sharing**

### **Q. What is changing for current City of New York retirees?**

**A. Effective April 1, 2022**, more than 200,000 Medicare-eligible City of New York retirees will transition to the NYC Medicare Advantage Plus plan. This plan is offered through an alliance between Empire BlueCross BlueShield (Empire) and EmblemHealth.

### **Q. What plans were retirees enrolled in prior to April 1, 2022?**

**A.** Prior to April 1, 2022, the majority of City of New York retirees received Part A (Hospital) and Part B (Professional) services through Traditional Medicare and supplemental Part A benefits through Empire and Part B benefits through EmblemHealth. Under the NYC Medicare Advantage Plus PPO plan, City of New York retirees will have one cobranded member ID card to access their Medicare benefits.

### **Q. What network is available for NYC Medicare Advantage Plus retirees?**

**A.** Retirees enrolled in NYC Medicare Advantage Plus have access to BlueCross BlueShield Medicare Advantage PPO Network Sharing effective April 1, 2022.

NYC Medicare Advantage Plus is a Medicare Advantage PPO plan offered only to City New of York retirees. Due to the unique plan name, providers may not immediately recognize the plan when a member inquires about the provider's participation status with NYC Medicare Advantage Plus.


Providers participating for **Medicare Advantage PPO** with a local Blue Plan are considered participating in BlueCross BlueShield Medicare Advantage PPO network sharing. NYC Medicare Advantage Plus members will be extended the same contractual access to care as local Medicare Advantage PPO members, and providers will be reimbursed in accordance with their negotiated rate with their local Blue Plan contract. These members will receive in-network benefits in accordance with their member contract.

\* LiveHealth Online is the trade name of Health Management Corporation, an independent company, providing telehealth services on behalf of Empire BlueCross BlueShield. Tivity Health, Inc. is an independent company providing the SilverSneakers fitness program on behalf of Empire BlueCross BlueShield. Availity, LLC is an independent company providing administrative support services on behalf of Empire BlueCross BlueShield.

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NYC Medicare Advantage Plus (PPO)  
The City of New York Health Benefits Program

Member ID:	
Group:	NY037GR
Issuer ID (80840):	
Part B RxBIN:	
Part B RxPCN:	
Part B RxGroup:	
RxID:	CMS H4036-816

Office Visit Copay:	\$0
Specialist Visit Copay:	\$15
Emergency Room Copay:	\$50
Preventive Copay:	\$0



The **MA** in the suitcase indicates a member who is covered under the Medicare Advantage PPO network sharing program. Members have been asked not to show their traditional Medicare ID card when receiving services; instead, members should provide their NYC Medicare Advantage Plus member ID.

**Q. What type of plan is NYC Medicare Advantage Plus?**

**A.** The NYC Medicare Advantage Plus plan is a Medicare Advantage PPO plan that allows retirees to receive services from both participating and nonparticipating providers. Nonparticipating providers must be eligible to receive Medicare payment to provide care to NYC retirees. Under this new plan, City of New York retirees will have no difference in cost share for both participating and nonparticipating providers. NYC Medicare Advantage Plus offers the same hospital and medical benefits Medicare covers as well as additional benefits Medicare does not provide such as an annual routine physical exam, hearing, health and fitness tracker, LiveHealth Online\* and SilverSneakers.\*

**Q. Does a provider have to be participating to see NYC Medicare Advantage Plus retirees?**

**A.** No, the NYC Medicare Advantage Plus plan is a PPO plan which allows members to get care from both participating and nonparticipating providers. NYC Medicare Advantage Plus members can see any Medicare healthcare provider.

**Q. How are participating providers reimbursed?**

**A.** Reimbursement is based on a provider's contracted rate with their local Blue plan. For details, participating providers should review their contract.

**Q. How are nonparticipating providers reimbursed?**

**A.** Nonparticipating providers are reimbursed according to the local Original Medicare fee schedule.

**Q. Where do providers send claims?**

**A.** Beginning April 1, 2022, under the NYC Medicare Advantage Plus plan, providers will change billing processes as follows:

- Providers will submit all claims (facility, professional & ancillary) to their Local Blue Plan.
- Providers will **not** transmit any claims to Original Medicare or EmblemHealth.
- **Claims can be submitted electronically or paper (UB-04 or CMS-1500 form) to their local Blue plan.**

**Q. What is the prefix for NYC Medicare Advantage Plus?**

**A.** NYC Medicare Advantage Plus retirees can be identified by the prefix **N6Y** which is a change from the existing prefix, NYC.

**Q. How do I verify eligibility and benefits for the member?**

A. Member eligibility and benefits can be verified both online and over the phone:

- **Online:** Eligibility, benefits, claims, commonly used forms, and remit information are all available through your local Blue Provider Portal.
- **Phone:** Call BlueCard Eligibility at **800-676-BLUE (2583)** and provide the member's prefix located on the ID card.

**Q. Is a prior authorization required?**

A. Some services require prior authorization and it is the responsibility of participating providers to request prior authorization. Nonparticipating providers are not required to request prior authorization, but it is recommended.

Providers can use [availity.com](https://www.availity.com) to review prior authorization requirements and can use Availity\* as the preferred method for submitting prior authorization requests.

**Q. Can members be balance billed for services?**

A. No, providers may not balance bill the member. Members may only be billed for any deductibles, coinsurance, and/or copays.