Navigating NYSHIP
Qualifying for and Enrolling in NYSHIP

You qualify for NYSHIP if you are: 1.) a current matriculated doctoral student, 2.) working under one of the qualifying titles: Graduate Assistant A, B, C, or D; Adjunct Instructor; Adjunct Lecturer; Adjunct College Laboratory Technician (CLT); or Non-Teaching Adjunct I or II, and 3.) you earn at least $2,061 a semester (adjuncting one course per semester makes you eligible).

NYSHIP Enrollment should be part of your hiring package; if not, contact the CUNY Grad Center NYSHIP Coordinator, Scott Voorhees (svoorhees@gc.cuny.edu).
Maintaining Coverage

If your employment title changes, you need to fill out a change of title form. Scott Voorhees (svoorhees@gc.cuny.edu) usually sends an email notice about this form each fall.

You can enroll a spouse and/or dependents in NYSHIP at any time, but there will be a 30 day waiting period unless enrollment is done during the open enrollment period (usually November).
NYSHIP Basics

NYSHIP = The New York State Health Insurance Program

SEHP = Student Employee Health Plan

"The Empire Plan"

Administered by the New York State Department of Civil Service to CUNY and SUNY graduate students

1-877-769-7447

When you call NYSHIP, always specify that you have NYSHIP under the Student Employee Health Plan (SEHP)

www.cs.ny.gov
"NYSHIP" is NOT your insurance carrier!

- UnitedHealthCare (Medical/Surgical/Chiro/PT/Lab)
- OptumHealth/UHC (Mental Health)
- Empire BlueCross BlueShield (Hospital)
- Davis Vision (Eyecare)
- EmblemHealth aka GHI (Dental)
- Express Scripts aka Medco (Prescriptions)
UnitedHealthCare: The Empire Plan

- Medical, surgical, mental health/substance abuse (administered through OptumHealth), chiropractic/physical therapy (administered by Managed Physical Network), labwork

- Group #030500

- UHC Options PPO

- In-network copay = $10, lab copay = $10

- In-network visits are limited to 15 per year (after that, out-of-network benefits apply: you pay the $100 deductible and 20% of the cost of the visit)

- Ambulance service is covered if emergency care is required!
Empire BlueCross BlueShield

- Hospital (in-patient, out-patient, hospice care, birthing center, diagnostic radiology including MRI/CT/PET, and emergency room or acute care visits)

- Prefix YLS

- Plan 303

- Radiology or out-patient visit copay = $15, ER copay = $25, approved in-patient hospital stay copay = $200

- Any time you enter a hospital, get preauthorization! (including for radiology and ER/urgent/acute care visits--if admitted you must call or make sure someone at the hospital does within 48 hours!!!)
Davis Vision

- Eyecare (including glasses/contact lens fittings and routine eye exams)

- Formerly Eyemed

- One routine exam and limited selection of glasses/contacts covered every two years

- Call to find out what glasses/contacts are covered

- Copay = $10 (you may have to pay more for glasses/contacts that you actually like...)
• Dental

• Formerly GHI

• This dental insurance covers very little! (e.g. only four bitewing x-rays, only metal fillings, and only two very basic cleaning visits per year are covered)

• Copay = $20 (but many dentists charge more because so little is covered!)
Express Scripts

• Drugs/Prescriptions (still part of UHC Empire Plan)

• Formerly Medco

• Prescription coverage is good! (check the website rather than the benefits summary for a complete list of covered drugs)

• You can use the mail-in service to get 3-month prescriptions at the same price as 1-month prescriptions

• Covered generic drugs are $5 (including birth control, psychopharmaceuticals, etc)
The Affordable Care Act (ACA) and Women's Health

- Women's preventive services covered with no extra copay in the ACA include:
  - Annual well-woman visits
  - Screenings and counseling for interpersonal violence, STIs, gestational diabetes
  - Contraceptive methods
  - Breastfeeding supplies, support, and counseling

- More information at www.hrsa.gov/womensguidelines
The ACA and Women's Health, The Bad News...

• Job-based insurance plans existing before March 23, 2010 are "grandfathered in" to the ACA and are not required to provide certain services, including women's preventive services.

• The NYSHIP plans do not cover these specific guidelines.

• It is unclear if the grandfathered-in plans will ever be required to add these services :(
Exclusions!!! (cases when you are not covered)

• Routine physicals (these are technically covered but the coverage is not comprehensive...there are ways around this, though...)

• Quest Laboratory (for any diagnostic labwork)

• Allergy shots

• Orthotics

• Anything you were supposed to get pre-authorization for but didn't

• An in-network doctor who you are seeing at an out-of-network location
Finding a Provider

Common Problem: an in-network provider may decline to take you on as a client.
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Solution: Try a student-recommended provider (see list), or keep calling providers...

BUT, when the medical office asks what your insurance is, remember...NYSHIP is not your insurance provider!
Common Issues

Problem: Being billed by an in-network provider beyond the copay.
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Solution: Look closely at the provider's bill to you and call them with any questions. The solution depends on whether the in-network provider purposely overbilled NYSHIP, if they are asking you to pick up the slack, or if they provided services that aren't covered. If the services that they provided are covered, then you should not pay beyond the copay.
More on How to Avoid NYSHIP Pitfalls

More on NYSHIP problems on the Open CUNY Health Blog (opencuny.org/healthdsc):

http://opencuny.org/healthdsc/navigating_nyship/avoiding_pitfalls/