

Quick Start Guide to Your Benefits

Essential

Welcome to the EmblemHealth Essential plan. We are here to help you get the most from your health care benefits. Here's what you need to know to get started:

Your Network and Your Doctor

You have in-network coverage only. As an HMO member, you must choose a primary care physician (PCP) who participates with the Enhanced Care Prime Network. This doctor will coordinate your care. Your benefits will be covered only if you see health care professionals in this network. If you see someone outside the network, you may have to pay the costs yourself. Emergency services that you receive in a hospital (e.g., hospital emergency room) are covered in- and out-of-network. A network is a group of health care professionals and facilities that contract with EmblemHealth. They provide covered products and services to members.

Be sure to check with your doctors to see if they participate in the EmblemHealth Enhanced Care Prime Network at all locations. You can use EmblemHealth's online directory to find a list of participating professionals. For more information about the network and your plan, see "How Your Coverage Works" in your Contract.

Choose a Network Doctor

- Go to emblemhealth.com/findadoctor.
- Choose your plan and click Search.
- Choose the doctor or type of doctor you're looking for, search by location or name, and click Search.
- You'll see a list of doctors. Read their profiles and find one who best meets your needs.

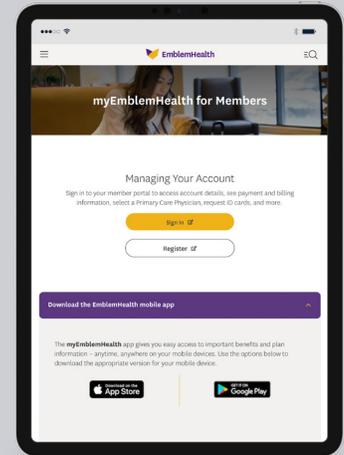
You can also request a paper directory by calling Customer Service (**800-447-8255**; **TTY: 711**). Our hours are 8 am to 6 pm, Monday through Friday. A Customer Service representative will be happy to help.

Referrals

You need written or electronic permission from your doctor before receiving care from a specialist. This is called a referral. Specialists are providers such as allergists and dermatologists who provide services other than primary care. You do not need a referral for the following specialist services:

- Primary and preventive care.
- Chiropractic services.
- Outpatient mental health services.
- Preventive and primary gynecologic (GYN) care.
- Diabetes-related eye exams from an ophthalmologist.

myEmblemHealth: Our member portal



Go paperless! Keep your health care information online in one secure, convenient place. It's easy — just set up an account on our member portal — **myEmblemHealth**.



Simply go to emblemhealth.com/sign-in, click **Register**, and fill in the required information. You'll have immediate access to your account, and will be able to see your plan benefits, find doctors and hospitals, choose a primary care doctor, request a member ID card, and much more.

On the go? Download our mobile app: **myEmblemHealth**.



(Continued)



EmblemHealth Essential Plan is underwritten by Health Insurance Plan of Greater New York (HIP) (155-23-EPPIAIAAN (01/21), 155-23-EPPINONAIAN (01/21), 155-23-EPP1VDIAIAN (01/21), 155-23-EPP1VDNONAIAN (01/21), 155-23-EPP2NONAIAN (01/21), 155-23-EPP2VDAIAN (01/21), 155-23-EPP2VDNONAIAN (01/21), 155-23-EPP2AIAN (01/21), 155-23-EPP3Aliessa (01/21), 155-23-EPP4Aliessa (01/21).

EmblemHealth insurance plans are underwritten by EmblemHealth Plan, Inc., Health Insurance Plan of Greater New York (HIP) and EmblemHealth Insurance Company.

Essential



Check out the Health Assessment (HA) tool on our member portal. To sign in, enter your user ID and password, find the “Manage Your Health” tab, and click on “Health Assessment.”

This tool gives you a “snapshot” of your current health based on how you answer the questions. You will get a personalized report with tips for improving and maintaining your health, and preventing serious illness.

Your results are confidential, but you can share them with your doctor when talking about your health care.

Need a Doctor? Consider AdvantageCare Physicians

AdvantageCare Physicians (ACPNY), part of the EmblemHealth family of companies, is a primary and specialty care practice that cares for the whole you. This means ACPNY doctors and providers consider the physical, mental, and lifestyle factors that affect your health.

With offices in all five boroughs (includes BronxDocs, an affiliate of ACPNY) and on Long Island, ACPNY offers convenient hours and same- and next-day appointments in many offices, along with related services, such as lab and radiology. Go to acpny.com to see a full list of services and locations.

Plus, ACPNY offers services that improve your care experience, including easy referrals. You’ll leave your office visit with a printed, approved referral in-hand. And, your referring specialist will already have it when you arrive for your appointment. It’s that easy.

To see a full listing of doctors and facilities in your network, go to “Find a Doctor” on emblemhealth.com.

Your Deductible

A deductible is the amount you pay before your plan starts to pay. Some services, like checkups, don’t require a deductible. For others, once you reach this amount, your plan shares the costs for your care. Your Schedule of Benefits has more details.

Prior Approval

Some inpatient and outpatient services require prior approval by EmblemHealth before you receive them. Your network provider will contact EmblemHealth to take care of this for you. Examples of these services are: inpatient non-emergency procedures; outpatient surgery; home health care; hospice care; and outpatient physical, occupational and speech therapies. See your Contract for a full list of services that require prior approval.

Cost-Sharing

You must use in-network providers to get services.

- Services such as routine checkups, immunizations, gynecologic (GYN) exams, mammograms, and prescription birth control for women are paid for in full.
- Some covered services require a copay. A copay is the set amount you pay for health services each time you use them.
- Some services are subject to coinsurance. This is the percentage you pay for health services after your deductible, when EmblemHealth begins to pay. If your plan includes a coinsurance for services, you are required to pay this directly to the provider.
- Copays, coinsurance, and deductibles are applied to the maximum out-of-pocket limit. Once you reach the maximum out-of-pocket limit, plan services are covered in full.

Lab Tests: Quest Diagnostics

Quest Diagnostics is our preferred lab. If you have lab tests in your doctor’s office, make sure they are sent to Quest. If you need to go to Quest for tests, you can set up an appointment online at questdiagnostics.com/appointment or by calling **888-277-8772**. No appointment? Walk-ins are always welcome.

Pharmacy

Your plan covers a wide range of prescription drugs. Visit emblemhealth.com/resources/pharmacy/drugs-covered to see a list of covered drugs under your plan’s formulary.

This plan has a three-tier design. This means your copays are usually lowest when you use generic drugs (Tier 1), higher when you use brand-name drugs on the formulary (Tier 2), and highest when you use brand-name drugs not on the formulary (Tier 3).

(Continued)

Essential

Adult Vision and Dental

Your Essential Plans 1 Plus, 2 Plus, 3, and 4 have adult dental and vision services offered along with medical coverage.

- Vision services are administered by EyeMed with CPS Optical. To reach an EyeMed Customer Service representative, call **877-324-6211 (TTY: 711)**, Monday to Saturday, 7:30 am to 11 pm or Sunday, 11 am to 8 pm. You can find more information on EyeMed's website at eyemed.com.
- Dental Services are administered by DentaQuest. To reach a DentaQuest Customer Service representative, call **844-776-8743 (TTY: 711)**, Monday to Friday, 8 am to 5 pm. You can find more information on DentaQuest's website at dentaquest.com.

Neighborhood Care Provides Support and Wellness in the Neighborhood

EmblemHealth Neighborhood Care locations provide in-person customer support, help in gaining access to community resources, and health and wellness programs.

From learning a language to fitness classes to diabetes management and much more — at no cost! Now with 12 locations, and new locations coming soon. **Visit emblemhealth.com/neighborhood** for locations and hours.

Questions? Call the Customer Service number on the back of your member ID card (TTY: 711), Monday to Friday, 8 am to 6 pm (excluding major holidays).

