

EMBLEMHEALTH HMO PREFERRED PLUS

Quick Start Guide to Your Benefits

Welcome to your EmblemHealth HMO Preferred Plus plan, with services provided by our Prime Network. Here are some important things you need to know:

YOUR NETWORK AND PROVIDER

This plan provides in-network coverage only. You can minimize your out-of-pocket costs for most covered services by selecting a Preferred Primary Care Provider (PCP), or you can select a participating Prime Network PCP and pay greater out-of-pocket costs. If you use an out-of-network provider, you will have to pay all of the costs yourself, except for emergency services. For more information, see “How Your Coverage Works” in your Certificate of Coverage.

When selecting a PCP or scheduling an appointment, make sure the provider is either a Preferred or participating Prime Network participating provider. If the provider has more than one office, also check that the office you’re visiting is part of the network. You can use EmblemHealth’s online provider directory to find a list of participating providers.

ABOUT ANY DEDUCTIBLE

If your plan has a deductible, you must satisfy it as described in the Schedule of Benefits. Deductibles don’t apply to the following services: outpatient mental health and substance use disorders, maternity care, acupuncture, and preventive services such as annual adult physical exams, well baby and well child exams, mammograms and prostate cancer screening. For more information, see the “Schedule of Benefits” in your Certificate of Coverage.

BENEFITS OF CHOOSING A PREFERRED PCP

If you select a Preferred PCP you will have a lower copay for primary care office visits as well as most specialist care when referred by your Preferred PCP. If you can’t find a Preferred PCP, there are many other participating PCPs within the Prime Network to choose from. For these visits you’ll have a moderate copay.

YOUR PCP’S ROLE

When you need specialty care, your PCP will send you to a specialist in your network. Your PCP or specialist will also contact us to get any needed approvals. Referrals and prior approvals are only valid for the specialist or hospital named on the referral and for a specific number of visits and length of time. You can check all of this by signing in to myEmblemHealth at emblemhealth.com. More about that later.



Register at emblemhealth.com

1. With your member ID number handy – it’s in your letter – go to emblemhealth.com/sign-in and click the “Register Now” button.
2. Once you submit this form, you’ll be able to access your account right away!
3. You’ll be able to see your benefits, check referral status, change your doctor, review claims and more.

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HOW YOUR PLAN WORKS

Selecting a Preferred PCP can help to keep costs* down:

Your PCP	PCP copay	Specialist copays when referred by your PCP
Preferred	Low	Low
Participating	Moderate	Moderate
Non-Network	Not covered	Not covered

*Some services regardless of PCP selection have a different copay level, such as emergency, ambulatory center facility and home health care. Check your schedule of benefits for more detail.

FIND A PRIME NETWORK PROVIDER



1. Go to “Find a Doctor” at emblemhealth.com/findadoctor.
2. On the Provider Search page, select the type of provider you are looking for. Enter a ZIP code to search by location or name to search by provider name.
3. Click on the “Search” button.
4. Locate a preferred PCP using the “Preferred Provider” button.
5. You will see a list of providers. Review the profiles until you find a provider who best meets your needs.

REFERRALS

You need a written or electronic referral from your PCP before receiving specialist care. Specialists are doctors 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

PRIOR APPROVAL

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

USE QUEST DIAGNOSTICS FOR LAB WORK

Remind your doctor to use Quest Diagnostics when lab testing is prescribed to ensure coverage. For added convenience, Quest now offers lab testing by appointment, which you can schedule online at questdiagnostics.com/appointment. Or, call 1-888-277-8772 and use the automated phone system to schedule your lab testing. No appointment? Walk-ins are always welcome.

CONVENIENT ACCESS TO YOUR BENEFIT INFORMATION

Manage your health care and health plan right from our website 24 hours, seven days a week! Use your secure account to:

- Find a list of participating hospitals, urgent care centers, pharmacies and labs.
- See your plan benefits and covered drugs.
- Print a temporary ID card, or email/fax a copy from your smartphone to your doctor’s office.
- Check the status of referrals.
- Update contact information.
- Email us with questions.



We’re Here to Help

- Register for a secure account at emblemhealth.com/sign-in.
- On the go? Download our mobile app, myEmblemHealth



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