WHAT IS THE FAMILY HEALTH PLUS EMPLOYER BUY-IN?

The FHP Employer Buy-In allows all New York State employers to purchase the Family Health Plus benefit package for their employees, through health plans as they would any other health insurance, and at a rate developed by the New York State Department of Health. The FHP Employer Buy-In is open to all employers that meet the criteria below.

WHY PARTICIPATE IN THE FHP EMPLOYER BUY-IN?

By participating in the FHP Employer Buy-In, employers can provide comprehensive health coverage to their employees. In addition, employees who meet certain income and other requirements, qualify to have the state pay the employee share of the FHP Employer Buy-In premium.

 For information on the eligibility criteria for Family Health Plus please click on the link below: http://www.health.state.ny.us/nysdoh/fhplus/who_can_join.htm

WHAT HEALTH PLANS PARTICIPATE IN THE FHP EMPLOYER BUY-IN?

Health plans must participate in existing public insurance programs. Participating health plans must have open enrollment for all employers regardless of employer size or type.
Click on the New York State Department of Health Participating Plans.
http://nyhealth.gov/health_care/managed_care/family_health_plus_employer_buy-in/participating_plans.htm

WHAT ARE THE EMPLOYER REQUIREMENTS FOR PARTICIPATION IN THE BUY-IN?

- An employer must offer the FHP Employer Buy-In to all eligible employees who work or reside in the selected plan's service area.

- The employer must contribute at least 70 % of the premium for all employees.

- The employer must select a Family Health Plus health plan from the list of participating plans on the Department of Health website.

- The State will reimburse the employer for the employee contribution for those employees who meet specified eligibility criteria defined by the State.

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- Employer must not have provided health insurance coverage during the six months prior to applying to the program. This does not apply to:
  - Employers with less than 51 employees who also expend more than 15 percent of their payroll on the purchase of health insurance coverage; and,
  - Qualifying small employers or sole proprietors enrolled in Healthy NY

SERVICES COVERED

• Physician Services	• Vision, Speech and Hearing Rehabilitation (some limits exist)
• Prescription Drugs	• Family Planning & EPSDT Durable Medical Equipment (DME)
• Laboratory Tess & X-Rays	• Inpatient/Outpatient Hospital Care
• Physical & Occupational Therapy	• Hospice
• Diabetic Supplies	• Special Therapy Emergency Room & Ambulance
• Preventive Services	• Drug, Alcohol & Mental Health (some limits exist)
• Radiation Therapy, Chemotherapy & Hemodialysis	• Home Health in lieu of hospitalization
• Smoking Cessation Products	• Dental (optional)

SERVICES NOT COVERED
- Long-Term Care
- Personal Care
- Disposable Medical Supplies (except diabetic supplies)
- Residential Care
- Private Duty Nursing
- Non-Emergency Transportation
- Non-Prescription Medication

EMPLOYEE COST SHARING FOR THE FHP EMPLOYER BUY-IN

Employees may be responsible for contributing up to 30% of the total premium. The State will cover the employee contribution for employees who meet the income and other eligibility requirements for government sponsored programs. Employees will also be responsible for paying applicable co-payments to providers at the time of service. Effective January 1, 2011, co-payments for those ineligible for Government programs will be adjusted and are reflected below.

CO-PAYMENTS FOR FAMILY HEALTH PLUS EMPLOYER BUY-IN ENROLLEES

SERVICES	CO-PAYMENT
Physician Services	$ 5.00 per visit
Prescription Drugs *(brand name)*	$ 6.00 per prescription
Prescription Drugs *(generic)*	$ 3.00 per prescription
Dental Services *($25 annual copayment cap)*	$ 5.00 per visit
Medical Supplies (e.g., for diabetes and enteral formula)	$ 1.00 per supply
Laboratory Services	$ .50 per service
Radiology Service *(ordered in an ambulatory setting)*	$ 1.00 per service
Inpatient Hospital Services	$ 25.00 per stay
Non-Emergency Services in an Emergency Room	$ 3.00 per visit

FHPlus enrollees under 21 years of age or who are pregnant are exempt from these co-payments.

Additionally, the following services are exempt from co-payment requirements for government program eligibles, in all settings noted:
- Emergency Services
- Psychotropic
- Preventive Services
- Mental Health Services
- Chemical Dependence
- Family Planning Service and Supplies
- Tuberculosis drugs
- Clinic Services

Note: Medicaid Eligible enrollees will be responsible for the current Medicaid co-payments.

CO-PAYMENTS FOR THOSE INELIGIBLE FOR GOVERNMENT PROGRAMS

EFFECTIVE JANUARY 1, 2011

SERVICES	CO-PAYMENT
Physician Services	$ 10.00 per visit
Prescription Drugs *(brand name)*	$ 15.00 per prescription
Prescription Drugs *(generic)*	$ 5.00 per prescription
Dental Services *($25 annual copayment cap)*	$ 10.00 per visit
Medical Supplies (e.g., for diabetes and enteral formula)	$ 1.00 per supply
Laboratory Services	$ 10.00 per service
Radiology Service *(ordered in an ambulatory setting)*	$ 10.00 per service
Inpatient Hospital Services	$150.00 per stay
Services in an Emergency Room	$ 50.00 per visit

Note: Preventive services are exempt from co-payment requirements for those ineligible for government programs.

HOW CAN EMPLOYERS ENROLL IN THE FHP EMPLOYER BUY-IN?

Employers should contact any of the health plans listed on the New York State Department of Health Website to discuss participation. Applications for the FHP Employer Buy-In must be submitted at least 3 months prior to expected date of coverage to:

New York State Department of Health
Office of Health Insurance Programs
Director, Division of Managed Care
Empire State Plaza, Corning Tower, Room 2001
Albany, New York 12237
Phone: (518) 473-1134
E-mail: omcmail@health.state.ny.us

QUESTIONS?

Please contact the Division of Managed Care at (518) 473-1134, Monday-Friday 9:00 a.m. – 4:00 p.m.