

# NY STATE OF HEALTH UPDATES

AND

# 2022 QHP & EP PLAN LINE UP

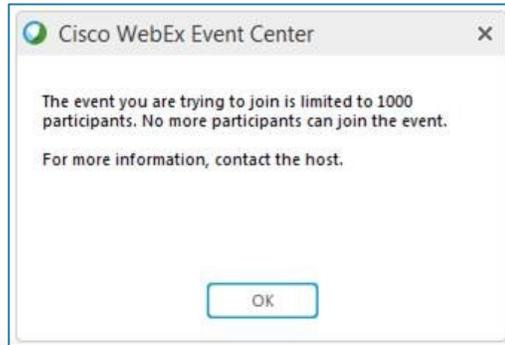


The screenshot shows the nystateofhealth website interface. At the top, there is a navigation bar with links for ABOUT, RESOURCES, FORMS, GET HELP, 1-855-355-5777, ESPANOL, and LANGUAGES. Below this, there are links for Individuals & Families, Employers, Employees, Brokers, and Navigators. The main content area features a large image of a smiling family (a woman, a man, and a child). To the right of the image, the text reads "Individuals & Families" and "You and your family have many low cost, quality health insurance options available through the Individual Marketplace." Below this, there are several call-to-action buttons: "GET STARTED" (green), "View Plans and Estimate Your Cost" (orange), "Search by Health Plan" (purple), and "Search by Provider or Facility" (purple). At the bottom of the page, there is a three-step process: 1. Create an Account, 2. Tell us about yourself and your family, and 3. Choose a health insurance plan.

**There is no sound through your computer. You must dial-in on the telephone in order to hear the sound.**

**Date: October 27, 2021  
Time: 10:00am – 11:30am  
Dial-In Number: 1-855-897-5763  
Conference ID: 4568367**

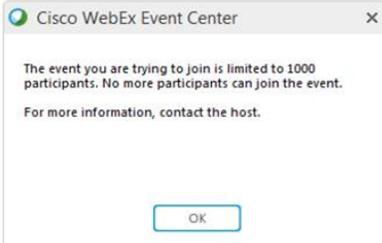
# TODAY'S WEBINAR



**If** you see this message when logging into the webinar...



**As a reminder....**  
If You previously registered for this webinar via:  
<https://meetny.webex.com/meetny/onstage/g.php?MTID=e2de9de2b9a3bde0e8310438f7fa1839f>  
and you see the message below when logging into the webinar.



Please use this alternate link to join the webinar.  
<https://meetny.webex.com/meetny/onstage/g.php?MTID=e98419a6d185319cb2071721f2a6b2e3d>

The audio lines will be open for everyone and there is no limit to calling in to listen. Anyone who cannot access the Webinar will be able to follow along using the slides sent previously.  
**Call-in information:**  
Dial in: 1-855-897-5763  
Conference ID: 2795934

Please note, all Assistors who are certified on NY State of Health are required to recertify annually.

Thank you for all that you do to help New Yorkers shop, compare and enroll in health insurance coverage through NY State of Health

Please find this email:  
Subject Line: '2021  
Recertification Overflow  
Reminder I NY State of  
Health Updates and 2022  
QHP and EP Line Up' and  
click on the second link in  
order to log in.

**Dial-In Number: 1-855-897-5763**  
**Conference ID: 4568367**

## *There is no sound through your computer.*

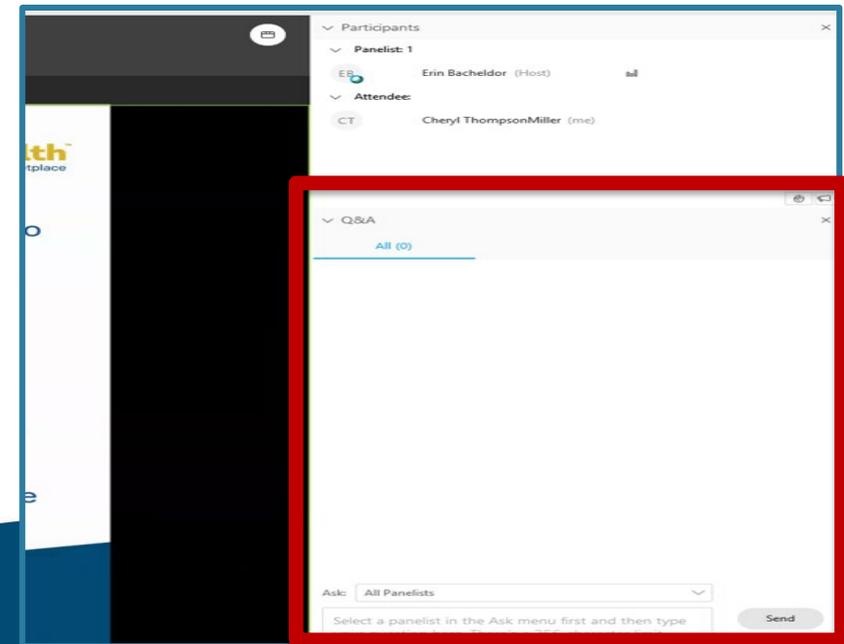
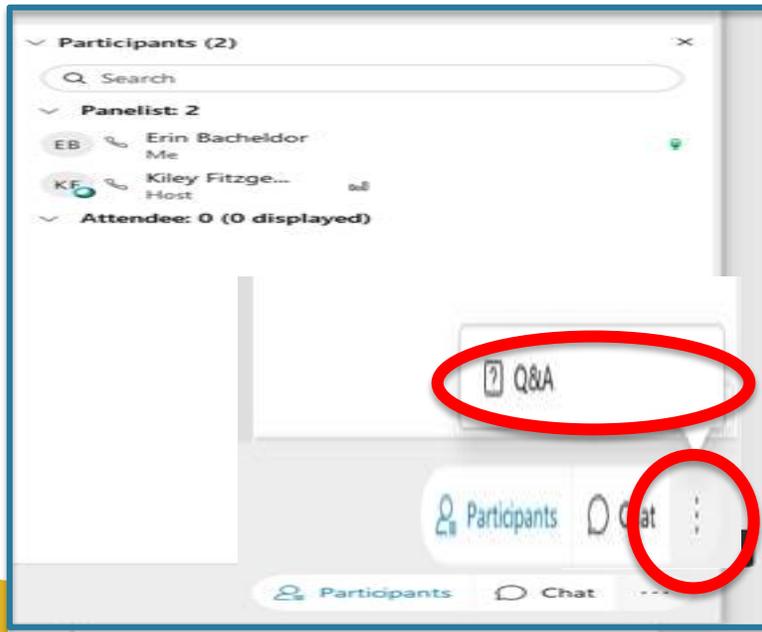
- Dial in to listen to the audio portion of the webinar using the audio instructions on your WebEx control panel.
- All participants will remain muted for the duration of the program.

**Dial-In Number: 1-855-897-5763**  
**Conference ID: 4568367**

# QUESTIONS

Questions can be submitted using the Q&A function on your WebEx control panel.

- Chat function is disabled, please use Q & A panel to submit questions.
- We will pause two times to take questions.



# RECORDING AND MATERIALS

A recording of the webinar and any related materials will be available online at our Spring Training webpage at:

<https://info.nystateofhealth.ny.gov/SpringTraining>

## 2021 Spring Training

📌 » News & Events

Oct 14, 2021



| Session                   | Topic  | Training Materials  |
|---------------------------|--|---|
| 1<br>April 28, 2021       | American Rescue Plan Act of 2021 and Changes to NYS's Essential Plan   | Presentation<br>Video<br>American Rescue Plan Counting Income Resource<br>APTC Expected Premium Contribution Chart After ARP<br>QSA<br>SAMP Email   |
| 2<br>Pre-recorded Webinar | Part 2 - American Rescue Plan Act of 2021: Health Insurance Changes for Unemployed New Yorkers   | Presentation<br>Video<br>QSA  |
| 3<br>July 21, 2021        | Privacy and Security - Providing a reminder and an update on the Privacy and Security rules and regulations by which all NY State of Health Assistors must comply. | Presentation<br>Video<br>QSA<br>ID Proofing Tool Kit<br>Authorized Representative Designation Form<br>Document Listing Checklist<br>Privacy Consents and Terms Rights and Responsibilities in English and Spanish |
| 4<br>August 25, 2021      | Cultural Humility and NY State of Health Race and Ethnicity Questions  | Presentation<br>Video<br>Race & Ethnicity Scenario - Example<br>QSA   |
| 5<br>September 29, 2021   | Open Enrollment & Renewals and the NY State of Health Care at Home Program   | Presentation<br>Video   |

# WEBINAR FEEDBACK

## “ OPEN ENROLLMENT AND RENEWALS AND NEW YORK STATE OF HEALTH CARE AT HOME PROGRAM”

### Webinar Statistics:

- 97% said the webinar increased your knowledge of the topic!
- 98% said information from the webinar will allow you to better assist consumers with Renewals and during Open Enrollment.

### Here's what you said:

- “I really appreciated this webinar. It was very interesting and informative.”
- “Thank you for all the information reported in this training. It will be helpful to our renewals as well as in the open enrollment period.”

# TODAY'S WEBINAR



## Director

Gabrielle Armenia    Director, Bureau of Child Health Plus and Marketplace Consumer Assistance

## Presenters

Rachel Jeschke    Supervisor, Plan Management, NY State of Health

## Panelists

Joe Gagnon    Assistant Director of Plan Management, NY State of Health

Maggie Middleton    Director of Plan Management, NY State of Health

Alicia Neznok    Medical Assistance Specialist 3, Bureau of Child Health Plus and Marketplace Consumer Assistance

Sonia Sekhar    Director, Policy and Evaluation, NY State of Health

## NY State of Health Updates

- Reminder on QHP Open Enrollment and Renewals and Public Program Extensions
- Text Messaging Campaign - Helping Consumers “Opt-in”
- Reviewing and Updating Consumers’ Contact Information
- Health Insurance Changes for Unemployed New Yorkers: Under ARP, Benefit Ends 12/31/2021
- #VaxtoSchool Campaign

## 2022 QHP and EP Plan Line Up

- Qualified Health Plans
- Essential Plan
- Small Business Marketplace
- Dental Plans
- Resources and Tools

# NY STATE OF HEALTH IS OPEN FOR BUSINESS!

- Individual and Small Business health and dental insurer options will continue to be robust in every county of the State.
- 2021 Open enrollment has been extended through December 31, 2021.
  - NY State of Health, The Department of Financial Services and New York State health insurers are taking this action due to the exceptional nature of the public health emergency posed by the Coronavirus so that individuals do not avoid seeking testing or medical care for fear of cost.
- 2022 Open enrollment begins November 16, 2021 and will continue through January 31, 2022.
- Our priority is to ensure that quality, affordable coverage is available.

# ENROLLMENT EXTENSIONS

## MEDICAID, CHILD HEALTH PLUS, ESSENTIAL PLAN

### Extensions Due to COVID-19 Health Emergency

- Each month, NY State of Health will be extending all **Medicaid (MA), Child Health Plus (CHPlus), and Essential Plan (EP) consumers for an additional 12 months of coverage.**
  - This applies to consumers with a coverage end date through 12/31/2021.
- All households with **Qualified Health Plan (QHP)** members will get a renewal notice by 11/01/2021.



# OPEN ENROLLMENT – IMPORTANT DATES

Remember, Open Enrollment is available for all of 2021, through 12/31/2021.

Open Enrollment Timeframe – **ONLY** for Plan Year 2022  
**November 16, 2021 – January 31, 2022**

| When Enrollment is Completed                    | Coverage Begins  |
|---|------------------|
| Between October 16 and November 15, 2021        | December 1, 2021 |
| Between November 16 and December 15, 2021       | January 1, 2022  |
| Between December 16, 2021, and January 15, 2022 | February 1, 2022 |
| Between January 15, 2022, and January 31, 2022  | March 1, 2022    |

# AMERICAN RESCUE PLAN AND AMENDED TAX RETURNS

The final version of the American Rescue Plan contains several tax-related provisions. In order to take full advantage of the impact:

- Many consumers amended their 2020 tax returns
- The IRS automatically amended 2020 tax returns for many consumers.

For these consumers, NY State of Health may not have access to their most up-to-date income information so Automatic Renewals may not be possible.

Many individuals and families who have been automatically renewed in the past may need to complete a manual renewal in order to make sure NY State of Health can attain their most current information.

# APPLICATION CHANGES

## TEXT MESSAGING CAMPAIGN

Toward the end of October 2021, all consumers will have the ability to opt-in to receive text messages from NY State of Health on their application.

Receiving these text messages will alert the consumer when they are nearing enrollment deadlines and with other important NY State of Health updates.

Assistors will be able to help consumer's opt-in via the consumer's "Account and Identity Information Page."

# APPLICATION CHANGES

## TEXT MESSAGING CAMPAIGN, CONTINUED

To opt-in:

- Type must be “Cell.”
- Check the box consenting to receive text messages from NY State of Health.

### Telephone Numbers

NY State of Health will use the primary phone number if we need to contact you about your account or health coverage. You can include another phone number where we can reach you. To consent (“opt-in”) to receive text messages from NY State of Health, list your cell number and check the box indicating consent (“opt-in”) to receive text messages.

Primary Phone Number \*

( 518 ) 312 - 3421 x

Extension

Type \*

Cell ▼

Use this number when contacting me by phone.

I consent (“opt-in”) to receive text messages from NY State of Health at the phone number that I provided. By checking this box, I agree to the [Terms of Service and Privacy Policy](#) for SMS/text messages from or on behalf of NY State of Health. I understand this is not a requirement for my application for health coverage. Message and data rates may apply.

# APPLICATION CHANGES

## TEXT MESSAGING CAMPAIGN, CONTINUED

After the consumer consents and begins receiving text messages, they will also be able to opt out via text message.

- If they do this, opting back in via the consumer's account will not be possible.
- When this happens, Assistors can review the new messaging (in red) on this screen to direct the consumer to opt back in using their cell phone.

|   |           |        |
|---|-----------|--------|
| Primary Phone Number *  | Extension | Type * |
| ( 518 ) 312 - 3421 x  |           | Cell ▼ |
| <input type="checkbox"/> Use this number when contacting me by phone. |           |        |

I consent ("opt-in") to receive text messages from NY State of Health at the phone number that I provided. By checking this box, I agree to the [Terms of Service](#) and [Privacy Policy](#) for SMS/text messages from or on behalf of NY State of Health. I understand this is not a requirement for my application for health coverage. Message and data rates may apply.

Our records show that you've opted-out of receiving text messages from NY State of Health. To opt-in to receive text messages from NY State of Health please text START to 1-866-988-0327, and you will see the change reflected here in the next few days.

# REVIEWING AND UPDATING CONSUMER CONTACT INFORMATION

Beginning in December 2021, all consumers will be prompted to review their current information.

The pop-up to the right will appear and needs to be responded to when accessing the Overview Page of the consumer's account.

- This message will display on the consumer's overview page of their account until it has been responded to.

Napoleon, please review the following...

It is important that NY State of Health has your most current information on record. You can also make managing your account easier by going paperless and opting in to receive important updates right on your phone by text message.

|                        |   |
|------------------------|---|
| <b>Mailing Address</b> | C/O Macaron Profiterole<br>1234 Consumer Way APT 2<br>Schaghticoke, NY 12154-2533 |
| <b>Primary Phone</b>   | (555) 555-5555 ext. 123 (Work)  |
| <b>Email Address</b>   | nprofiterole23@gmail.com  |

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Receive Paperless Notices? No      Receive Text (SMS) Alerts? No

[No Changes Needed ✓](#)      [I Need to Make Changes ✎](#)

# REVIEWING AND UPDATING CONSUMER CONTACT INFORMATION, CONTINUED

If the consumer clicks on “I Need to Make Changes,” they will be brought back to the Account and Identity Information page where they can make changes to their:

- Address(es)
- Phone number(s)
- Email Address(es)
- Communication Preferences
- Language Preferences

The Updated information will save after agreeing to the General Privacy Attestation and clicking on “Next.”

## Identifying Information

NY State of Health includes protected systems that contain United States ("US") and New York State ("NY") government information. User actions are monitored and audited under strict US and NY laws. NY State of Health is authorized to take responsibility for the use of this information and civil sanctions may apply.

**Mailing Address**  
Your mailing address is where you want your mail to be delivered. NY State of Health will use your mailing address to send notices and other important information.

Mailing address is the same as Household Address

1365 Washington Ave  
Albany, NY 12206

[Change Mailing Address](#)

**Telephone Numbers**  
NY State of Health will use the primary phone number if we need to contact you. You can include another phone number where we can reach you. To consent ("opt-in") to receive text messages from NY State of Health, list your cell number and check the box indicating consent ("opt-in") to receive text messages.

Primary Phone Number \*  
( 555 ) 555 - 5555 X

Use this number when contacting NY State of Health

I consent ("opt-in") to receive text messages from NY State of Health. I understand that a text message and data rates may apply.

**Email Address**  
NY State of Health will contact you with account updates and other important information using email. We will not include any private or confidential information in email. You will be directed to log into your account to read your notice.

Email Address

Confirm Email Address

**Communication Preferences \***  
Please choose how you want NY State of Health to send you notices and other important information about your health coverage.

**Paperless** – get an email alert when NY State of Health posts a new notice to your online account

**Printed** – receive paper notices by U.S. Postal Service

**Alternative Format** – receive notices in a format accessible for individuals who are blind or seriously visually impaired

**Language Preferences**  
Tell us the language you prefer to speak or read so that we can better accommodate your needs.

Preferred Language - Spoken \*

Preferred Language - Written \*

I agree with the [General Privacy Attestation](#)

[Next](#)

# MAX APTC/CSR BENEFIT FOR 2021 UIB RECIPIENTS EXPIRING

Through the American Rescue Plan (ARP), NY State of Health enrollees who received unemployment insurance in 2021 were provided the maximum amount of APTC and CSR for the 2021 plan year.

- Many eligible consumers were able to enroll in a QHP for \$1 or less per month.
- The financial assistance that may have been applied to the consumer's 2021 coverage cannot be carried over to 2022 coverage.
  - This is not because of an error by NY State of Health or by the consumer's plan. It is because the American Rescue Plan benefit only applied to calendar year 2021.
  - This benefit will expire on December 31, 2021 so it will not apply in 2022.
  - These consumers will likely see an increase in their 2022 plan premium.

Assistors must be aware of this when helping these consumers complete their renewal. Assistors should be able to explain the rule as time-limited under the American Rescue Plan.

# #VaxtoSchool Campaign

In September 2021, Governor Kathy Hochul announced the launch of a statewide #VaxtoSchool Campaign.

- The campaign is aimed at increasing the vaccination rate of school-aged children.
- More information can be found at [www.ny.gov/vaxtoschool](http://www.ny.gov/vaxtoschool).
  - The website includes information, resources and materials to parents and guardians of school-aged children over 12 years of age.
- NY State of Health is asking Assistors to help by sharing #VaxtoSchool fliers (available [here](#) and [here](#) ) with the consumers they work with who have children aged 12-17.

Vaccination is the best protection against COVID-19, and it is safe. If your child is 12 or older ensure they get #VaxtoSchool safely. Visit [ny.gov/vaxtoschool](http://ny.gov/vaxtoschool) to learn more.

# QUESTIONS?

## NY State of Health Updates

- Reminder on QHP Open Enrollment and Renewals and Public Program Extensions
- Text Messaging Campaign - Helping Consumers “Opt-in”
- Reviewing and Updating Consumers’ Contact Information
- Health Insurance Changes for Unemployed New Yorkers: Under ARP, Benefit Ends 12/31/2021
- #VaxtoSchool Campaign



# 2022 QUALIFIED HEALTH PLANS

- The same twelve (12) health insurers will offer Qualified Health Plans (QHPs) in the individual market in 2022.
- Service Area changes in 2022:
  - Healthfirst is expanding into one new county, Westchester.
- HealthNow is now known as Highmark Blue Shield of Northeastern New York and Highmark Blue Cross Blue Shield of Western NY.

# 2022 QHP INSURERS INDIVIDUAL MARKET



Note: When counting - Highmark of Western NY/Highmark of Northeastern NY, Empire BlueCross/Empire BlueCross BlueShield, and Excellus/Univera are each counted as one.

# 2022 QUALIFIED HEALTH PLANS

- The number of insurer options varies by county – from two (2) to seven (7).
- Most consumers have a choice of at least four (4) insurer options.

County maps of insurers offering Individual/Small Business/Dental Plans are available at:

<http://info.nystateofhealth.ny.gov/PlansMap>

- New counties are identified in the PDF attachments located below the map. New counties are highlighted in yellow and read “New.”



## STANDARD PRODUCT REFRESHER

- Every insurer must offer a Standard Product at each metal level and in every county of its Marketplace service area.
- Standard products must include the Essential Health Benefits, except pediatric dental, which is optional if otherwise available.
- Cost sharing (deductibles, copayments) are the same across insurers within a metal tier.

# 2022 QUALIFIED HEALTH PLANS, CONTINUED



## STANDARD PRODUCTS IN 2022

| <u>Metal Level</u>      | <u>Deductible 2021</u> | <u>Deductible 2022</u> | <u>Max Out of Pocket 2021</u> | <u>Max Out of Pocket 2022</u> |
|-------------------------|------------------------|------------------------|-------------------------------|-------------------------------|
| Platinum                | \$0                    | \$0                    | \$2,000                       | \$2,000                       |
| Gold                    | \$600                  | \$600                  | \$4,000                       | \$4,000                       |
| Silver                  | \$1,300                | \$1,300                | \$8,500                       | \$8,500                       |
| Silver (>200 -<250 FPL) | \$1,100                | \$1,100                | \$6,500                       | \$6,500                       |
| Silver (>150 -<200 FPL) | \$250                  | \$250                  | \$2,200                       | \$2,200                       |
| Silver (>100 -<150 FPL) | \$0                    | \$0                    | \$1,000                       | \$1,000                       |
| Bronze                  | \$4,700                | \$4,700                | \$8,550                       | <b>\$8,700</b>                |
| Catastrophic            | \$8,550                | <b>\$8,700</b>         | \$8,550                       | <b>\$8,700</b>                |

## REMINDERS FOR STANDARD PRODUCTS

- All Standard Bronze products will include three (3) visits subject to co-payments, but not subject to the deductible.
  - The three visits covered in Standard Bronze products can be either primary care OR specialist including mental health and substance use disorder visits.
- Standard Silver and Silver CSR (200-250% FPL) products will have:
  - Higher co-payment for ER visits, diagnostic, and advanced imaging.
  - Higher maximum out-of-pocket (MOOP).
- Prescription drugs are covered before the deductible for Standard Gold and Silver products.
- Standard Bronze and Catastrophic products will have:
  - Higher deductibles and MOOP.
- Deductible levels affect most consumers, while few consumers reach their MOOP each year.

## NON-STANDARD PRODUCTS REFRESHER

- Insurers can offer up to three (3) non-standard products in each metal level.
- Unlike standard products, non-standard products:
  - Do not have to be offered at all four metal levels.
  - Must be offered at a minimum of two metal levels of the insurer's choosing, and the number of non-standard Bronze products is limited.
- Eleven (11) QHP insurers will offer non-standard products in 2022.
- Non-standard products are available in all counties.
- The most commonly offered non-standard benefits include Adult/Family Dental, Adult/Family Vision, Telemedicine, and Acupuncture.

## SIDE BY SIDE COMPARISON

|                  | Standard                              | Non-Standard   |
|------------------|---------------------------------------|--|
| Offering         | Offered by <b><u>all</u></b> insurers | Offered by <b><u>most</u></b> insurers                                       |
| Provider Network | QHP Standard Network                  | May be the QHP Standard Network, Tiered or Limited Network                   |
| Covered Benefits | Essential Health Benefits (EHB)       | EHB plus additional benefits (e.g., adult dental, adult vision, acupuncture) |
| Cost-sharing     | Standard across all insurers          | Varies from insurer to insurer   |

# 2022 QUALIFIED HEALTH PLANS, CONTINUED

## NAMING FORMAT – INDIVIDUAL MARKET

| Field Name             | Values  | Meaning   |
|------------------------|---|---|
| Product Name           | To be assigned by Insurer                                   |   |
| Metal Tier             | Bronze, Silver, Gold, Platinum, Child Only, Catastrophic    | Identifies Metal Level and whether Child Only or Catastrophic Product |
| Standard/ Non-standard | ST or NS  | Identifies Standard (ST) or Non-Standard (NS) Product                 |
| Network Coverage       | INN or OON  | Identifies in-network coverage (INN) or out-of-network coverage (OON) |
| Network Name           | To be assigned by the Insurer                               | Indicates the network name associated with each product               |
| Dental Coverage        | Pediatric Dental, Adult/ Family Dental                      | Identifies type of dental coverage included, if any, in QHP           |
| Dependent Age Coverage | Dep25, Dep29  | Identifies the maximum age of covered dependents                      |
| Non-Standard Details   | Adult Vision, Family Dental, Family Vision, Wellness, Other | Identifies additional covered benefits                                |

# 2022 ESSENTIAL PLAN

- Twelve (12) insurers will offer Essential Plans in 2022.
- Molina Healthcare acquired Affinity Health Plan during 2021.
  - Molina has expanded into the same ten counties that Affinity was in.
  - These will now be offered under the Issuer name: Affinity by Molina Healthcare.

**\*\*New as of June 1, 2021:**

- All Essential Plans now have a \$0 premium.
- All Essential Plans now include vision and dental coverage at no cost.
- No Copay for vision and dental services.

# 2022 ESSENTIAL PLAN INSURERS



Note: When counting Insurers, Excellus/Univera is counted as one. Affinity by Molina Healthcare and Molina Healthcare are also counted as one.

# 2022 ESSENTIAL PLAN

- The number of insurer options varies by county – from two (2) to seven (7).
- Most consumers have a choice of at least four (4) insurer options.



County maps of insurers offering EP available at:  
<http://info.nystateofhealth.ny.gov/EssentialPlanMap>

# ESSENTIAL PLAN OPTIONS

- **Consumers eligible for Essential Plan 1 (150 – 200% FPL):**
  - New as of 2021:
    - \$0 premium
    - Includes vision and dental coverage
- **Consumers eligible for Essential Plan 2 (138 – 150% FPL):**
  - New as of 2021:
    - \$0 premium
    - Includes vision and dental coverage
- **Consumers eligible for Essential Plan 3 and 4 (up to 138% FPL):**
  - \$0 premium
  - Additional benefits included (dental, vision, non-emergency transportation, non-prescription drugs, orthotic services, orthotic footwear)

# 2022 SMALL BUSINESS MARKETPLACE



- Nine (9) Insurers will offer coverage in the Small Business Marketplace (SBM).
- There are many insurers for employers to choose from through New York’s SBM in 2022. Currently, these nine (9) insurers offer over 2,400 policies.
- The number of insurer options varies by county – from two (2) to six (6).
- Healthy NY will be offered in every county across the state in 2022:
  - EmblemHealth, Independent Health, MVP Health Care and Excellus/Univera will continue offering Healthy NY in 2022.
  - Small employers can benefit from both Healthy NY and federal small business tax credits.
- SBM “Direct Enrollment” option makes it easier for New York’s small businesses to access the Federal Small Business Health Care Tax Credit.
  - There are now higher eligibility levels for Small Business tax credits. As of 2020 any qualified small business with employees who on average make less than \$56,000 per year may qualify.

# 2022 SMALL BUSINESS MARKETPLACE INSURERS



Note: When counting Insurers, Empire BlueCross/Empire BlueCross BlueShield, and Excellus/Univera are each counted as one.

# STAND ALONE DENTAL PLANS (SADPs)

# 2022 INDIVIDUAL STAND ALONE DENTAL PLANS



# 2022 INDIVIDUAL STAND ALONE DENTAL PLANS, CONTINUED

## New for 2022:

- The permitted pediatric out of pocket maximums increased to \$375/\$750.
- The actual MOOP is determined by the plan but cannot be more than \$375/\$750 for pediatric dental.

# 2022 SMALL BUSINESS MARKETPLACE STAND ALONE DENTAL PLANS



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An Anthem Company



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An Anthem Company

# 2022 INDIVIDUAL STAND ALONE DENTAL PLANS

- When consumers sign up for a SADP, they get basic adult dental coverage upon enrollment.
- Under some SADPs, there may be a waiting period for a specific benefit.
  - Plan names listed will include “WP” if there is a waiting period associated with any covered dental services.

**Empire** BLUECROSS  
An Anthem Company

**Empire Dental Family Enhanced, NS, OON, Adult/Family Dental, Dep 25, WP**

|                              |                   |                                |            |                                      |                   |
|------------------------------|-------------------|--------------------------------|------------|--------------------------------------|-------------------|
| <b>Price Per Month</b>       | \$23.79           | <b>Metal</b>                   | High       |                                      |                   |
| <b>Maximum Out of Pocket</b> | See Plan Brochure | <b>Out-of-Network Coverage</b> | Yes        | <b>Allows Health Savings Account</b> | No                |
| <b>Plan Id</b>               | 44113NY0440052    | <b>Persons Covered</b>         | Individual | <b>Deductible</b>                    | See Plan Brochure |

**Design** Empire proudly serves members in its New York service area. Our Dental Prime network gives access to a wide variety of dentists and specialists locally in New York as well as across the nation. Empire Dental PPO plans do not require any referrals before visiting a dental specialist. The Dental Family Enhanced plan has a \$0 deductible for pediatric children, and a \$50 deductible for adults age 19 and older. There is a waiting period of 6 months on Adult Basic Dental Care and 12 months on Adult Major Dental Care, which may be waived for enrollees with prior dental coverage. The Enhanced plan also covers non-medically necessary (cosmetic) orthodontia for children after a 12 month waiting period and subject to a \$1,000 lifetime benefit maximum.

Click on the benefit categories below to learn more about this plan's covered benefits and services. To see a full list of the benefits and services, visit the "Summary of Benefits" link under "Plan Documents" at the bottom of this page.

- ⊕ Pediatric Dental Care
- ⊖ Adult Dental Care

| Benefit                         | In Network Cost Share               | Description   |
|---------------------------------|-------------------------------------|---|
| Routine Dental Services (Adult) | No Charge after deductible          | Exams, cleanings & x-rays   |
| Major Dental Care - Adult       | 50.00% Coinsurance after deductible | 12 Month Waiting Period. Endodontics, Periodontics, Prosthodontics and Oral Surgery |
| Basic Dental Care - Adult       | 20.00% Coinsurance after deductible | 6 Month Waiting Period. Fillings and simple extractions.                            |

# 2022 INDIVIDUAL STAND ALONE DENTAL PLANS, CONTINUED

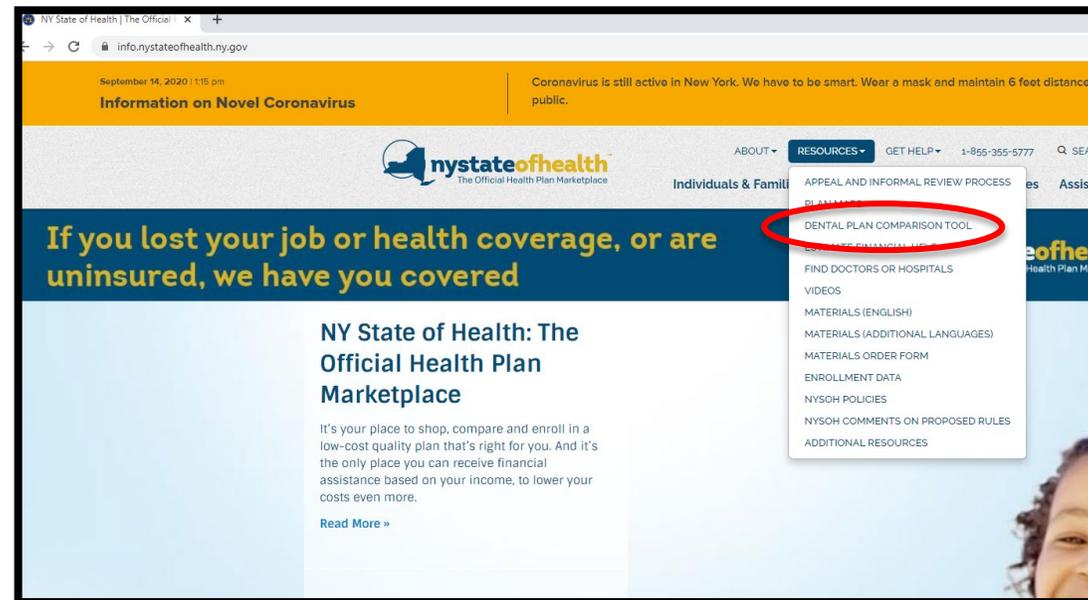
Click on the benefit categories below to learn more about this plan's covered benefits and services. To see a full list of the benefits and services, visit the "Summary of Benefits" link under "Plan Documents" at the bottom of this page.

| <input type="checkbox"/> Adult Dental Care  |   |  |
|---|---|--|
| Benefit   | In Network Cost Share  | Description  |
| Basic Dental Care - Adult   | \$48.00   | Cleanings and Exams  |
| Routine Dental Services (Adult)   | \$48.00   | X-rays, Fillings and Simple Extractions. Full mouth X-rays or panoramic X-rays at 36 month intervals and bitewing X-rays at 6 month intervals. |
| Major Dental Care - Adult   | \$48.00   | Pre-Authorization Required - Endodontics*, Periodontics, Prosthodontics and Oral Surgery. *Adult molar root canals have very limited coverage. |
| <input type="checkbox"/> Pediatric Dental Care  |   |  |
| <input type="checkbox"/> Plan Documents  |   |  |

Plain language display of basic vs major services

# DENTAL PLAN COMPARISON TOOL ENHANCEMENTS

- The Dental Plan Comparison Tool helps to compare Pediatric Dental Plans, Family Dental Plans and Qualified Health Plans with Dental benefits that are offered in a specific county



- The Dental Plan Comparison Tool can be found at [www.info.nystateofhealth.ny.gov](http://www.info.nystateofhealth.ny.gov) in the “Resources” drop down

# DENTAL PLAN COMPARISON TOOL ENHANCEMENTS, CONTINUED

**\*\*Beginning in November, the dental Plan Comparison Tool will have an updated format, making it easier to navigate and compare plans and benefits**

Pediatric Dental Adult & Family Dental QHP that includes dental benefits Total results 8

County:  Network:  In Network Cost Sharing Pediatric Benefits  Out of Network Cost Sharing Benefits  Network Information Number of children:

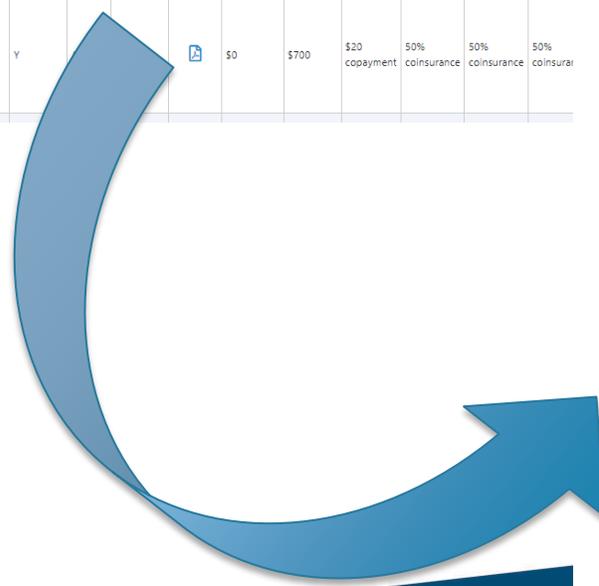
| Issuer Name                         | Plan Name  | New for 2021 | Plan Type | Waiting Periods | Referrals Required to See a Specialist | Specialists Requiring Referrals | Annual Benefit Maximum | Out of Network Coverage? | County | Premium | Brochure | Deductible Pediatric Individual - Children | MOOP Pediatric Individual - Children | Dental Check-Up - Children | Basic Dental Care - Children | Major Dental Care - Children | Orthodontia - Children | Out of Country Coverage | Out of Country Coverage Description | Out of Service Area Coverage | Out of Service Area Coverage Description | National Network | Network Name     | Network URL |
|-------------------------------------|--|--------------|-----------|-----------------|--|---------------------------------|------------------------|--------------------------|--------|---------|----------|--|--------------------------------------|----------------------------|------------------------------|------------------------------|------------------------|-------------------------|-------------------------------------|------------------------------|--|------------------|------------------|-------------|
| Delta Dental of New York, Inc       | Delta Dental PPO Pediatric Basic Plan ST OON Pediatric Dental Dep 19 | N            |           | None            | N                                      | None                            | None                   | Y                        | Albany | \$16.03 |          | \$65                                       | \$350                                | \$0 after deductible       | 50% after deductible         | 50% after deductible         | 50% after deductible   | N                       | N/A                                 | Y                            | National Network                         | Y                | Delta Dental PPO |             |
| Dentcare Delivery Systems Inc       | ST, INN, DP, Pediatric Dental, Healthplex Network                    | N            |           | None            | N                                      | None                            | None                   | N                        | Albany | \$18.95 |          | N/A  | N/A                                  | Not covered                | Not covered                  | Not covered                  | Not covered            |                         |                                     |                              |  |                  |                  |             |
| BlueShield of Northeastern New York | Blue Pediatric Dental, ST, OON, Blue Marketplace, Pediatric Dental   | N            |           | None            | N                                      | None                            | None                   | Y                        |        |         |          | \$0  | \$700                                | \$20 copayment             | 50% coinsurance              | 50% coinsurance              | 50% coinsurance        |                         |                                     |                              |  |                  |                  |             |

## Dental Tool

Please select the Dental Plan Type along with a corresponding county in order to compare each plan (up to three allowed).

Dental Plan Type:  County (Pediatric):  Insurance Company:  Out-of-Network Coverage:  Metal Level:  Dependent Age:

| Dental Plan Type | Person(s) Covered | County | Premium | Insurance Company                   | Out-of-Network Coverage | Metal Level | HIOS Product Number | Dependent Age | Deductible Adult Individual | Annual Benefit Maximum | Waiting Periods | View Details                 | Compare Plans            |
|------------------|-------------------|--------|---------|-------------------------------------|-------------------------|-------------|---------------------|---------------|-----------------------------|------------------------|-----------------|------------------------------|--------------------------|
| Pediatric Dental | Individual        | Albany | \$16.03 | Delta Dental of New York, Inc       | Y                       | Low         | 10345NY0010001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$20.85 | DentCare Delivery Systems Inc       | N                       | Low         | 30798NY0010003      | Age 19        |                             | None                   | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$31.67 | BlueShield of Northeastern New York | Y                       | Low         | 36346NY0490001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$17.15 | Guardian                            | N                       | Low         | 42640NY0300001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$20.79 | Guardian                            | Y                       | Low         | 42640NY0330001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |



# DENTAL PLAN COMPARISON TOOL

## ENHANCEMENTS, CONTINUED

### Dental Tool

Please select the Dental Plan Type along with a corresponding county in order to compare each plan (up to three allowed).

Dental Plan Type: 
 County (Pediatric): 
 Insurance Company: 
 Out-of-Network Coverage: 
 Metal Level: 
 Dependent Age:

[Search](#) [Reset](#)

| Dental Plan Type | Person(s) Covered | County | Premium | Insurance Company                   | Out-of-Network Coverage | Metal Level | HIOS Product Number | Dependent Age | Deductible Adult Individual | Annual Benefit Maximum | Waiting Periods | View Details                 | Compare Plans            |
|------------------|-------------------|--------|---------|-------------------------------------|-------------------------|-------------|---------------------|---------------|-----------------------------|------------------------|-----------------|------------------------------|--------------------------|
| Pediatric Dental | Individual        | Albany | \$16.03 | Delta Dental of New York, Inc       | Y                       | Low         | 10345NY0010001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$20.85 | DentCare Delivery Systems Inc       | N                       | Low         | 30798NY0010003      | Age 19        |                             | None                   | None            | <a href="#">View Details</a> | <input type="checkbox"/> |
| Pediatric Dental | Individual        | Albany | \$31.67 | BlueShield of Northeastern New York | Y                       | Low         | 36346NY0490001      | Age 19        |                             | N/A                    | None            | <a href="#">View Details</a> | <input type="checkbox"/> |

# DENTAL PLAN COMPARISON TOOL

## ENHANCEMENTS, CONTINUED

### Compare Plans

BACK

#### [Delta Dental of New York, Inc](#)

Plan

Plan Name:  
Delta Dental PPO Pediatric Basic Plan ST OON Pediatric Dental Dep  
19

Issuer Name: Delta Dental of New York, Inc

HIOS ID: [10345NY0010001](#)

Annual Benefit Maximum: N/A

Plan Brochure Link: [View](#)

Out of Network Coverage: [Y](#)

- ▶ Dental Plan Type
- ▶ New (Plan Information)
- ▶ In-Network Cost-Sharing (Pediatric Dental)
- ▶ Out-of-Network Cost-Sharing (Pediatric Dental)
- ▶ Network Information (Pediatric Dental)
- ▶ Family Dental Plan

Premium: \$16.03

#### [DentCare Delivery Systems Inc](#)

Plan

Plan Name: ST, INN, DP, Pediatric Dental, Healthplex Network

Issuer Name: DentCare Delivery Systems Inc

HIOS ID: [30798NY0010003](#)

Annual Benefit Maximum: None

Plan Brochure Link: [View](#)

Out of Network Coverage: [N](#)

- ▶ Dental Plan Type
- ▶ New (Plan Information)
- ▶ In-Network Cost-Sharing (Pediatric Dental)
- ▶ Out-of-Network Cost-Sharing (Pediatric Dental)
- ▶ Network Information (Pediatric Dental)
- ▶ Family Dental Plan

Premium: \$20.85

# NYS PROVIDER & HEALTH PLAN LOOK-UP TOOL

- Networks can change throughout the year. It is important to check the NYS Provider & Health Plan Look-Up tool to verify providers and facilities and their participation with plans.
- This is an online tool to research provider networks and health plans.
  - Search by provider, including doctors and hospitals to see which health plans they participate in.
  - Search by health plan to see a list of providers and/or facilities that participate with that plan.
  - Search by facility to find a health plan.
- The NYS Provider & Health Plan Look-Up currently includes:

|                        |                                  |
|------------------------|----------------------------------|
| Qualified Health Plans | Health and Recovery Plans        |
| Essential Plans        | Fully Integrated Duals Advantage |
| Child Health Plus      | Managed Long Term Care           |
| Medicaid Managed Care  | HIV/SNP Plans                    |
| Medicaid Advantage     | PACE                             |

- The tool is updated approximately every 30 days using data submitted by the health plans.

# NYS PROVIDER & HEALTH PLAN LOOK-UP TOOL, CONTINUED

- How to access the NYS Provider & Health Plan Look-Up Tool:
  - <https://pndslookup.health.ny.gov>
  - NYSOH Website



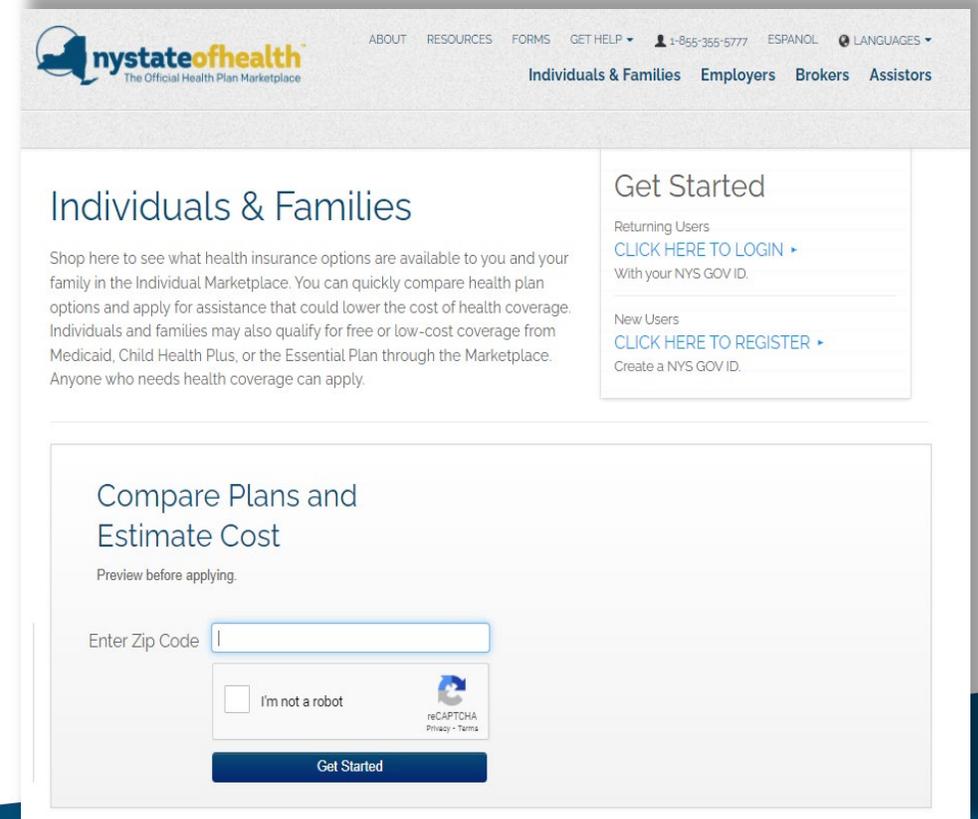
# ★ REMINDER

# NYSOH ANONYMOUS PLAN SEARCH TOOL

## 2022 PLAN OPTIONS NOW AVAILABLE TO VIEW



The screenshot shows the NY State of Health homepage. At the top, there is a navigation bar with the logo, 'ABOUT', 'RESOURCES', 'FORMS', 'GET HELP', and language options for Chinese and Spanish. Below this is a secondary navigation bar with 'Individuals & Families', 'Employers', 'Brokers', and 'Assistors'. A yellow banner for 'Novel Coronavirus' is present, followed by a blue banner with the text 'Good news! Federal law has changed and more tax credits are available to New Yorkers who buy a health plan through NY State of Health. Learn more here.' and an 'Enroll Today' button. The main content area features a photo of a family and the heading 'Individuals & Families'. Below the photo, there is descriptive text and four buttons: 'GET STARTED', 'Get Enrollment Help', 'Compare Plans and Estimate Cost', and 'Search by Health Plan, Provider, or Facility'.



The screenshot shows the 'Individuals & Families' page. The top navigation bar includes the logo, 'ABOUT', 'RESOURCES', 'FORMS', 'GET HELP', a phone number, 'ESPAÑOL', and 'LANGUAGES'. The secondary navigation bar lists 'Individuals & Families', 'Employers', 'Brokers', and 'Assistors'. The main heading is 'Individuals & Families'. Below it, there is a paragraph of text and a 'Get Started' button. To the right, there is a 'Get Started' section with links for 'Returning Users' and 'New Users'. At the bottom, there is a 'Compare Plans and Estimate Cost' section with a 'Preview before applying.' link, a 'Enter Zip Code' input field, a reCAPTCHA widget, and a 'Get Started' button.

# NYSOH ANONYMOUS PLAN SEARCH TOOL

## ESTIMATING FINANCIAL ASSISTANCE

### How to use the tool:

Use the Anonymous Plan Search tool to determine the consumer's estimated premium after tax credits.

<https://nystateofhealth.ny.gov/individual>

Filter Options

|   |                        |  |                                   |
|---|------------------------|--|-----------------------------------|
| County (Required)<br>Fulton                         | Plan Year<br>2022      | Persons Covered (Required)<br>INDIVIDUAL   | Overall Quality Rating<br>--All-- |
| Coverage Type<br>--All--                            | Metal Level<br>--All-- | Insurance Company<br>--All--   | HIOS Plan ID<br>--All--           |
| Estimated Financial Help<br>Estimate Financial Help |                        | <input type="checkbox"/> Dependent Age 29<br><input type="checkbox"/> Out Of Network | Reset All Search                  |

Estimate Financial Help

County: Fulton

Number of Members in Household: 2

Enter number of adults needing coverage: 2

Children under Age 19: 0

Are there any dependents ages 26 to 29 applying for coverage?  Yes  No

Total Household Income per Year: \$ 55000

Calculate Reset

# NYSOH ANONYMOUS PLAN SEARCH TOOL

## ESTIMATING FINANCIAL ASSISTANCE, CONTINUED

### Filter Options

|   |                               |  |  |
|---|-------------------------------|--|--|
| <b>County (Required)</b><br>Fulton                                      | <b>Plan Year</b><br>2022      | <b>Persons Covered (Required)</b><br>INDIVIDUAL                                      | <b>Overall Quality Rating</b><br>--All-- |
| <b>Coverage Type</b><br>--All--   | <b>Metal Level</b><br>--All-- | <b>Insurance Company</b><br>--All--  | <b>HIOS Plan ID</b><br>--All--           |
| <b>Estimated Financial Help</b><br>Estimate Financial Help <b>837.0</b> |                               | <input type="checkbox"/> Dependent Age 29<br><input type="checkbox"/> Out Of Network | Reset All Search                         |

Search plans for **2022**

#### Estimate of Financial Help Disclaimer:

This is an estimate of your financial help. Your actual Advanced Premium Tax Credit will be determined at the time you apply for coverage.

Compare Plans

Reset Compare Plans

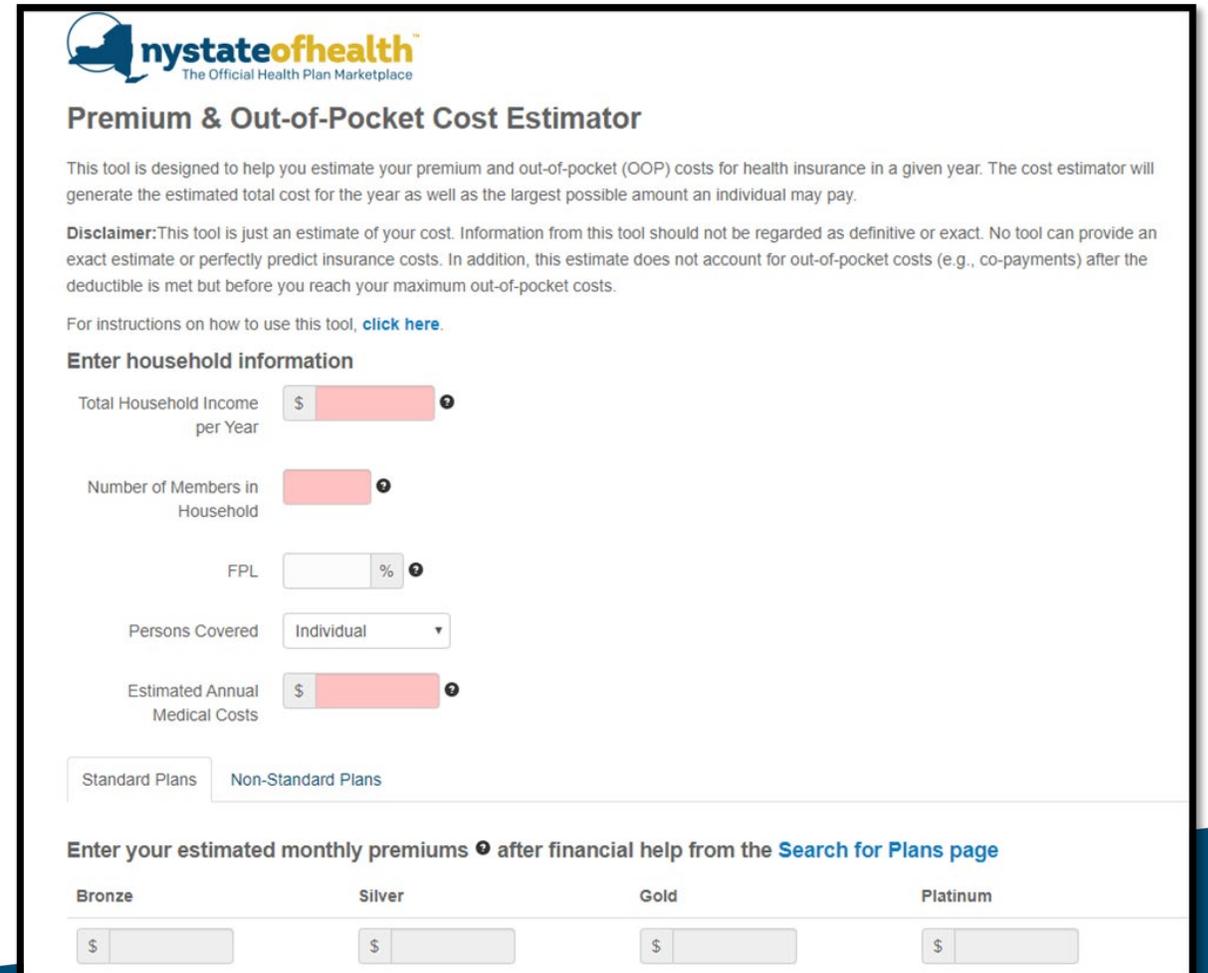
Page 1 of 9

|                          | Insurance Company  | Plan Name  | Metal Level | Coverage Type             | County | Persons Covered | Price Per Month | You Pay | Details                      |
|--------------------------|--|--|-------------|---------------------------|--------|-----------------|-----------------|---------|------------------------------|
| <input type="checkbox"/> | <br>Quality Details Coming Soon | Fidelis Care, Bronze, ST, INN, Fidelis Care HBX Network, Pediatric Dental, Dep25, Free Telemedicine            | Bronze      | Medical Plus Child Dental | Fulton | Individual      | \$401.70        | \$0.00  | <a href="#">View Details</a> |
| <input type="checkbox"/> | <br>Quality Details Coming Soon | Fidelis Care Bronze HSA, Bronze, ST, INN, Fidelis Care HBX Network, Pediatric Dental, Dep25, Free Telemedicine | Bronze      | Medical Plus Child Dental | Fulton | Individual      | \$406.17        | \$0.00  | <a href="#">View Details</a> |

Plans display with tax credit deducted

# QHP OUT-OF-POCKET COST ESTIMATOR

- Compares estimated consumer premium and out-of-pocket costs in different standard and non-standard plans.
- Consumers input household information and estimated annual medical costs.
- Generates the estimated total cost for the year as well as the largest possible amount an individual may pay.
- **Disclaimer:** No tool can provide an exact estimate or perfectly predict costs.



The screenshot shows the 'Premium & Out-of-Pocket Cost Estimator' tool interface. It includes a header with the 'nystateofhealth' logo and title. Below the header is a brief description of the tool's purpose and a disclaimer. The main section is titled 'Enter household information' and contains several input fields: 'Total Household Income per Year' (a red input box), 'Number of Members in Household' (a red input box), 'FPL' (a percentage input box), 'Persons Covered' (a dropdown menu set to 'Individual'), and 'Estimated Annual Medical Costs' (a red input box). Below these fields are two tabs: 'Standard Plans' and 'Non-Standard Plans'. At the bottom, there is a section titled 'Enter your estimated monthly premiums' with four input boxes labeled 'Bronze', 'Silver', 'Gold', and 'Platinum', each with a dollar sign and a red input box.

# QUESTIONS?

## 2022 QHP and EP Plan Line Up

- Qualified Health Plans
- Essential Plan
- Small Business Marketplace
- Dental Plans
- Resources and Tools



# EMAIL CONTACTS

## *All Assistors*

- If you have general Assistor training questions, or questions about this specific training, please send them to: [Eligibility.Training.Support@health.ny.gov](mailto:Eligibility.Training.Support@health.ny.gov).
- If you have a case specific question, that you have already discussed with your supervisor or program manager, the issue should be submitted on an encrypted Account Review Spreadsheet to: [Assistor.Cases@health.ny.gov](mailto:Assistor.Cases@health.ny.gov).
- If you need help with your Assistor account or Oversight Manager account, or if your agency needs to report staff changes, please send an email to: [Assistor.Admin@health.ny.gov](mailto:Assistor.Admin@health.ny.gov).

## *Navigators Only*

- When Navigator Agencies are submitting contract documents (vouchers, annual packet documents, progress reports, site schedules, etc.) and related questions to the New York State Department of Health, please send them to: [Navigator.Admin@health.ny.gov](mailto:Navigator.Admin@health.ny.gov).
  - CC your Navigator Contract Manager
- When Navigator Agencies are submitting media approval requests, educational and marketing material approval requests, and consumer story submissions to the New York State Department of Health, please send them to: [Navigator.Media@health.ny.gov](mailto:Navigator.Media@health.ny.gov).
  - CC your Navigator Contract Manager

# RECERTIFICATION PROCESS

- All Assistors who are registered or completed the in-person or online Assistor Certification training by **10/31/2021** will be required to view the recertification webinars.
- Keep track of the date you watched the live webinar or the recording.
- Mid-November, supervisors will be emailed a Recertification Report or spreadsheet and must attest to the accuracy of each date the Assistor said they viewed the webinar.
- The webinars that are required for 2021 will be posted at:

<https://info.nystateofhealth.ny.gov/SpringTraining>

## 2021 Spring Training

News & Events

Oct 14, 2021



| Session                   | Topic  | Training Materials  |
|---------------------------|--|---|
| 1<br>April 28, 2021       | American Rescue Plan Act of 2021 and Changes to NYS's Essential Plan   | Presentation<br>Video<br>American Rescue Plan Counting Income Resource<br>APTC Expected Premium Contribution Chart After ARP<br>Q&A<br>SADP Email   |
| 2<br>Pre-recorded Webinar | Part 2 - American Rescue Plan Act of 2021: Health Insurance Changes for Unemployed New Yorkers   | Presentation<br>Video<br>Q&A  |
| 3<br>July 21, 2021        | Privacy and Security - Providing a reminder and an update on the Privacy and Security rules and regulations by which all NY State of Health Assistors must comply. | Presentation<br>Video<br>Q&A<br>ID Proofing Tool Kit<br>Authorized Representative Designation Form<br>Document Listing Checklist<br>Privacy Consents and Terms Rights and Responsibilities in English and Spanish |
| 4<br>August 25, 2021      | Cultural Humility and NY State of Health Race and Ethnicity Questions  | Presentation<br>Video<br>Race & Ethnicity Scenario - Example<br>Q&A   |
| 5<br>September 29, 2021   | Open Enrollment & Renewals and the NY State of Health Care at Home Program   | Presentation<br>Video   |

# THANK YOU FOR JOINING US!



- Please complete the Survey Monkey Evaluation of the Webinar:
  - NY State of Health Updates and 2022 QHP & EP Plan Lineup
- As always, watch for the video and materials to be posted to:  
<http://info.nystateofhealth.ny.gov/SpringTraining>