To help you enjoy hassle-free healthcare administration, Empire is committed to providing information you need, when you need it. In this section you will find a:

- **Quick Guide to Useful Contact Information** – important phone numbers and addresses to help in your day-to-day interactions with Empire

- **Precertification Guide** – detailed listing of services that require precertification

- **Dedicated Service Centers Directory** – listing of service centers dedicated exclusively to our large clients

- **Dedicated Service Centers Index** – quick reference of client-specific prefixes for our large accounts
# Quick Guide to Useful Contact Information

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<tr>
<th>Purpose</th>
<th>Direct HMO&lt;sup&gt;1&lt;/sup&gt;</th>
<th>Child Health Plus&lt;sup&gt;1&lt;/sup&gt;</th>
<th>POS&lt;sup&gt;1&lt;/sup&gt;</th>
<th>EPO&lt;sup&gt;1&lt;/sup&gt;</th>
<th>BlueCard&lt;sup&gt;2&lt;/sup&gt; (For Out-of-Area Members Only)</th>
<th>Traditional Indemnity&lt;sup&gt;1&lt;/sup&gt;</th>
<th>Go online to <a href="http://www.empireblue.com">www.empireblue.com</a></th>
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<tr>
<td>Precertification</td>
<td>Empire Medical Management Phone: 1-800-441-2411 Fax: 1-800-241-5308</td>
<td>Empire Medical Management Phone: 1-800-845-4741 Fax: 1-800-241-5308</td>
<td>Empire Medical Management Phone: 1-800-982-8089</td>
<td>Not Applicable</td>
<td>Refer to Member’s ID Card</td>
<td>To precertify or search a precertification: Log in to Facility Online Services. Under Blue Tools, click “Create Precertification” or “Precertification Search.”</td>
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<tr>
<td>Claim Status/Review</td>
<td>Managed Care Provider Services 1-800-992-BLUE (1-800-992-2583)</td>
<td></td>
<td>Claim Status/Review: 1-800-713-4173 Eligibility: 1-800-676-BLUE (1-800-676-(2583))</td>
<td>Empire Provider Services 1-800-992-BLUE (1-800-992-2583)</td>
<td>To check the status of a claim: Log in to Facility Online Services. Under Blue Tools, click “Search Claims.” Member Search is available on the Facility Online Services landing page. Other online claims options will be available in early 2006.</td>
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<td>Claims Submission</td>
<td>Empire PO Box 1407, Church Street Station New York, NY 10008-1407 Include YLN, YLP or unique prefix</td>
<td>Empire PO Box 1407, Church Street Station New York, NY 10008-1407 Include YLB, YLD, YLE, YLK or unique prefix</td>
<td>Non-Empire member claims** to: Empire BlueCard Program PO Box 3877, Church Street Station New York, NY 10008-3877 Include YLA or unique prefix</td>
<td>Empire PO Box 1407, Church Street Station New York, NY 10008-1407 Include YLA or unique prefix</td>
<td>To submit a claim: Log in to Facility Online Services. Under Blue Tools, click “Batch Claims” and follow the instructions. Other online claims options will be available in early 2006.</td>
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<td>HIPAA Information</td>
<td>Go to <a href="http://www.empireblue.com/facilities">www.empireblue.com/facilities</a> and click on HIPAA</td>
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<tr>
<td>Electronic Claim Submission</td>
<td>Electronic Commerce Services 1-866-889-7322</td>
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<td></td>
<td>Not Applicable</td>
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<tr>
<td>Change Your Directory Listing/Other Provider File Information</td>
<td>Contact your Empire Contract Manager or Provider Relations Representative</td>
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<td>Empire Maternity Care (For PCPs and OB/GYNs)</td>
<td>Empire Medical Management Phone: 1-800-845-4742</td>
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<tr>
<td>Member Questions</td>
<td>Refer to Member’s ID Card</td>
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1. Claims must be submitted within 180 days from date of service.
2. www.empireblue.com is not available for out-of-area members covered under the BlueCard® Program.
3. *Senior Plan Direct offers Medicare Advantage plans that are available in Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland and Westchester counties. For more information about Senior Plan Direct, please see Appendix 2 at the end of this Sourcebook.
4. **Claim is not from Empire, but is from another Blue Cross and Blue Shield plan.
The following is a list of commonly requested services that require precertification from our Medical Management Department. Failure to notify the Medical Management Department prior to any of the services below, or within specified time frames following an emergency admission, will result in a denial of payment or a reduction of benefits.

- Air Ambulance
- All Transplants
- Ambulatory Surgery (limited to possible cosmetic/reconstructive, outpatient transplants and ophthalmologic procedures)
- Cardiac Rehabilitation
- Detained Mothers/Newborns (>2 days following vaginal delivery or >4 days following cesarean section)
- Durable Medical Equipment
- Emergency Inpatient Admissions (Notification must be made within 48 hours)
- Home Healthcare
- Home Infusion Therapy
- Hospice Care
- Magnetic Resonance Imaging (MRI and MRA)
- PET Scans, CAT Scans, Nuclear Cardiology
- Mental Health and Substance Abuse (Refer to back of member’s identification card)
- Orthotics/Prosthetics
- Ophthalmologic Surgery
- Outpatient Physical Therapy/Occupational Therapy
- Outpatient Speech Therapy
- Chiropractic Visits
- Scheduled Inpatient Admissions (Hospitals, Skilled Nursing Facilities, Rehabilitation Facilities)
- Transfers to Acute Facilities

HMO members, including Child Health Plus, Healthy New York and Senior Plan Direct,* cannot be billed for any of the above services if payment is denied for failure to obtain precertification.

Except as expressly noted in this list, PPO, EPO, and Indemnity products place the responsibility of precertification on the member. If the member fails to notify us for a service that requires precertification, services may be denied or the member may be subject to a monetary penalty specific to his or her contract. You may choose to contact us to precertify on behalf of the member.

*Vendor or network provider is responsible for obtaining precertification.

*Senior Plan Direct offers Medicare Advantage plans that are available in Bronx, Kings, New York, Queens, Richmond, Nassau, Rockland, Suffolk and Westchester counties. For more information about Senior Plan Direct and a complete Senior Plan Direct Precertification Guide, please see Appendix 2 at the end of this Sourcebook.