City of New York Employees (NYCE) PPO Plan

Frequently asked questions

Overview

Starting **Jan. 1, 2026**, UnitedHealthcare and EmblemHealth will offer the New York City Employees (NYCE) PPO plan. This plan is for City of New York employees, non-Medicare retirees and their dependents. It provides, streamlined services to improve the health care experience for you and your patients.

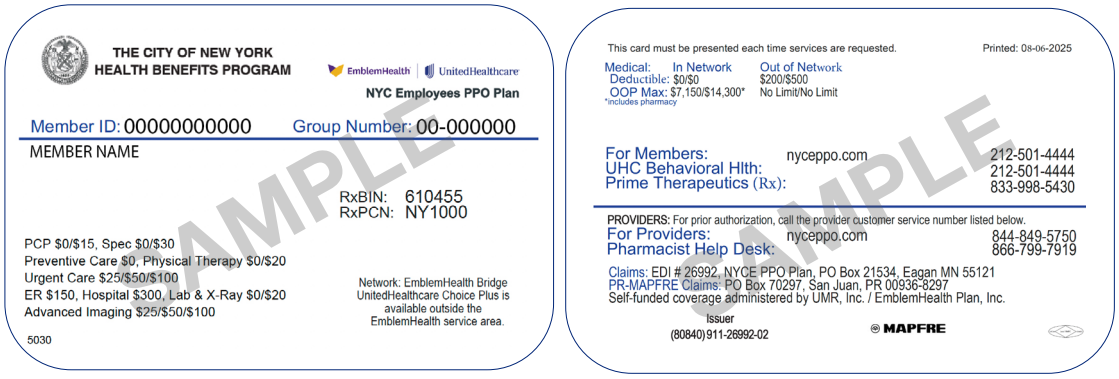
What's changing for you?

- Members in 13 downstate New York State counties (see Network details and contract reimbursement section on next page) will use the EmblemHealth network at EmblemHealth contracted rates
- Outside this area, members will use the UnitedHealthcare Choice Plus network at UnitedHealthcare contracted rates
- Network health care providers contracted with either EmblemHealth or UnitedHealthcare will use a single, secure portal to manage care for NYCE PPO plan members

What's changing for members?

Members will receive one ID card* instead of two. The new card will show UnitedHealthcare, EmblemHealth and MAPFRE logos. Here's an example of what it will look like:

* Current ID cards are valid until **Dec. 31, 2025**. Members should use the new NYCE PPO plan ID card starting **Jan. 1, 2026**.



Sample member ID card for illustration only; actual information varies depending on payer, plan and other requirements.

Is the EmblemHealth GHI CBP/Anthem BlueCross and BlueShield PPO plan still available?

No. Members will be automatically enrolled in the NYCE PPO plan on **Jan. 1, 2026**. There will be no gap in coverage.

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Network details and contract reimbursements

Is there a specific network for the NYCE PPO plan?

Yes. Members who receive care in the following counties will use the **EmblemHealth Bridge Program*** for professional and facility services:

- Bronx
- Duchess
- Kings
- Nassau
- New York
- Orange
- Putnam
- Queens
- Richmond
- Rockland
- Suffolk
- Ulster
- Westchester

If your practice is outside these counties, members will use the UnitedHealthcare Choice Plus network.

What is the EmblemHealth Bridge Program?

The **EmblemHealth Bridge Program** connects members to a group of networks through EmblemHealth's affiliated companies and partners. For the NYCE PPO plan, there's one key difference: health care providers in the EmblemHealth Bridge Program who are outside the 13 downstate New York State counties are **not** in network for this plan. Outside those counties, members must see UnitedHealthcare network health care providers.

How are rates determined?

Rates depend on where the service is provided. If care is delivered in one of the 13 downstate New York State counties, EmblemHealth rates apply. Outside that area, UnitedHealthcare rates apply.

Which contract is in network if I have contracts with both EmblemHealth and UnitedHealthcare?

If your practice is in one of the 13 downstate New York State counties, your EmblemHealth contract will be considered in network for the NYCE PPO plan.

How will I be reimbursed as a contracted provider?

Reimbursement depends on your location and contract:

- EmblemHealth rates apply to facilities and health care professionals (except behavioral health) in the 13 downstate counties
- UnitedHealthcare rates apply outside those counties
- Behavioral health professionals are reimbursed based on their UnitedHealthcare contract, regardless of location

Check your network contract for details.

What if I'm located outside the 13 downstate counties but not contracted with UnitedHealthcare?

If you're outside the 13 counties and only contracted with EmblemHealth, you're **out of network** for this plan.

Do I need to be contracted with UnitedHealthcare or EmblemHealth to see NYCE PPO plan members?

No. Members may receive care from both network and out of network health care professionals.

Can I join EmblemHealth's network if I'm already contracted with UnitedHealthcare?

Yes. You can apply to join EmblemHealth's network for the 13 downstate counties. Visit **emblemhealth.com** to learn more.

Whom do I contact after Jan. 1 for claims with service dates before Jan. 1, 2026?

For questions about claims with service dates before **Jan. 1, 2026**, contact EmblemHealth Provider Services at **866-447-9717**. If you're an EmblemHealth network health care provider, you can also send a message through the **EmblemHealth Provider Portal**.

Claims

How do I submit claims for services before Jan. 1, 2026?

Use your current process to submit claims based on the type of service:

EmblemHealth professional claims

Submit electronically using Payer ID 13551 or mail to:
EmblemHealth
P.O. Box 2832
New York, NY 10116-2832

EmblemHealth facility claims

Submit electronically using Payer ID 13551 or mail to:
EmblemHealth
P.O. Box 2833
New York, NY 10116-2833

Anthem facility claims

Follow the existing submission process for Anthem Blue Cross and Blue Shield.

Starting Jan. 1, 2026?

Submit medical claims to the NYCE PPO Plan using Payer ID 26992 or mail to:
NYCE PPO Plan
P.O. Box 21534
Eagan, MN 55121

Submit appeals to the NYCE PPO Plan using Payer ID 26992 or mail to:
CNY Post Service Appeals
P.O. Box 211381
Eagan, MN 55121

Submit Puerto Rico claims to:
PR-MAPFRE
P.O. Box 70297
San Juan, PR 00936-8297

Note: Starting **Jan. 1, 2026**, all clearinghouse organizations submitting to 26992 must send transactions to Optum or a clearinghouse connected to Optum. Send all 835/ERAs under UMR Payer ID 39026.

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How do I submit appeals or reconsideration requests for claims before Jan. 1, 2026?

Professional claims:
Send appeals or grievances to EmblemHealth:

- **Mail:** P.O. Box 2844, New York, NY 10116-2844
- **Fax:** 212-510-5320
- **Online:** Use the **EmblemHealth Provider Portal**

Facility claims:
Follow the current process for submitting to Anthem Blue Cross and Blue Shield.

Member eligibility and benefits

How can member eligibility and benefits be verified?

You can verify member eligibility and benefits in 2 ways:

- **Online:** Use the secure Provider Portal to check eligibility, benefits, claims, forms and remittance details
  - More information about the portal and registration will be shared before **Jan. 1, 2026**
  - If you already have a One Healthcare ID with another platform, you can use the same ID to access the new NYCE PPO provider portal
- **Phone:** Call Provider Services at **844-849-5750** (on the back of the member's ID card)

Can I collect cost-share amounts up front from NYCE PPO plan members?

Yes. You may request the member's cost share (such as copays or coinsurance) at the time of service.

Can NYCE PPO plan members be balanced billed?

No. Members cannot be balance billed for network services. They are only responsible for the applicable cost share.

Do NYCE PPO plan members need to choose a primary care physician (PCP)?

No. Selecting a PCP is not required.

Do NYCE PPO plan members need a referral to see a specialist?

No. Referrals are not required to see a specialist.

Prior authorizations

Are prior authorizations required?

Yes. Prior authorization is required for certain network health care services.

How do I request a prior authorization?

You can use one of the following methods to request prior authorization:

- **Online:** Use the secure provider portal at **nyceppo.com**. Download the **Prior Authorization Guide** for information and instruction.
- **Phone:** Call Customer Services at **844-849-5750** (on the back of the member's ID card) and follow the prompts

What if my patient starts in-patient care in 2025 and is still in-patient after Jan. 1, 2026?

The prior authorization submitted to the Empire Plan for services starting in 2025 will be honored by the New York City PPO plan after **Jan. 1, 2026**.

How do I submit authorization requests during the transition?

Prior authorization requests for services beginning **Jan. 1, 2025**, can be submitted in the **NYCE PPO provider portal** or call Provider Services at **844-849-5750**.

If services start before **Jan. 1, 2026**, requests should be submitted to the Empire plan.

How are pharmacy related claims managed?

Clarifications and other pharmacy related requests are managed by Prime Therapeutics.

Pharmacy (PBM) - 866-799-7919

Is advance patient notification required for services not covered?

Call the NYCE PPO Provider Service Center at **844-849-5750** to confirm if a particular service is covered.

Provider portal

Will there be a new provider portal for the New York City Employees PPO plan?

The NYCE PPO plan provider portal is a secure site for managing enrolled patients starting **Dec. 1, 2025**. Use it to review claims, eligibility, benefits and submit authorization requests for 2026 dates of service.

- Download the **NYCE PPO Plan Provider Portal FAQ** to learn more.

Do I still have access to the previous portal?

Yes. You will still be able to access the previous portal for dates of service prior to **Jan. 1, 2026**.

Questions? We're here to help.

- For services before **Jan. 1, 2026,** contact
  - Contact EmblemHealth Provider Services at **866-447-9717** or send a message through the EmblemHealth Provider Portal.
- For services on or after **Jan. 1, 2026**, visit **nyceppo.com** or call the NYCE PPO Provider Service Center at **844-849-5750**.

PCA-1-25-02689-E&I-FAQ_12092025

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