



Healthfirst Pro and Pro Plus EPO Plans

2019 Member Handbook



This handbook will answer questions about your Healthfirst plan and benefits. Keep this handbook where you can find it when you need it.

Welcome to health insurance that's here for you.

Thank you for choosing Healthfirst.

We're here for you with access to a wide range of care and services to fit your needs, including our large network of doctors and specialists at many top hospitals and medical centers in New York City and on Long Island.

This Member Handbook provides you with important information—like your benefits, online tools, and more—to help you get to know your health plan. We also included the following member materials in your **Welcome Kit**:

- **Dental and Vision Benefits Overview:** Specific services and savings that come with Healthfirst Pro and Pro Plus EPO plans
- **Summary of Benefits and Coverage (SBC):** An easy-to-read list of what your plan covers and what it costs
- **Access to Care Overview:** Details ways to get access to care through 24/7 telemedicine and urgent care centers

You can count on us.

If you ever have any questions, we're here to help.

Visit **MyHFNY.org** to register your secure Healthfirst account and get the information you need, including a complete list of plan benefits and coverage (your Certificate of Coverage). Or you can call Member Services at **1-855-789-3668** (TTY 1-855-779-1033), Monday to Friday, 8am–6pm.

Need answers to your health questions?

Healthfirst is here for you online, in person, and over the phone.

This handbook is available in English, Spanish, and Chinese. We also have free language services that include access to an interpreter and translation of important documents for you. Please call Member Services at 1-855-789-3668 for more information.

Este manual está disponible en inglés, español y chino. También contamos con servicios lingüísticos gratuitos que incluyen acceso a un intérprete y traducción de documentos importantes. Para más información, por favor comuníquese con el Departamento de Servicios a los Miembros al 1-855-789-3668.

本手冊可用英文、西班牙文與中文提供。我們還為您免費提供多種口譯服務，翻譯重要文件。詳情請致電會員服務部 1-855-789-3668。

Getting started.

Here's a list of the items you should have received by now.

- Your **Member ID card** identifies you as a Healthfirst member and helps you receive care at doctor offices, hospitals, specialists, urgent care centers, and pharmacies in the Healthfirst network. Please carry it with you at all times.
- A **welcome letter with Primary Care Provider (PCP) assignment** that shows your account information and the PCP assigned to you. Of course, you may switch your PCP (within the Healthfirst network) at any time.

Get the most from your Healthfirst health plan:

- Visit **MyHFNY.org** to sign up for your own secure Healthfirst account, accessible 24/7. See page 12 for details.
- Decide whether you want to switch from your assigned PCP to another doctor within the Healthfirst network. Visit **MyHFNY.org** to view our provider directory and select a new PCP, or call Member Services to make the change.
- Schedule your **annual checkup** with your PCP. All recommended preventive care visits are included with your Healthfirst plan (learn more about your no-cost preventive care benefits on page 8).
- Set up your **telemedicine account** through **Teladoc**. Talk to a U.S. board-certified doctor 24/7 at no cost to you. See page 8 for details.
- Complete your **Annual Health Assessment** at **MyHFNY.org**. It's a simple online survey that helps us get to know your health needs better.
- If you need help managing a chronic condition like asthma or diabetes, call and enroll in our no-cost **Care Management Program**. See page 10 for more information.
- Find a **Healthfirst Community Office** near you so you can get answers to your health insurance questions in person. You can find a list at **healthfirst.org/community-offices**.

Set your preferences:

By signing up for your secure account at **MyHFNY.org**, you'll be able to choose how you'd like to receive communications from Healthfirst, make payments, and more!



Get to know Healthfirst.

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What should I know about my health plan?

Your Healthfirst plan covers essential health benefits, including access to:



Preventive and wellness visits (including annual checkups, shots, and mammograms)



ER and urgent care visits



Hospital stays



Maternity care



Behavioral health and substance abuse services



Prescription drug coverage



Physical and occupational therapy



Ambulatory (outpatient) patient services, including PCP/specialist visits



Lab tests and imaging (including blood tests and X-rays)



Pediatric dental and vision care

You can trust Healthfirst to be there for you.

For specific plan benefits and cost-of-care estimates, please visit **MyHFNY.org**.

Our secure site is mobile-optimized so you can access your Healthfirst account on your smartphone or any mobile device.

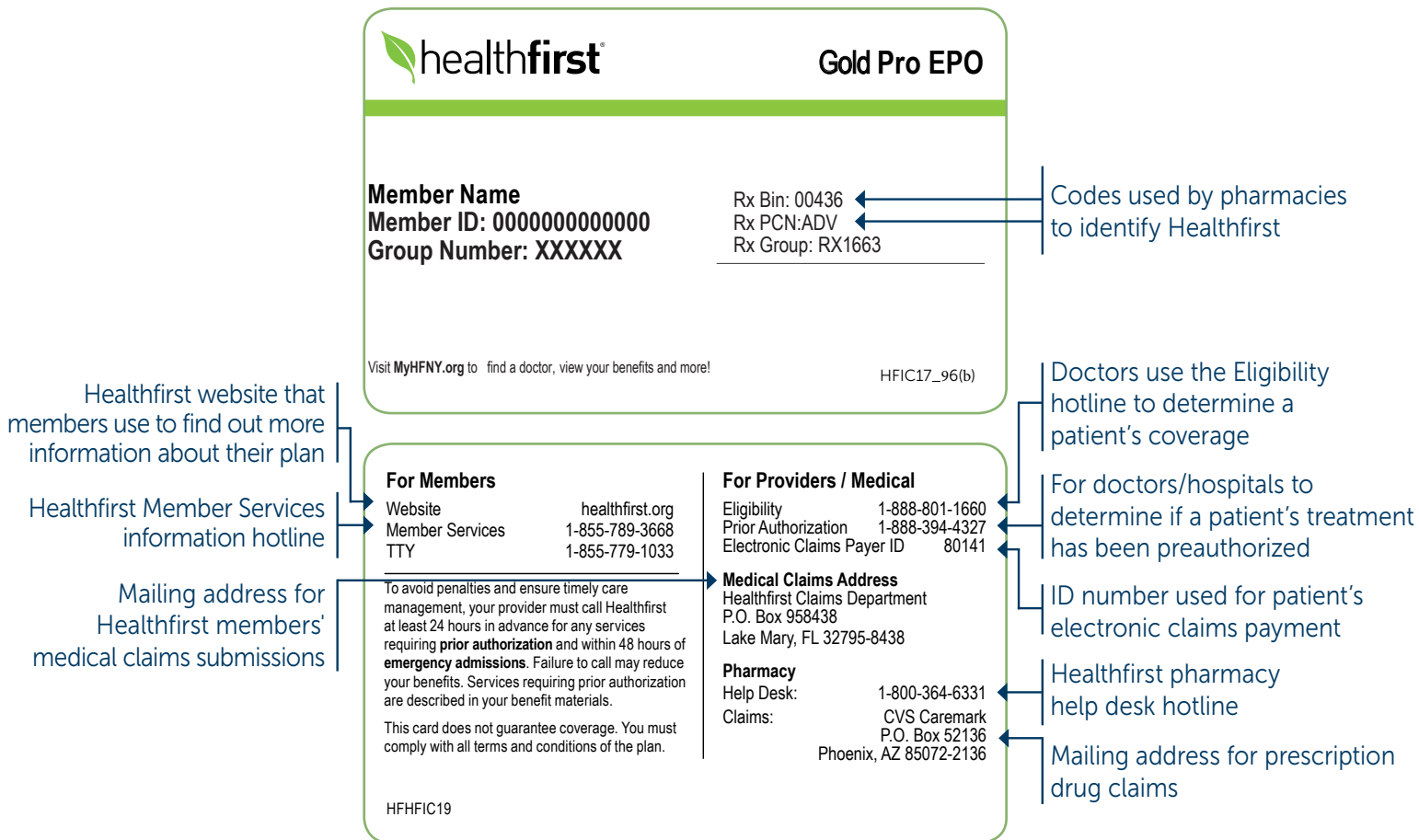
You're also welcome to visit any Healthfirst Community Office for help managing your plan benefits.

Tip!

Your covered services are available to you from a provider in our network. Depending on the service and your plan, there may be some out-of-pocket costs involved. For more health insurance terms, see our glossary starting on page 18.

What information is on my Member ID card?

Please remember to always carry your Healthfirst Member ID card so you'll have it available when you need medical services. You'll need your Member ID card to receive healthcare services from a doctor or hospital, or when you fill a prescription. If you haven't yet received your Member ID card in the mail, please call Member Services at **1-855-789-3668**.



What if I lose my Member ID card?

Don't worry, you're still covered! The fastest—and the easiest—way to request a replacement card is to log in to your secure Healthfirst account at **MyHFNY.org**. You can also call Member Services at **1-855-789-3668**, Monday to Friday, 8am–6pm.

Tip!

If you need to see a doctor before you get your replacement Member ID card, visit MyHFNY.org to print a temporary card or pull up an image of your Member ID card on your smartphone or tablet.

How do I change my Primary Care Provider (PCP)?

Your PCP is the doctor you go to for your healthcare needs. Your PCP can be a general doctor, an OB/GYN, or (in some cases) a specialist.

Your PCP can help you with things like:

- Guiding you through healthcare concerns
- Coordinating your care
- Authorizing treatments
- Recommending specialists

To change your PCP:

If you would like to change your PCP from the one initially assigned to you and you have a physician in mind, first check **HFDocFinder.org** to see if he or she is in our network. Next, log into your account at **MyHFNY.org**, look under the "Physician and Facilities" tab, and click on "Change PCP."

Having trouble? Call Member Services at **1-855-789-3668** or visit one of our convenient Healthfirst Community Offices near you.

IMPORTANT: Make sure your doctor, specialist(s), urgent care center, hospital, or lab is **in-network** before making an appointment. This can help you to avoid any surprises when you need care. Why? Because your plan's coverage doesn't include out-of-network benefits (except for emergency care). That's why participating Healthfirst providers accept an agreed-upon rate for their services. If you visit a doctor or hospital that is not in our network, you are responsible for the full cost of your care.

Please visit **HFDocFinder.org** to find a doctor/specialist, a medical facility, or a lab in the Healthfirst network.

What are my Health Savings Account (HSA) benefits?

Bronze 6650 Pro EPO & Pro Plus EPO, Bronze Pro EPO and Bronze Pro Plus EPO plan members only: If you signed up for an HSA, you will receive your HSA card and additional account information soon from the HSA administrator.

Once you receive your HSA card, visit **healthequity.com** and click "Login" to set up your new account. Be sure to review your account carefully and confirm that all your information is correct.

You can start making contributions to your HSA once your Healthfirst plan becomes effective.

If you have any questions regarding your HSA, please call **1-844-281-0927** or visit **healthequity.com/healthfirst**.

You are not required to select a primary care provider (PCP) to access and receive services; however, if you do not select a PCP, Healthfirst will select one for you. You may change your PCP by contacting Member Services at 1-855-789-3668. Your PCP will receive copies of all correspondence and decisions related to your care, regardless of whether you have chosen him/her or if (s)he has been selected for you.

What healthcare services do I have access to with my Healthfirst plan?

PLEASE NOTE: If your doctor provides medical services that are not part of a routine exam, you may have to pay out-of-pocket for them (costs which your health plan does not cover). For example, during your annual physical, your doctor might find something irregular and may request an additional blood test or other screenings. Your doctor visit is considered preventive and is covered under your plan, but you may have to pay towards the cost of the follow-up blood test and other screenings. Ask your doctor to check to see if services are covered by your plan.

To see a full list of preventive services covered under your health plan, go to **MyHFNY.org** and review your Certificate of Coverage.

As a Healthfirst member, you have access to many healthcare services, including preventive care, dental and vision benefits, prescription drug coverage, and more.

Preventive Care

Your recommended preventive care services are covered 100% when you see an in-network doctor. These services include:

- Routine exams and checkups
- Immunizations (shots)
- Screenings (like cholesterol and blood pressure)
- Mammograms
- Maternity care
- And more!

Dental and Vision Care*

Dental and vision benefits differ, depending on your Healthfirst health plan. Healthfirst Pro EPO plan members have pediatric dental and vision benefits for children up to **19 years of age**, and Healthfirst Pro Plus EPO plan members have dental and vision benefits **for all ages**.

Prescription Drug Coverage

Your prescription drug benefit includes a tiered drug list to help you save money on many brand-name and generic medications, a convenient mail order option, and more. For more details, see page 11.

Telemedicine**

Teladoc gives you 24/7 access to U.S. board-certified doctors by phone or videochat when your PCP is not available.[†] These doctors can diagnose, recommend treatment, and write prescriptions for most non-emergency care at no cost. Dermatology services are also available.

Set up your Teladoc account today by visiting **Teladoc.com/healthfirst** or calling **1-800-Teladoc** (835-2362). Download the Teladoc mobile app so you have access when you need it.^{††}

Acupuncture

Practiced for thousands of years, acupuncture is an alternative therapy option that may provide relief from pain, discomfort, and other problems. Healthfirst helps cover the cost of acupuncture for our members.

*Dental benefits are administered by DentaQuest. Vision benefits are administered by Davis Vision.

**Copays apply to Bronze level plans for Healthfirst Pro and Healthfirst Pro Plus until deductible is met.

[†]Telemedicine isn't a replacement for your Primary Care Provider (PCP). Your PCP should always be your first choice for care and regular visits.

^{††}The Teladoc website and the mobile app are available only in English. If you need assistance in another language, please call Teladoc at 1-800-835-2362. Interpretation services are available.

What about access to urgent care and emergency care?

Urgent Care

Our in-network urgent care centers give you access to immediate, non-emergency care whenever your doctor's office is closed. In non-emergency situations, this is a less expensive and more efficient option than an Emergency Room (ER) visit. Urgent care centers are walk-in medical facilities (no advance appointment needed) equipped to handle minor health issues like:

- Infections
- Upset stomach
- Earaches
- Fevers
- Asthma*
- Sprains
- Minor fractures/Broken bones
- Wounds/Stitches
- X-rays (most locations)
- And more!

Visit [HFDocFinder.org](https://www.hfdocfinder.org) to find an in-network **urgent care center** near you. Many of them have extended hours and are open seven days a week (even on holidays), but it's a good idea to call ahead to find out their hours and offered services.

Emergency

If you have an emergency, always call 911 or visit the nearest emergency room, especially if you think waiting will worsen your condition. Emergencies are things like:

- Uncontrollable bleeding
- Poisoning
- Loss of consciousness
- Chest pain
- Severe allergic reaction
- Behavioral health issues (like severe anxiety and depression)
- Substance overdose

Did you know?

You don't need preauthorization if you need immediate emergency care. However, please call us within 48 hours of being admitted to let us know you've been treated in an emergency room. If you don't do this, you may have to pay more for the cost of your care.

*Contact your doctor at the earliest sign of an asthma flare-up to determine if urgent care or the ER would be the best option for your care.

What else does Healthfirst offer to help me stay healthy?

In addition to offering access to preventive, dental, vision, and urgent and emergency care, we also offer the following:

To learn more about **ExerciseRewards**, call **1-877-810-2746**, Monday to Friday, 8am–9pm



ExerciseRewards™ Program

With **ExerciseRewards**, you can get paid back up to \$200 of your membership dues every six months if you visit a qualifying fitness center at least 50 times during the same six-month period. Plus, your covered spouse or domestic partner can get reimbursed, too—up to \$100 every six months for going to the fitness center 50 times or more.

To learn more about **Active&Fit Direct**, call **1-877-810-2746**, Monday to Friday, 8am–9pm



Active&Fit Direct™

Working out just got easier. For just \$25/month plus a one-time enrollment fee of \$25, you can get a standard membership to a fitness center in your area. Track your activity, monitor your progress, achieve your fitness goals, and so much more! (Note: a three-month membership commitment is required.) Call **Active&Fit Direct** to learn more and find out how you can join.

For more information, call our **Member Services department at 1-855-789-3668** (TTY 1-855-779-1033), Monday to Friday, 8am–6pm



Care Management Program

If you're living with a chronic condition like diabetes, high blood pressure, asthma, or chronic obstructive pulmonary disease (COPD), **Healthfirst's Care Management Program** can help. We'll help you coordinate care between your PCP and specialists to make sure they all stay up-to-date with your care, so you can get access to the services you need to stay healthy. Best of all, there's no cost to you.

Chiropractic Services

If you suffer from chronic stiffness or aches in your neck and back, you may benefit from seeing a chiropractor in our network. With Healthfirst, you **don't need a referral** from your PCP to see a participating chiropractor in our network. Visit **HFDocFinder.org** to find a chiropractor near you. Make an appointment today.

What are my pharmacy benefits?

Brand-Name and Generic Drugs

Sometimes you may be able to choose between brand-name and generic drugs. Using generic instead of brand-name drugs can help you save money. By law, generic drugs must meet the same quality standards as brand-name drugs, so they have the same active ingredients, strength, and dosage as brand-name drugs but cost much less. Ask your doctor if there is a generic version of the medication you're prescribed.

Formulary (Drug List) and Prior Authorization

Our formulary (also called a drug list) can be found online at **MyHFNY.org**. Your prescription drug benefit is divided into three tiers/levels to make it easier for your doctor to choose the most appropriate and lowest-cost drug for you. Your doctor may be required to get prior authorization/approval for certain drugs, which helps make sure you are getting the most appropriate and affordable drug. **Please note:** Healthfirst might not cover certain drugs without prior authorization.

CVS Pharmacy Mail Order Service

Save yourself a trip to the pharmacy by having your prescription drugs sent right to your home, office, or any location that works for you. You may be able to order a 90-day supply of your medicine, which can cost less than three individual 30-day orders. Your doctor has three easy ways to order your prescriptions for you:

1. Call CVS Pharmacy Mail Order Service at **1-800-378-5697**
2. Fax your prescription to **1-800-378-0323**
3. Mail your prescription to
P.O. Box 2110, Pittsburgh, PA 15230-2110

If you would like to download a Mail Order Service form, visit **healthfirst.org**, go to the "Info for Members" tab, click on "Plan Materials," and select your health plan.

Manage your prescriptions conveniently and easily online.

Register your account at **caremark.com** to quickly order refills, compare medication costs, find lower-cost options, get prescription alerts, check order status, get your medicine mailed to you, and more.

Your Prescription Drug Coverage

Tier 1

is your lowest copay. This level includes Food and Drug Administration (FDA)-approved generic drugs. Generic drugs are just as safe and effective as brand-name drugs but cost less. Ask your PCP if generic versions are right for you.

Tier 2

is your mid-range copay. This level includes preferred brand-name drugs.

Tier 3

is your highest copay. This level includes non-preferred brand-name drugs. It also includes any drugs that do not appear on our drug list and which you must receive prior authorization for before ordering.

Tip!

Healthfirst members have access to many pharmacies and pharmacy benefits. Plus, using a pharmacy in our network will cost less than using an out-of-network pharmacy. Visit **HFDocFinder.org** to find an in-network pharmacy near you.

What kind of online tools are available?

Access your secure Healthfirst account 24/7 at MyHFNY.org to:

- Search for a doctor, pharmacy, urgent care center, or clinic in our network
- Change your PCP
- View and print out a temporary member ID card
- View recent medical claims and authorizations
- Review your plan benefits
- Choose how you would like to receive communications from Healthfirst
- Estimate your treatment costs
- Keep track of your deductible expenses
- Take an online Annual Health Assessment survey
- Access pharmacy benefits through CVS Pharmacy
- See a complete list of prescription drugs covered under your plan

Whether you want to find a doctor or estimate the cost of a health service, we've made sure you can easily do it **online 24/7**—using your computer, tablet, or even your smartphone. Our website is available in English, Spanish, and Chinese.

Activate your secure Healthfirst account today. Here's how:

Step 1

- Visit **MyHFNY.org**
- Click "New Users Sign Up," read the License Agreement, and click "Agree"

Step 2

- Fill out your personal information, including your Healthfirst member ID number
- Click "Next," create your Username and Password, and click "Next"

Step 3

- Select your security questions, fill in the answers, and click "Next"
- Verify your information and click "Complete"

And you're all set!

Having trouble getting online?

You can always call Member Services for assistance. We'll set up your online account for you and help you with anything else you may need. Call us at 1-855-789-3668, Monday to Friday, 8am–6pm.

Need a new doctor or want to see if your current doctor is in our network?

Visit **HFDocFinder.org** and select your Healthfirst health plan to access our directory and get the information you need—including office hours, locations, and hospital affiliation. Besides finding doctors in our network, you can also search for specialists, dentists, pharmacies, behavioral health providers, hospitals, urgent care centers, acupuncturists and more.

Want to see an estimate of what a certain medical service, supply, or procedure costs before going to the doctor?

Go to **HFCostLookUp.org** to see your estimated costs, reimbursement amount, and out-of-pocket costs for:

- Tests (including X-ray, ultrasound, blood, allergies, etc.)
- Treatments (such as acupuncture, injections, and allergy shots)
- Transportation (ambulance)
- Supplies (diabetic, medical, and surgical)
- Equipment (orthopedic, wheelchairs, and accessories)

Not sure of a health insurance term?

See our glossary starting on page 18.

Did you know?

The cost of lab tests (e.g., blood and urine) counts toward your deductible. There may be some out-of-pocket costs after you've met your deductible.



What is an Explanation of Benefits (EOB) statement?

An **Explanation of Benefits (EOB)** is a statement we send you after we process a claim. It's not a bill. It's simply a summary showing you the following information:

- Patient's name
- Doctor's name
- Date of the appointment
- Type of healthcare service
- How much was charged
- How much we paid
- How much (if anything) you owe

What are the steps in the claims process?

1. You go to your doctor and pay a copay or coinsurance, if applicable.
2. Your doctor submits a claim to Healthfirst for the healthcare services provided to you.
3. We process the claim based on your plan benefits.
4. We let your doctor know how much we're paying for covered services and how much, if anything, you have to pay out of your own pocket.
5. We then send you an Explanation of Benefits (EOB) in the mail. This EOB is not a bill. It's a summary showing you how we processed the claim and what, if anything, you owe your doctor. You can also view your EOB online through your secure Healthfirst account at **MyHFNY.org**.
6. If you owe your doctor any money, he or she will send you a bill and you can pay your doctor directly.
7. If your doctor bills you for more than the amount on the EOB, call Member Services so we can help make sure your bill is correct. This claim process works the same way when you visit other types of in-network healthcare providers, like specialists, hospitals, and pharmacies.
8. As long as you choose doctors and hospitals in our network, you'll only have to pay your deductible, copay, and coinsurance. If you go to a doctor or hospital that is out-of-network, you will have to pay more unless we have authorized the service beforehand or it's an emergency. If it's not an emergency or services were unauthorized, you will have to pay your copay and coinsurance plus the doctor's or hospital's normal rate.

You can also see all your claims and recent medical services on MyHFNY.org.

If you have any questions about an EOB you receive, call Member Services at **1-855-789-3668**. Have your member ID number and the claim number ready when you call.

How do I contact Healthfirst?

Healthfirst is here for you, with multiple resources to answer your questions. The fastest way to get the answers you need is usually online, but we're also available to talk to you over the phone or in person at Healthfirst Community Offices.

ONLINE

Healthfirst Websites	healthfirst.org (For general information) MyHFNY.org (Log in to your secure Healthfirst account) HFDocFinder.org (Find a doctor, specialist, or hospital) HFCostLookUp.org (Check the cost of a service or procedure) healthfirst.org/community-offices (View a list of our locations)
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MAIL

General Member Correspondence	Healthfirst Pro/Pro Plus Plans 100 Church Street New York, NY 10007
Medical Claims	Healthfirst Claims Department P.O. Box 958438 Lake Mary, FL 32795-8438
To Request an External Appeal Application	New York State Department of Financial Services One Commerce Plaza Albany, NY 12257 1-800-400-8882, dfs.ny.gov
CVS Pharmacy Mail Order Prescription Service (only)	P.O. Box 2110, Pittsburgh, PA 15230-2110

PHONE

Member Services (Medical, dental, vision, and behavioral health benefits)	1-855-789-3668 Monday to Friday, 8am–6pm English TTY 1-855-779-1033 Spanish TTY 1-855-779-1034
Care Management Department	1-855-789-3668 Monday to Friday, 8am–6pm English TTY 1-855-779-1033
General Pharmacy Services (For help with your prescriptions)	1-800-364-6331
CVS Pharmacy Mail Order Prescriptions Service (only)	1-800-378-5697 Monday to Friday, 8am–8:30pm
ExerciseRewards	1-877-810-2746 Monday to Friday, 8am–9pm
Active&Fit Direct	1-877-810-2746 Monday to Friday, 8am–9pm
Chiropractic Services	1-800-678-9133 Monday to Friday, 8am–9pm
Teladoc - Telemedicine	1-800-Teladoc (835-2362) 24/7 Service
HealthEquity - Health Savings Account	1-844-281-0927 7 days a week, 24 hours

Glossary

We know that there is a lot of confusion around healthcare. Sometimes it's hard to know what to do, or even to understand what certain terms mean. That's why we made this easy-to-read glossary for you. It will help take the mystery out of your health coverage.

Binder Payment

First premium payment some members have to make in full before their coverage can begin.

Claim

A request for payment that you or your doctor submits to Healthfirst when you get medical items or services.

Coinsurance

The fee you owe a doctor for your care after you meet your annual deductible. The amount you owe is part of the cost of your care. Healthfirst pays the rest. (**Note:** You pay all medical costs until you reach your deductible. After that, you pay only copays and/or coinsurance for covered services.)

Comprehensive Drug List

A listing of the most commonly prescribed drugs covered by your plan (also called a Formulary). It can be viewed at **MyHFNY.org**.

Copay

A flat fee you must pay for doctor visits or prescriptions.

Cost Sharing

A term for your out-of-pocket health expenses (like deductibles, coinsurance, and copays).

Covered Service

A service that your plan pays for if it is needed. Depending on the service, there may be out-of-pocket costs.

Deductible

The yearly out-of-pocket amount you must pay before your plan will pay for covered services. This is separate from your monthly premium payments.

Emergency

A severe, painful, or traumatic medical or mental condition that occurs suddenly and requires the immediate attention of a medical professional. Emergencies are things like uncontrollable bleeding, poisoning, loss of consciousness, chest pain, severe allergic reaction, mental health issues, or substance abuse-related emergencies. You do not need to get prior authorization if you need immediate care for an emergency. Call 911.

Explanation of Benefits (EOB)

A statement that you will receive after a claim has been filed. It explains the treatments that took place, the portion of the cost that is covered under your plan, and the amount left that you may have to pay directly to your provider.

Formulary

See Comprehensive Drug List.

Health Savings Account (HSA)

An account that you can put money into to save for certain future healthcare costs. Your contributions roll over year to year and move with you even when you switch jobs or retire.

In-Network Providers

These are doctors, hospitals, labs, and other healthcare providers that are covered under your health plan. You can find participating doctors and hospitals at **HFDocFinder.org**.

Maximum Out-of-Pocket (MOOP)

The most you'll have to pay out of your own pocket each year for medical services (it consists of deductibles, copays, and coinsurance).

Medically Necessary

Healthfirst will cover all services that we determine are “medically necessary.”

In order to be medically necessary, the service must be:

- Needed to prevent or treat an illness, injury, disease, or condition
- Provided in a safe setting
- No more expensive than any equally effective service

Healthfirst uses accepted standards and guidelines to determine if a service is medically necessary. Convenience is not considered medically necessary.

To learn more about what Healthfirst considers medically necessary, please refer to your Certificate of Coverage.

Out-of-Network Provider

A healthcare provider (doctor or hospital) that is not a part of our network. Unless it is an emergency, your Healthfirst plan only covers healthcare services from doctors, hospitals, and pharmacies that are in our network. You will pay more if you use a provider that is not in our network.

Preauthorization/Precertification

You or your healthcare providers are required to check with Healthfirst before you get certain healthcare services. This ensures that these healthcare services are necessary and are covered before you get them, so that you will not be responsible for the entire cost.

Preauthorization is required for many services, but it is never required in an emergency.

Premium

The monthly health insurance payment some members must make to keep their health insurance plan active. To activate their health coverage, they must make an initial payment called a binder payment.

Primary Care Provider (PCP)

The doctor you see for checkups, treatments, and referrals.

Referral

A recommendation (electronic note) from your PCP that allows you to get certain medical services from a specialist.

Specialist

A provider who focuses on a specific area of medicine to diagnose, manage, prevent, or treat certain types of symptoms and conditions.

Urgent Care Centers

Medical facilities that can provide immediate care to people with urgent, but not serious, health problems (i.e., an illness, an injury, or a non-life-threatening condition) that do not require emergency room care. You have the option of going to an in-network urgent care center when your PCP is not available.



To access your secure Healthfirst account, visit us at **MyHFNY.org**

You can use your smartphone or any mobile device!



@HealthfirstNY

Coverage is provided by Healthfirst Health Plan, Inc., Healthfirst PHSP, Inc., and/or Healthfirst Insurance Company, Inc. (together, "Healthfirst"). Plans contain exclusions and limitations.

Healthfirst complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-305-0408 (TTY 1-888-867-4132).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-866-305-0408 (TTY 1-888-542-3821)。