

## Healthfirst at a Glance

# Leaf and Leaf Premier Plans

Our Leaf and Leaf Premier plans offer two levels of coverage for individuals and families. They are Qualified Health Plans certified by the NYSOH marketplace.

### Healthfirst Leaf Plans (Standard)

Platinum Leaf | Gold Leaf | Silver Leaf  
Bronze Leaf | Green Leaf

- Provide coverage for the 10 essential health benefits
- Follow established limits on cost-sharing (e.g., deductibles, copayments, out-of-pocket maximums)

healthfirst		Platinum Leaf	
<b>Member Name</b>		Rx Bin:	004336
<b>Member ID: 0000000000000</b>		Rx PCN:	ADV
		Rx Group:	RX1108
Individual/Family Deductible:	\$0/\$0	<b>Copay</b>	
Individual/Family MOOP:	\$2,000/\$4,000	PCP Office Visit:	\$15
		Specialist Office Visit:	\$35
		Urgent Care:	\$55
		Emergency Room:	\$100
		Inpatient Hospital:	\$500
		Prescriptions:	\$10/\$30/\$60
Visit <a href="http://MyHFNY.org">MyHFNY.org</a> to find a doctor, view your benefits, pay your monthly premium, and more!			<b>HMO</b>

### Healthfirst Leaf Premier Plans (Non-Standard)

Platinum Leaf Premier | Gold Leaf Premier Plus | Gold Leaf Premier  
Silver Leaf Premier Plus | Silver Leaf Premier | Bronze Leaf Premier

- Provide coverage for the 10 essential health benefits plus adult dental and vision

### Healthfirst Off-Exchange Plans

- HMO A, HMO B, HMO C, HMO D, HMO E (Standard plans)
- HMO A-VAD, HMO B-VAD, HMO C-VAD, HMO D-VAD (Non-Standard plans)








### Service Area

The service area of the Leaf and Leaf Premier Plans includes New York City's five boroughs (the Bronx, Brooklyn, Manhattan, Queens, and Staten Island), and in Nassau, Suffolk, and Westchester counties.

### Access and Appointment Availability

- Healthfirst members must be able to locate a Healthfirst participating provider or his/her designated covering provider.
- It is not acceptable to have an outgoing answering machine message that directs members to the emergency room in lieu of appropriate contact with the provider or covering provider. If an answering machine message refers a member to a second phone number, a live voice must answer that phone line.

## Service Standards

Type of Service	Standards
 Emergency Care	0–3+ hours upon initial presentation. All emergency admissions must be called in no later than one business day after admission.
 Urgent Care	0–30 minutes upon presentation.
 Non-Urgent “Sick” Visits	Visit must be scheduled within 48 to 72 hours of request as indicated by the nature of the clinical problem.
 Routine Care	Appointment must be scheduled within 4 weeks of request.
 Adult Baseline and Routine Physicals	Appointment must be scheduled within 12 weeks of enrollment.
 Newborn Visits: Initial Visit to the PCP	Appointment must be scheduled within 2 weeks of hospital discharge.
 Well-Child Visits	Appointment must be scheduled within 4 weeks of request.

## Ancillary Authorizations

Chiropractic services	ASH: <b>1-800-972-4226</b>
Oncology management	eviCore: <a href="https://www.evicore.com">eviCore.com</a>
Pain management/spinal surgery	OrthoNet: <b>1-844-504-8091</b>
Pharmacy prior authorization	CVS Caremark®: <b>1-855-582-2022</b>
Radiology prior authorization	eviCore: <a href="https://www.evicore.com">eviCore.com</a>
Routine dental care	
<ul style="list-style-type: none"> <li>Healthfirst Leaf plans: dental benefits for children up to age 19</li> <li>Healthfirst Leaf Premier plans: dental benefits for all members</li> </ul>	DentaQuest®: <b>1-855-343-4267</b>
Specialty pharmacy	CVS Caremark®: <b>1-866-814-5506</b>
Routine vision care/eyewear and prior authorization	
<ul style="list-style-type: none"> <li>Healthfirst Leaf plans: vision benefits for children up to age 19</li> <li>Healthfirst Leaf Premier plans: vision benefits for all members</li> </ul>	EyeMed®: <a href="https://www.eyemed.com/portal/2265">EyeMed.filebound.com/portal/2265</a>

## Prior Authorization Guidelines

For services not listed above, you will need to submit a prior authorization request to Healthfirst. The most efficient way to submit and view the status of an authorization is through our Online Authorization Tool, located in Healthfirst's Provider Portal (login required).

Don't have access to the provider portal? Check out our guide to setting up an account or reach out to your network account manager. Alternatively, you can also fax your authorization requests to **1-646-313-4603**.

Prior authorization is not a guarantee of payment. Payment by Healthfirst for services provided is contingent upon the patient's active membership in Healthfirst at the time the service or treatment was rendered and whether the particular service or procedure is a covered benefit under the patient's plan contract. Policies are subject to change.

## Contacts

Provider Services Center	<b>1-888-801-1660</b> Monday to Friday, 8:30am–5:30pm <a href="http://HFproviders.org">HFproviders.org</a>
Medical Pharmacy (pharmacy medications for provider administration)	<b>1-888-394-4327</b> (TTY 1-888-542-3821) Medical Pharmacy Fax: 1-212-801-3223 Monday to Friday, 8am–5:30pm
Member Services	<b>1-888-250-2220</b> Monday to Friday, 8am–8pm (English, Spanish, Mandarin, Cantonese, Korean, and Russian) (TTY 1-888-542-3821) (TTY Spanish 1-888-867-4132) <a href="http://MyHFNY.org">MyHFNY.org</a>
Member Enrollment	<b>1-888-974-9901</b> Help is available in English, Spanish, Mandarin, Cantonese, Korean, or Russian

Visit [healthfirst.org/leaf-plans](http://healthfirst.org/leaf-plans) for plan details.