



More choices *and* affordable health care.

Members deserve both. That's why HIP Prime offers extensive HMO coverage and an expansive network of providers, all at affordable rates.

HIP Prime — extensive HMO coverage from an expanding network of participating providers.

All HIP Prime members receive the following:

- Low premiums.
- Access to quality health care providers who meet HIP's high standards of care.
- Access to thousands of participating doctors and specialists.
- Value added services available at discounted rates, including laser vision correction, alternative medicine, preventive dental and fitness club memberships.*

When members receive non emergency care from their PCP or obtain a referral for specialty care, their benefits include:

- 100% coverage after copay for most in-network services.
- No deductibles or coinsurance.
- Coverage for OB/GYN care without a referral.
- Coverage for preventive care.
- Little or no paperwork.

HIP Prime is offered through the Prime network and our new, expanded Premium network. Choose the network option that works best for your organization.

You can also customize a plan to fit your group's needs by choosing from a wide range of cost-sharing options and benefit riders.

For more information, call 1-800-HIP-TODAY (1-800-447-8632).

*These services are not covered, but HIP members have access to a network of providers that offer these services at a discounted rate.

Now that's **HIP**
HEALTH PLAN OF NEW YORK

hipusa.com[®]
English, Spanish, Chinese and Korean

HIP Prime[®]

Professional Services	Benefit Options
PCP office visit	\$0, \$5, \$10, \$15, \$20, \$25 - other copay options available
Specialist office visit	\$0, \$5, \$10, \$15, \$20, \$25, \$30, \$35, \$40 - other copay options available
Diagnostic services including X-ray, lab tests, EKGs. MRIs* and CAT scans*	Covered in full
Prescription Drugs¹	
Generic/brand/non-formulary	\$5/\$10/\$35, \$10/\$20/\$35, \$10/\$20/\$100 deductible - other options available
HIP mail order pharmacy service – 90-day supply	Formulary copays are reduced by 50%
Inpatient Hospital Services*	
Hospital and physician services	\$0, \$100, \$200, \$250, \$500 - other copay options available
Outpatient Facility Services	
Emergency Room	\$0, \$25, \$35, \$50, \$60, \$75, \$100 - other copay options available (waived if admitted)
Ambulatory surgery*	\$0, \$50, \$75, \$100 copay options
Mental Health and Alcohol and Substance Abuse Care	
Inpatient*	Copay/day options available
Outpatient	Copay/visit options available

HIP Participating Physicians and Providers have contracted with HIP to provide care to our members; they are not employees, agents or representatives of HIP. This information does not contain complete details of the Plan which are available only in the Contract or Certificate of Coverage and Schedule of Benefits, and it does not constitute an Agreement.

¹Drugs are dispensed in accordance with HIP's Drug Formulary. Please refer to your Prescription Drug Rider for details.

*Prior approval required by the HIP Care Management Program.