

## **ELECTRONIC NOTICE OPTION**

**855-283-2146**

This is an important message about notices you get or will get from EmblemHealth. Please read it carefully.

### **Why am I getting this notice?**

You are getting this notice to let you know that you can now ask EmblemHealth to send you certain notices electronically.

### **What notices can I get electronically?**

You can receive electronic notices about:

- Services you asked for.
- Services you are getting.
- Plan appeals.
- Complaints.
- Complaint appeals.

Other communications about:

- Your member handbook.
- Our provider directory.
- Changes to your Medicaid managed care benefits.

These notices have important information about your services and rights.

### **Who gets these notices?**

You and your provider get these notices about your services and plan appeals. You can also choose someone to act on your behalf you, like a family member, friend, or lawyer. The person you choose will be able to file a complaint and or ask for an appeal or fair hearing for you. We also send them a copy of your notices.

If you told us before that someone may act on your behalf, we would send that person a notice like this letting them know that notices can now be provided electronically. If you want someone new to act on your behalf, you and that person must sign and date a statement saying this is what you want. Or, you can both sign and date the attached Designee Form. The person you choose can get copies of your notices electronically if they ask. We will send their notices as required by law. If you have any questions about choosing someone to act for you, call us at **855-283-2146** (TTY: **711**), 8 a.m. to 6 p.m., Monday through Friday.

## How will these notices be sent?

EmblemHealth and our health care partners will send these notices to you through our member portal, myEmblemHealth. Some of our health care partners will send these notices to you through their portals. You will need to register for their portals separately. For a list of our health care partners who use their own portals, visit: [emblemhealth.com/plans/state-sponsored-programs](https://emblemhealth.com/plans/state-sponsored-programs).

When you choose to go paperless in the member portal, you can see documents as soon as they are ready. You will get an alert through the communications tab when you have something new to view. You will also get an email letting you know that there is a new notice for you on the portal.

Our portal should be viewed using a supported web browser, such as the latest versions of Google Chrome or Microsoft Edge. It may not work well with other browsers.

If you have questions or need help registering for myEmblemHealth, call us at **855-283-2146** (TTY: **711**), 8 a.m. to 6 p.m., Monday through Friday. A representative will be happy to help.

## How do I ask for electronic notices?

You can contact us online, by phone, or by mail:

Online.....	<b>my.emblemhealth.com</b>
Phone.....	<b>855-283-2146</b> (TTY: <b>711</b> )
Mail.....	<b>P.O. Box 1701, New York, NY 10023-1701</b>

When you contact us, we'll ask you:

- If you would like to get notices that are usually sent by mail sent to you electronically.
- If you would like to get notices that are usually made by phone call sent to you electronically.
- Provide your email address.

You can change your preferred contact method in the member portal. Visit **my.emblemhealth.com** to sign in or register. Once you sign in, click your name at the top right corner and select "My Profile." Click "Communication Preferences" and "Edit" to go paperless. You will get an alert through the communications tab when you have something new to view.

To select your preferred method by phone, call us at **855-283-2146** (TTY: **711**), 8 a.m. to 6 p.m., Monday through Friday. A representative will be happy to help.

To select your preferred method by mail, complete the Electronic Notice Request Form included with this notice and mail it to the address listed on the form.

You must let us know if your contact information changes. Call the phone number above or sign in to your myEmblemHealth account to make changes.

## What happens next?

EmblemHealth will inform you by mail that you have asked to get notices electronically.

If you ask to get your notices electronically:

- We will send you the notice in a way that lets you save and print the notice.
- You can still ask us to send any of your notices by mail.
  - We will send your notice by mail within two (2) working days from the day you requested if the notice is about services, plan appeals, complaints and complaint appeals.
  - We will send your notice by mail within five (5) working days from the date you asked if the notice is about other communications.
- You can still ask us to send any of your notices in an alternate format to accommodate a disability or language need.
  - We will send your notice within five (5) working days from the day you asked if the notice is about services, plan appeals, complaints and complaint appeals. In some cases, it may take us up to 30 days from the date of your request. In those cases, we will call you to help.
  - We will send your notice within 15 working days from the day you asked if the notice is about other communications. In some cases, it may take us up to 60 days from the date of your request. In those cases, we will call you to help.

If you ask to get your notices electronically and we believe your electronic notice was not delivered, we will send it by mail and may also call you by phone, as required by law.

### **Can I change the way I get these notices later?**

You can change the way you get your notices at any time. Contact us at the phone number, member portal, or mailing address noted in the *How do I ask for electronic notices?* section above.

If you ask for a change by phone or through the web portal, please allow us five (5) working days from the date we got your request to make the change. If you ask for a change by mail, please allow us 10 working days from the date we got your letter to make the change.

### **What if I don't want electronic notices?**

No changes will be made unless you ask us to make a change (using the instructions above). You will keep getting these notices by mail, and we may also call you by phone. We will not send these notices electronically unless you ask.


You may still ask us to send these notices differently because of a disability or language need.

EmblemHealth will not treat you differently if you do not want to get these notices electronically.

### **Other help:**

Call EmblemHealth at **855-283-2146** (TTY: **711**), 8 a.m. to 6 p.m., Monday through Friday if you have any questions about this notice.

Sincerely,

A handwritten signature in black ink that reads "Jacqueline Prince". The signature is written in a cursive style with a large initial "J".

Jacqueline Prince  
Assistant Vice President, Medicaid Product Strategy

Enclosure: Electronic Notice Request Form  
Designee Form

## EmblemHealth Electronic Notice Request Form

**Mail this form to:**

EmblemHealth  
P.O. Box 1701  
New York, NY 10023-1701

**Enrollee:**

Name: \_\_\_\_\_

Enrollee Number: \_\_\_\_\_

**Instructions:** Complete this form to ask EmblemHealth to send your notices electronically. You **must** select an option in #1 and/or #2 and/or #3 below to change your preference.

1. Instead of getting a notice by mail, I want EmblemHealth to send me these notices by:

Member portal

2. Instead of getting a notice by phone, I want EmblemHealth to send me these notices by:

Member portal

3. Instead of getting communications about my member handbook, my plan's provider directory, and changes to my Medicaid managed care benefits by mail, I want EmblemHealth to send me these notices by:

Member portal

**Contact Information:** Please provide your email address so we can let you know when you have an electronic notice.

Email: \_\_\_\_\_

**Enrollee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

You can choose someone to act on your behalf, like a family member, friend, or lawyer. If you want someone to act on your behalf, please let us know below.

- Have you authorized this person with EmblemHealth before?  YES  NO
- Do you want this person to act for you for complaints and in all steps of an appeal or fair hearing? You can let us know if change your mind.  YES  NO

To protect your privacy, you need to complete the attached Designee Form. You can call us at **855-283-2146** (TTY:711) if you have any questions or need assistance.