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NY03 - 21 PE03 - 14 PA03 - 09

MEMORANDUM

- TO: NYSHIP Health Benefits Administrators
- FROM: Employee Benefits Division
- SUBJECT: Revised Forms PS 452I Instructions for the Application for Waiver of Premium and PS 452 Application for Waiver of Premium
- DATE: May 2, 2003

Enclosed are new versions of the following forms:

PS – 452I Instructions for the Application for Waiver of Premium PS – 452 Application for Waiver of Premium

Please discard any old versions of these forms you have in stock and begin to use these forms immediately. The form was revised in order to comply with HIPAA privacy regulations regarding protected health information. Please read through the instruction carefully as the procedure has changed. Any questions regarding the new procedure should be referred to the Leave unit for NY agencies and your processor for PA and PE agencies. The form is also available on ebd_online at http://www.cs.state.ny.us/ebdonline.