

ANDREW M. CUOMO GOVERNOR STATE OF NEW YORK DEPARTMENT OF CIVIL SERVICE ALFRED E. SMITH STATE OFFICE BUILDING ALBANY, NEW YORK 12239 www.cs.ny.gov

NY 12-21

**TO:** New York State Agency Health Benefits Administrators

**FROM:** Employee Benefits Division

**SUBJECT:** NYSHIP Rate Change Effective July 1, 2012

**DATE:** May 23, 2012

As provided for in the 2012-2013 Executive Budget, Medicare Part B premium will be included as a component of the NYSHIP premiums effective April 1, 2012 for Participating Employers, which include public authorities and other quasi-public organizations of the State. Previously, the Medicare Part B premium was only included as a component of the NYSHIP premiums for New York State enrollees. This will result in relatively minor changes to NYSHIP rates for State enrollees effective July 1, 2012.

Attached are rate charts which reflect the premium rates and Medicare Part B reimbursement rates effective July 1, 2012. These schedules differentiate the rates applicable to employees in bargaining units whose contract negotiations remain unsettled, from those that have reached agreement with the State.

The attached NYSHIP rates are presented as follows:

- Schedule I Ratified Group
- Schedule II Non-Ratified Group

These rates reflect the cost of reimbursing Medicare Part B premiums to eligible State and Participating Employer enrollees from the effective date of this legislation April 1, through the end of 2012. Since the legislation was not passed until March 30, and the rate change required changes to NYBEAS, the rate change is effective July 1. Because the State contribution to the cost of HMO coverage is based on the cost of Empire Plan coverage, the decrease in Empire Plan premium results in a decrease in the State contribution to HMO coverage; therefore, in most cases the enrollee contribution for HMO coverage is increasing. This increase in the enrollee contribution for HMO coverage is not material, and will not trigger a Special Option Transfer Period.

If you have any questions about this rate change, please contact the HBA Line at (518) 474-2780

Administrative Paycheck June 20, 2012 - Employees exempt from Lag Payroll Administrative Paycheck July 3, 2012 - Employees subject to Lag Payroll Administrative Paycheck July 12, 2012 - Employees subject to Extra Lag Payroll Institution Paycheck June 14, 2012 - Employees exempt from Lag Payroll Institution Paycheck June 28, 2012 - Employees subject to Lag Payroll

\*Medicare : 45.86

					Schedule I						
					Ratified (Settled Groups)						
					Benefit Programs:						
				A01, A02,	A05, A06, A07, A13, A14, A15,	A17, A19					
				A20, A28,	A29, A33, A34, A35, A36, A37,	A39, A41					
				A42, A43, A44,	A46, A47, A48, A51, A60, A61	, A62, A64, L19					
		_									
	0	С	м								
	P	0	E	Employee	Employee	Full Share					
	Т	V	D	<sg-9< th=""><th>SG-10+</th><th>LWOP</th></sg-9<>	SG-10+	LWOP					
Empire Plan											
Individual	001	1	0	32.77	43.69	273.05					
Medicare	001	1	1	(13.09)	(2.17)	227.19					
Family	001	4	0	132.07	157.70	640.83					
1 Medicare	001	4	1	86.21	111.84	594.97					
					65.98						

				Schedule II Non-Ratified Group (Unsettled Groups) <u>Benefit Program:</u> A03, A04, A09, A10, A11, A12, A25, A40, A50, A63				
	O P T	c o v	M E D	Employee <u>Full Share</u> LWOP				
Empire Plan								
Individual	001	1	0	27.93 279.29				
Medicare	001	1	1	(17.93) 233.43				
Family	001	4	0	121.77 654.66				
1 Medicare	001	4	1	75.91 608.80				
2 Medicares	001	4	2	30.05 562.94				

Administrative Paycheck June 20, 2012 - Employees exempt from Lag Payroll Administrative Paycheck July 3, 2012 - Employees subject to Lag Payroll Administrative Paycheck July 12, 2012 - Employees subject to Extra Lag Payroll Institution Paycheck June 14, 2012 - Employees exempt from Lag Payroll Institution Paycheck June 28, 2012 - Employees subject to Lag Payroll

\*Medicare:

					Schedule I				
					Ratified				
				A01 A02 A0	Benefit Programs: 5, A06, A07, A13, A14, A	A15 A17 A1Q			
					9, A33, A34, A35, A36, 7				
					6, A47, A48, A51, A60, A				
				A42, A43, A44, A4	0, A47, A40, A31, A00, A	A01, A02, A04, L19			
	o	С	м						
	P	0	E						
	г Т	v	D	Employee	Employee	Full Share			
		v	U	<sg-9< td=""><td>SG-10+</td><td>LWOP</td></sg-9<>	SG-10+	LWOP			
				<50-5	30-10+	LWOF			
HIP (050)									
Individual	050	1	0	61.53	72.09	294.03			
Medicare	050	1	1	15.67	26.23	248.17			
Family	050	4	0	197.03	223.01	710.80			
1 Medicare	050	4	1	151.17	177.15	664.94			
2 Medicares	050	4	2	105.31	131.29	619.08			
MVP Health Care, Inc	Rochest	er (0	58)						
Individual	058	1	0	26.01	34.68	216.73			
Medicare	058	1	1	(19.85)	(11.18)	170.87			
Family	058	4	0	111.05	132.32	531.70			
1 Medicare	058	4	1	65.19	86.46	485.84			
2 Medicares	058	4	2	19.33	40.60	439.98			
Independent Health -	Western	NY (	059 <u>)</u>						
Individual	059	1	0	45.27	55.54	271.32			
Medicare	059	1	1	(0.59)	9.68	225.46			
Family	059	4	0	165.91	191.28	667.45			
1 Medicare	059	4	1	120.05	145.42	621.59			
2 Medicares	059	4	2	74.19	99.56	575.73			
MVP Health Care, Inc	East Re	gion	(060)						
Individual	060	1	0	28.28	37.70	235.63			
Medicare	060	1	1	(17.58)	(8.16)	189.77			
Family	060	4	0	120.91	144.05	578.69			
1 Medicare	060	4	1	75.05	98.19	532.83			
2 Medicares	060	4	2	29.19	52.33	486.97			
<u>Capital District PHP -</u>	Capital (C	) <u>63)</u>							
Individual	063	1	0	28.31	37.74	235.88			
Medicare	063	1	1	(17.55)	(8.12)	190.02			
Family	063	4	0	121.06	144.23	579.41			
1 Medicare	063	4	1	75.20	98.37	533.55			
2 Medicares	063	4	2	29.34	52.51	487.69			

Administrative Paycheck June 20, 2012 - Employees exempt from Lag Payroll Administrative Paycheck July 3, 2012 - Employees subject to Lag Payroll Administrative Paycheck July 12, 2012 - Employees subject to Extra Lag Payroll Institution Paycheck June 14, 2012 - Employees exempt from Lag Payroll Institution Paycheck June 28, 2012 - Employees subject to Lag Payroll

\*Medicare:

					Schedule I	
					Ratified	
					Benefit Programs:	
				A01 A02 A05	, A06, A07, A13, A14, J	Δ15 Δ17 Δ19
					, A33, A34, A35, A36, <i>J</i>	
					, A47, A48, A51, A60, 1	
					, , , , , , , , , , , , , , , , , , , ,	AUT, AUL, AUT, ETS
	0	С	м			
	P	0	E			
	Т	v	D	Employee	Employee	Full Share
				<sg-9< td=""><td>SG-10+</td><td>LWOP</td></sg-9<>	SG-10+	LWOP
Blue Choice (066)						
Individual	066	1	0	25.61	34.15	213.43
Medicare	066	1	1	(20.25)	(11.71)	167.57
Family	066	4	0	110.92	132.10	529.40
1 Medicare	066	4	1	65.06	86.24	483.54
2 Medicares	066	4	2	19.20	40.38	437.68
Community Blue (06	<u>7)</u>					
Individual	067	1	0	32.13	42.84	267.73
Medicare	067	1	1	(13.73)	(3.02)	221.87
Family	067	4	0	168.11	195.08	700.41
1 Medicare	067	4	1	122.25	149.22	654.55
2 Medicares	067	4	2	76.39	103.36	608.69
HMO Blue - CNY (072	<u>2)</u>					
Individual	072	1	0	84.66	94.68	305.03
Medicare	072	1	1	38.80	48.82	259.17
Family	072	4	0	259.50	284.00	743.93
1 Medicare	072	4	1	213.64	238.14	698.07
2 Medicares	072	4	2	167.78	192.28	652.21
<u>HMO Blue - Utica/Wa</u>	tertown (	160)	_			
Individual	160	1	0	96.38	106.28	314.17
Medicare	160	1	1	50.52	60.42	268.31
Family	160	4	0	317.37	341.80	800.17
1 Medicare	160	4	1	271.51	295.94	754.31
2 Medicares	160	4	2	225.65	250.08	708.45

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\*Medicare:

					Cabadda				
					Schedule I				
					Ratified				
					Benefit Programs: , A06, A07, A13, A14,	A15 A17 A10			
					, A06, A07, A13, A14, . , A33, A34, A35, A36, .				
					, A33, A34, A35, A36, , A47, A48, A51, A60,				
				A42, A45, A44, A40	, 447, 440, 451, 400,	A01, A02, A04, L19			
	0	с	м						
	P	õ	E						
	T	v	D	Employee	Employee	Full Share			
		•	-	<sg-9< td=""><td>SG-10+</td><td>LWOP</td></sg-9<>	SG-10+	LWOP			
<u>Aetna (210)</u>									
Individual	210	1	0	125.45	136.13	360.65			
Medicare	210	1	1	79.59	90.27	314.79			
Family	210	4	0	508.96	534.62	1,017.49			
1 Medicare	210	4	1	463.10	488.76	971.63			
2 Medicares	210	4	2	417.24	442.90	925.77			
GHI HMO Albany Reg	ion (220)	-							
Individual	220	1	0	115.89	126.78	355.40			
Medicare	220	1	1	70.03	80.92	309.54			
Family	220	4	0	388.38	415.44	922.92			
1 Medicare	220	4	1	342.52	369.58	877.06			
2 Medicares	220	4	2	296.66	323.72	831.20			
Empire BlueCross Blu	eShield HM	- ON	Upstat	<u>e (280)</u>					
Individual	280	1	0	42.40	53.78	292.74			
Medicare	280	1	1	(3.46)	7.92	246.88			
Family	280	4	0	189.93	218.42	752.43			
1 Medicare	280	4	1	144.07	172.56	706.57			
2 Medicares	280	4	2	98.21	126.70	660.71			
Empire BlueCross Blu	eShield HM	- ON	Downs						
Individual	290	1	0	123.30	134.96	379.90			
Medicare	290	1	1	77.44	89.10	334.04			
Family	290	4	0	403.03	432.25	980.07			
1 Medicare	290	4	1	357.17	386.39	934.21			
2 Medicares	290	4	2	311.31	340.53	888.35			
<u>Capital District PHP -</u>		300 <u>)</u>							
Individual	300	1	0	57.28	67.21	275.87			
Medicare	300	1	1	11.42	21.35	230.01			
Family	300	4	0	194.59	219.12	679.52			
1 Medicare	300	4	1	148.73	173.26	633.66			
2 Medicares	300	4	2	102.87	127.40	587.80			
<u>Capital District PHP -</u>		on Va	<u>lley (3</u>	1					
Individual	310	1	0	62.06	71.94	279.40			
Medicare	310	1	1	16.20	26.08	233.54			
Family	310	4	0	206.22	230.61	688.36			

1 Medicare	310	4	1	160.36	184.75	642.50
2 Medicares	310	4	2	114.50	138.89	596.64

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\*Medicare:

					Schedule I Ratified	
					Benefit Programs:	
					A05, A06, A07, A13, A14,	
					A29, A33, A34, A35, A36,	
				A42, A43, A44, A	A46, A47, A48, A51, A60,	A61, A62, A64, L19
	0	с	м			
	P	0	E			
	Т	v	D	Employee	Employee	Full Share
				<sg-9< td=""><td>SG-10+</td><td>LWOP</td></sg-9<>	SG-10+	LWOP
Empire BlueCross Blu						
Individual	320	1	0	112.85	124.43	367.67
Medicare	320	1	1	66.99	78.57	321.81
Family	320	4	0	372.95	401.97	945.83
1 Medicare	320	4	1	327.09	356.11	899.97
2 Medicares	320	4	2	281.23	310.25	854.11
MVP Health Care, Inc	ı <u> Central</u>	Regi	on (33	ı <u>0)</u>		
Individual	330	1	0	50.28	59.97	263.56
Medicare	330	1	1	4.42	14.11	217.70
Family	330	4	0	175.68	199.61	648.73
1 Medicare	330	4	1	129.82	153.75	602.87
2 Medicares	330	4	2	83.96	107.89	557.01
MVP Health Care, Inc	l : Mid-Hu	dson	(340)			
Individual	340	1	0	55.00	64.70	268.46
Medicare	340	1	1	9.14	18.84	222.60
Family	340	4	0	187.17	211.12	660.59
1 Medicare	340	4	1	141.31	165.26	614.73
2 Medicares	340	4	2	95.45	119.40	568.87
GHI HMO - HV & Ulst	 er Regions	(35	0)			
Individual	350	1	0	142.13	153.02	381.64
Medicare	350	1	1	96.27	107.16	335.78
Family	350	4	0	466.55	493.61	1,001.10
1 Medicare	350	4	1	420.69	447.75	955.24
2 Medicares	350	4	2	374.83	401.89	909.38
MVP HMO - North Re	 aion (360	))				
Individual	350	<u>//</u> 1	0	90.99	100.87	308.36
Medicare	350	1	1	45.13	55.01	262.50
Family	350	4	0	278.57	302.96	760.76
1 Medicare	350	4	1	232.71	257.10	714.90
2 Medicares	350	4	2	186.85	211.24	669.04
	1 330		-	1 100.00		000.01

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\*Medicare: 45.86

				Schedule II			
				Non Ratified Group			
				Benefit Programs:			
				A03, A04, A09, A10, A11, A12, A25, A40, A	50, A63		
	0	С	М				
	Р	0	Е				
	Т	V	D	Employee	Full Share		
					LWOP		
<u>HIP (050)</u>							
Individual	050	1	0	54.26	294.03		
Medicare	050	1	1	8.40	248.17		
Family	050	4	0	179.51	710.80		
1 Medicare	050	4	1	133.65	664.94		
2 Medicares	050	4	2	87.79	619.08		
MVP Health Care, Inc	-Rochest	ter (0	<u>58)</u>				
Individual	058	1	0	21.67	216.73		
Medicare	058	1	1	(24.19)	170.87		
Family	058	4	0	100.41	531.70		
1 Medicare	058	4	1	54.55	485.84		
2 Medicares	058	4	2	8.69	439.98		
Independent Health -	Western	NY (	<u>059)</u>				
Individual	059	1	0	38.15	271.32		
Medicare	059	1	1	(7.71)	225.46		
Family	059	4	0	148.70	667.45		
1 Medicare	059	4	1	102.84	621.59		
2 Medicares	059	4	2	56.98	575.73		
MVP Health Care, Inc	East Re	egion	(060)				
Individual	060	1	0	23.56	235.63		
Medicare	060	1	1	(22.30)	189.77		
Family	060	4	0	109.32	578.69		
1 Medicare	060	4	1	63.46	532.83		
2 Medicares	060	4	2	17.60	486.97		
Capital District PHP -	Capital (	0 <u>63)</u>					
Individual	063	1	0	23.59	235.88		
Medicare	063	1	1	(22.27)	190.02		
Family	063	4	0	109.47	579.41		
1 Medicare	063	4	1	63.61	533.55		
2 Medicares	063	4	2	17.75	487.69		

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	r						
				Schedule II			
				Non Ratified Group			
				Benefit Programs:	Benefit Programs:		
				A03, A04, A09, A10, A11, A12, A25, A40, A	A50, A63		
	0	С	М				
	Р	0	Е				
	Т	V	D	Employee	Full Share		
					LWOP		
Blue Choice (066)							
Individual	066	1	0	21.34	213.43		
Medicare	066	1	1	(24.52)	167.57		
Family	000	4	0	100.33	529.40		
1 Medicare	066	4	1	54.47	483.54		
2 Medicares	000	4	2	8.61	437.68		
Community Blue (06		7	2	0.01	+37.00		
Individual	067	1	0	26.77	267.73		
Medicare	067	1	1	(19.09)	221.87		
Family	067	4	0	150.11	700.41		
1 Medicare	067	4	1	104.25	654.55		
2 Medicares	067	4	2	58.39	608.69		
HMO Blue - CNY (072		•	-		000.00		
Individual	072	1	0	77.67	305.03		
Medicare	072	1	1	31.81	259.17		
Family	072	4	0	242.74	743.93		
1 Medicare	072	4	1	196.88	698.07		
2 Medicares	072	4	2	151.02	652.21		
HMO Blue - Utica/Wa	' itertown ('	160)					
Individual	160	1	0	89.45	314.17		
Medicare	160	1	1	43.59	268.31		
Family	160	4	0	300.64	800.17		
1 Medicare	160	4	1	254.78	754.31		
2 Medicares	160	4	2	208.92	708.45		

\* Medicare is income sensitive - this is the basic bi-weekly premium rate

4/9/12

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	r				
				Schedule II	
				Non Ratified Group	
				Benefit Programs:	
				A03, A04, A09, A10, A11, A12, A25, A40, A	50, A63
	0	С	М		
	P	0	Е		
	Т	V	D	Employee	Full Share
					LWOP
A atma (210)					
<u>Aetna (210)</u>	210	1	0	110.12	
Individual	210	1	0	118.12	360.65
Medicare	210	1	1	72.26	314.79
Family	210	4	0	491.60	1,017.49
1 Medicare	210	4	1	445.74	971.63
2 Medicares	210	4	2	399.88	925.77
GHI HMO Albany Regi			0	100.47	255.40
Individual	220	1	0	108.47	355.40
Medicare	220	1	1	62.61	309.54
Family	220	4	0	370.34	922.92
1 Medicare	220	4	1	324.48	877.06
2 Medicares	220	4	2	(222)	831.20
Empire BlueCross Blu	1		-		
Individual	280	1	0	34.73	292.74
Medicare	280	1	1	(11.13)	246.88
Family	280	4	0	171.17	752.43
1 Medicare	280	4	1	125.31	706.57
2 Medicares	280	4	2	79.45	660.71
Empire BlueCross Blu					070.00
Individual	290	1	0	115.49	379.90
Medicare	290	1	1	69.63	334.04
Family	290	4	0	383.90	980.07
1 Medicare	290	4	1	338.04	934.21
2 Medicares	290	4	2	292.18	888.35
Capital District PHP -		-	0	50.22	075 07
Individual	300	1	0	50.33	275.87
Medicare	300	1	1	4.47	230.01
Family	300	4	0	177.80	679.52
1 Medicare	300	4	1	131.94	633.66
2 Medicares	300	4	2	86.08	587.80
Capital District PHP -	1				
Individual	310	1	0	55.14	279.40
Medicare	310	1	1	9.28	233.54
Family	310	4	0	189.50	688.36
1 Medicare	310	4	1	143.64	642.50
2 Medicares	310	4	2	97.78	596.64

\* Medicare is income sensitive - this is the basic bi-weekly premium rate

4/9/12

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				Γ	
				Schedule II	
				Non Ratified Group	
				Benefit Programs:	
				A03, A04, A09, A10, A11, A12, A25, A40, A	450, A63
	0	С	Μ		
	Р	0	Е		
	Т	V	D	Employee	Full Share
					LWOP
Empire PlueCrees Plu	Shield UN		Mid Uu	deen (320)	
Empire BlueCross Blue Individual	320	1 <u>- 01</u>	<u>міа-пи</u> 0	105.08	367.67
Medicare	320	1	1	59.22	321.81
Family	320	4	0	353.93	945.83
1 Medicare	320	4	1	308.07	899.97
2 Medicares	320	4	2	262.21	854.11
MVP Health Care, Inc	l Central	Regi	on (33	0)	
Individual	330	1	0	43.45	263.56
Medicare	330	1	1	(2.41)	217.70
Family	330	4	0	159.20	648.73
1 Medicare	330	4	1	113.34	602.87
2 Medicares	330	4	2	67.48	557.01
MVP Health Care, Inc					
Individual	340	1	0	48.17	268.46
Medicare	340	1	1	2.31	222.60
Family	340	4	0	170.68	660.59
1 Medicare	340	4	1	124.82	614.73
2 Medicares	340	4	2	78.96	568.87
GHI HMO - HV & Ulste	er Regions	(35)	n)		
Individual	350	1	0	134.71	381.64
Medicare	350	1	1	88.85	335.78
Family	350	4	0	448.51	1,001.10
1 Medicare	350	4	1	402.65	955.24
2 Medicares	350	4	2	356.79	909.38
	550	т	L	550.75	303.30
<u>MVP HMO - North Re</u>	ř ·	-			
Individual	350	1	0	84.07	308.36
Medicare	350	1	1	38.21	262.50
Family	350	4	0	261.85	760.76
1 Medicare	350	4	1	215.99	714.90
2 Medicares	350	4	2	170.13	669.04