



ANDREW M. CUOMO
GOVERNOR

STATE OF NEW YORK
DEPARTMENT OF CIVIL SERVICE
ALBANY, NEW YORK 12239
www.cs.ny.us

JERRY BOONE
COMMISSIONER

SEHP12-10

TO: Student Employee Health Plan (SEHP) Health Benefits Administrators
FROM: Employee Benefits Division
SUBJECT: SEHP Rate Letter
DATE: November 30, 2012

The SEHP rate notice for 2013 will be mailed first class to enrollees' homes the week of December 10, 2012. Rate information was also posted on NYSHIP Online on November 30, 2012.

A copy of the letter is attached for your information and use. This letter is also included in the SEHP Quick Order Package, which is available to order on HBA Online.

If you have any questions regarding this memo, please contact EBD Communications at 518-457-7577. If you have any questions about SEHP benefits, please call the HBA Help Line at 518-474-2780.

Attachment:
SEHP Rate Letter



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November 30, 2012

Dear SEHP enrollee:

Effective January 1, 2013, the employee share of the biweekly premium for medical/dental/vision coverage for enrollees in the Student Employee Health Plan (SEHP) under the New York State Health Insurance Program (NYSHIP) will be:

Individual coverage	\$10.18
Family coverage	\$69.95

The new rate will be deducted automatically from employees' biweekly paychecks beginning with the paycheck dated:

- December 13, 2012 for Institution Lag-Exempt Payroll employees,
- December 27, 2012 for Institution Lag-Payroll employees, and
- January 2, 2013 for Administration Lag-Payroll employees.

The *Summary of Benefits and Coverage (SBC)* is a simple and standardized comparison document required by the Patient Protection and Affordable Care Act. To view a copy of the *SBC* for SEHP, visit <https://www.cs.ny.gov/sbc/index.cfm>. If you do not have internet access, call 1-877-7-NYSHIP (1-877-769-7447) to request a copy.

Please contact the agency Health Benefits Administrator (HBA) on your campus, usually in the Human Resources (Personnel) office, if you have any questions about enrollment, eligibility or the cost of your health insurance.

Note: If your employment with SUNY or CUNY in a benefits-eligible position is ending, please destroy your health insurance and dental plan ID cards and contact the agency HBA on your campus to update your records. Be sure to ask the date your coverage will end; it may be different from the date printed on your ID card. Expenses you incur after your coverage ends will not be paid, unless you enroll for COBRA continuation coverage.

COBRA enrollees: Your monthly bills will reflect your new rate, beginning with the bill you receive in December. If you have questions about the cost of your COBRA continuation coverage, or wish to end your COBRA continuation coverage, contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344.

Sincerely,

Robert W. DuBois, CEBS
Director
Employee Benefits Division
New York State Department of Civil Service
Albany, NY 12239