



**Department of
Civil Service**

Health Benefits Administrator Training Part 1

Employee Benefits Division

June 7, 2019

Welcome to the Employee Benefits Division

The Director of the New York State Department of Civil Service
Employee Benefits Division: Jim DeWan

- Thank You!
- Many Resources are Available
 - [HBA Manual](#)
 - [HBA Online](#)
 - [NYSHIP General Information Book](#)
- EBD is Here to Help

Health Benefits Administrator (HBA) Role

As an HBA, it is your responsibility to:

- Determine if employees and their dependents are eligible for NYSHIP.
- Inform employees of benefits available to them and to assist them with enrolling in these benefits.
- Provide employees with necessary forms and publications.
- Process NYSHIP enrollments through the New York Benefits Eligibility and Accounting System (NYBEAS).
- Assist employees with transitioning their NYSHIP coverage to NYSHIP retiree coverage.

When to Call HBA Help Line

- Before Calling the HBA Help Line for assistance, please research the matter using the resources available to you.
 - HBA Manual, HBA Memos, NYSHIP publications, etc.
- Contact the HBA Help Line at **(518) 474-2780** when you need further clarification or assistance after researching the matter.
- Make sure you have the resources in question readily available upon calling HBA Help Line (PTCP Qualifying Events, Transaction Processing in Manual, etc.)

When to Call HBA Help Line

When an Employee has questions about their benefits:

- Do not direct enrollees to call the Employee Benefits Division (EBD), HBAs should assist employees.
- Consult your supervisor for assistance prior to contacting EBD.
- Contact the HBA Help Line and ask for assistance in understanding so that you may then relay information to the employee.
- If an enrollee persists, EBD staff will arrange to have a conference call with the HBA and the enrollee.

When to Call HBA Help Line

- EBD becomes the Health Benefit Administrator for employees separated from State service.
- Former employees should be directed to call EBD at **1-800-833-4344.**
- If you are calling with a former employee concerning their Retiree, Vestee, COBRA coverage under NYSHIP, do not use the HBA Help Line. This line is designated for HBAs who have questions related to employees with Active coverage.

Topics

1. Employee Eligibility
2. Dependent Eligibility
3. Available Benefits
4. Benefit Plan Options
5. Annual Option Transfer Period
6. Summary & Resources

Employee Eligibility

Employee Eligibility

Appointed/elected to a position in State service

Working at least half time on a regular schedule

Expected to work six biweekly payroll periods

Satisfy new employee waiting period (42 or 56 days)

On the payroll at the time of enrollment

Less than half-time Employee Eligibility

Certain Paid Elected Officials and Paid Members of the New York State Legislature working less than half-time may be eligible if they meet the following requirements:

- Be appointed or elected to a position in State service
- Be on the payroll and receiving a paycheck at the time of enrollment

UUP Employee Eligibility

- UUP eligibility requirements vary. Please refer to the HBA manual for more information.
- [HBA Manual - Newly Hired Employee](#)

Seasonal Employee Eligibility

Appointed/elected to a position in State service

Working at least half time on a regular schedule

Expected to work at least 6 months

On the payroll at the time of enrollment

New Hire Health Insurance Waiting Periods

An employee must satisfy a new employee waiting period before health insurance benefits become effective.

Group	Waiting Period
CSEA, Council 82, DC-37, PIA, UCS, UUP	42 Days
NYSCOPBA, PEF, PBA, PBANYS, M/C; Legislature	56 Days

Late Enrollment Waiting Periods

Late enrollment waiting periods apply to employees who request enrollment after the 42 or 56 day new hire waiting period.

- Employees will be subject to a five pay period waiting period before health insurance benefits are effective.
- The late enrollment waiting period can be waived if enrollee submits proof of other coverage terminating.
 - Must submit request within 30 days of other coverage terminating

Voluntarily Cancel Coverage

- Enrollees who do not participate in the Pre-tax Contribution Program (PTCP) may cancel coverage for themselves or their enrolled dependents at any time.
- Enrollees who participate in the PTCP can only voluntarily cancel coverage during the annual PTCP Enrollment Period (Nov 1-30), during the annual Option Transfer Period, or if they request to do so within 30 days of a PTCP Qualifying Event.

[Policy Memo 143 Pre-Tax Contribution Program](#)

Employee Eligibility

HBA Role

- As the Health Benefits Administrator (HBA), it is your responsibility to determine if an employee is eligible for health benefits.
- Most new hires are processed through the New York State Electronic Personnel (NYSTEP) system.
- NYSTEP interfaces with the New York Benefits Eligibility and Accounting System (NYBEAS) to transfer an employee's information to your New Hire Worklist.
- You need to review your NYBEAS worklist regularly to see if your agency has hired any new employees and determine if they are eligible for health benefits.

Employee Eligibility

HBA Role

- Some new hires are not processed through NYSTEP. You need to create a job record in NYBEAS for all newly hired employees who were not processed through NYSTEP and then determine if they are eligible for health benefits.
- [Create a Job Record in NYBEAS](#)

Employee Eligibility

HBA Role

- Provide eligible employees with information that explains their NYSHIP options and any applicable enrollment forms.
 - Employees should receive this information as soon as possible, but not later than seven days from their date of hire.

Employee Eligibility

All newly eligible employees should receive the following publications and forms:

Resource	Purpose
Health Insurance Choices	Explains available options under NYSHIP
NYSHIP Rates & Deadlines	Provides the bi-weekly cost of each NYSHIP Plan
NYSHIP General Information Book	Provides general information NYSHIP rules
Health Insurance Transaction Form (PS-404)	Form used for enrollment and changes
Opt-out Attestation Form (PS-409)	Form to prove enrollment in other employer-sponsored group health insurance

Employee Eligibility

HBA Role

- Review application (PS-404) to ensure it has been completed correctly.
- Review required documentation:
 - Birth certificate, Social Security number, Medicare card (if applicable)
 - Other proofs may be required
- Refer to the HBA manual or call the HBA helpline if you have questions about required proofs.

Employee Eligibility

HBA Role

- Provide employees with status updates regarding the enrollment process.
- Request and gather missing information.
- Provide employees with a deadline to submit all necessary documentation.
- Retain any forms and documents in a secure location and record the date you receive.

Employee Eligibility

HBA Role

- Process enrollments in NYBEAS.
- Notify employees in writing if their request has been processed and when coverage will begin.
- Use [HBA Online](#) to order a quick order package of plan materials that can be shipped to the employee's home.
- Comment in NYBEAS when employees are not eligible.
- Refer to [HBA Manual - Newly Hired Employee](#) for more information.

Employee Eligibility Resources

Resource	Purpose
<u>HBA Manual</u>	Information on eligibility requirements and enrollment processing instructions
<u>HBA Memo NY18-36</u>	Announces updates to the HBA Manual
<u>NYSHIP Policy Memos</u>	Memos outlining NYSHIP Policy
<u>NYSHIP General Information Book</u>	Provides general information about eligibility, enrollment and other NYSHIP rules

Dependent Eligibility

Dependent Eligibility

As the Health Benefits Administrator (HBA), it is your responsibility to determine if an employee's dependent is eligible for health benefits.

Eligible Dependents Include

Spouse

- Including legally separated spouse

Note - (If the employee is divorced or the marriage has been annulled, the former spouse is not eligible, even if a court orders coverage be maintained)

Domestic Partner

- Proof of Joint ownership
 - Financially interdependent for at least six months
- Proof of Cohabitation
 - Have shared the same residence for at least six months

Children

- Natural Child
- Step Child
- Legally-Adopted Child
- Domestic Partner's Child
- Other Child *

*An "other" child is defined as any child other than the enrollee's own child, adopted, or stepchild, or the child of the enrollee's domestic partner. For such a dependent to be eligible, the child must reside permanently in the enrollee's home and receive more than 50 percent of his or her support from the enrollee. These requirements must be reached before the "other" child is age 19.

Dependent Eligibility

The following proofs of eligibility are required:

<p><u>Spouse:</u> Social Security Number, Birth certificate, Marriage certificate, Proof of current joint ownership (if applicable), & Medicare card (if applicable)</p>	<p><u>Domestic Partner:</u> Social Security Number, Birth certificate, Completed Domestic Partner Application (PS-425), & Medicare card (if applicable)</p>	<p><u>Natural-born child, stepchild, and child of a domestic partner:</u> Social Security Number, Birth certificate, & Medicare card (if applicable)</p>
<p><u>Adopted Child:</u> Social Security Number, Adoption papers, Birth certificate, & Medicare card (if applicable)</p>	<p><u>Disabled child over the age of 26:</u> Social Security Number, Birth certificate, Completed Statement of Disability (PS-451), & Medicare card (if applicable)</p>	<p><u>“Other” Children:</u> Social Security Number, Birth certificate, Completed Statement of Dependence (PS-457), & Medicare card (if applicable)</p>
<p><u>Full time student over the age of 26 with military service:</u> Social Security Number, Birth certificate, Medicare card (if applicable), Written documentation from the US military with dates of active service, & Proof of full-time student status from an accredited school, college, or educational institution</p>		

Required Proofs can be found in the [HBA Manual - Dependent Eligibility Requirements](#).



Eligibility Ends When

Dependent	Event
Spouse	<ul style="list-style-type: none">• Divorce
Domestic Partner	<ul style="list-style-type: none">• Domestic Partnership Ends• Domestic Partner no longer resides with enrollee• Domestic Partner cannot provide financial proof
Children	<ul style="list-style-type: none">• Child reaches age 26• Exceptions for disabled child and child who is a full-time student with military service

For more information on when eligibility ends, please refer to [HBA Manual - Dependent Eligibility Requirements](#)

Adding Dependents

- Employees can request to add dependents during the new hire waiting period.
 - Dependent's coverage will become effective after the new hire waiting period.
- Requests to add previously eligible dependents to coverage outside the new hire waiting period will be subject to late enrollment waiting periods absent a qualifying event.
 - Dependent's coverage will begin after a 5 pay period wait.
- Employee must complete and submit a PS-404 to add dependents.

Dependent Eligibility

When adding newly eligible dependent(s) to coverage after a qualifying event, the dependent(s) coverage will begin based on the date the enrollee applies. If an enrollee applies:

- 7 days or fewer after a dependent's first date of eligibility,
 - Dependent's coverage will be effective on the date the dependent(s) was first eligible.
- 8 to 30 days after a dependent's first date of eligibility,
 - Dependent's coverage will begin on the first day of the next payroll period.
- More than 30 days after a dependent's first date of eligibility,
 - Dependents coverage will begin after a 5 pay period waiting period.

Dependent Eligibility

HBA Role

- Determining dependent eligibility
- Thoroughly reviewing application to ensure it has been completed correctly
- Confirming all necessary dependent proofs have been submitted (see [Policy Memo 139r1](#))
- Retaining all submitted documentation in a secure location.

Dependent Eligibility

HBA Role

- If the dependent is eligible, the HBA is responsible for processing enrollment in NYBEAS
 - Consistent with waiting periods
- Remove dependents
 - When they lose eligibility
 - Upon enrollee request during the Option Transfer period
- Add NYBEAS comments

Dependent Eligibility Resources

Resource	Purpose
<u>HBA Manual</u>	Information on dependent eligibility requirements and enrollment processing instructions
<u>NYSHIP Policy Memos</u>	Memos outlining NYSHIP Policy
<u>Policy/Memo 139r1</u>	Table of required dependent proofs
<u>Policy/Memo 145</u>	Adding Dependents to Family Coverage
<u>NYSHIP General Information Book</u>	Provides general information about eligibility, enrollment and other NYSHIP rules

Available Benefits

Available Benefits

As the Health Benefits Administrator (HBA), it is your responsibility to inform employees of benefits available to them and to assist them with enrolling in these benefits.

Available Benefits

- Health Insurance
- Dental Insurance
- Vision Insurance
- M/C Life Insurance*
- M/C Income Protection Plan (IPP)*

*Benefit is for M/C employees only

Health Insurance Options

- The Empire Plan
- NYSHIP Health Maintenance Organizations (HMOs)
- Opt-out Program

Available Benefits

HBA Role

- Ensure all employees are aware of the Health Insurance benefits available to them.
- When eligible employees request enrollment, process Empire Plan, NYSHIP HMO, or Opt-out Program enrollment through NYBEAS.

Resources

- [HBA Manual](#)
- [NYSHIP General Information Book](#)
- [Health Insurance Choices for 2019](#)
- [NYSHIP Rates & Deadlines for 2019](#)
- [HBA Online](#)

Dental & Vision

Health Benefits Administrators process NYS dental plan and NYS vision plan enrollments for:

- NYSCOPBA
- PEF
- Council 82
- PIA
- PBA
- PBANYS
- M/C

Unions process Employee Benefit Fund dental plan and Employee Benefit Fund vision plan enrollments for:

- CSEA
- UUP
- DC-37
- UCS (Courts)

Dental & Vision Eligibility

Under the rules for dental and vision benefits:

- Eligibility requirements are the same as health insurance eligibility requirements for an employee, spouse, and domestic partner.
- Children are eligible for coverage until age 19.
- Enrollees' unmarried dependent children who are age 19 or over, but under age 25 are eligible if they are full-time students at an accredited secondary or preparatory school, college or other educational institution that grants a degree or diploma. They must also not be otherwise eligible for employer group coverage.

New Hire Dental/Vision Waiting Periods

An employee must satisfy a new employee waiting period before dental/vision benefits become effective.

Group	Waiting Period
Council 82, PIA	42 Days
NYSCOPBA, PEF, PBA, PBANYS, M/C	56 Days
CSEA, UUP, DC-37, UCS	Refer to EBF

Dental & Vision

HBA Role

- Understand which benefits are administered by New York State and which benefits are administered by unions
- Process enrollments in NYSHIP Dental and/or Vision benefits
- Understand the different waiting periods

Resources

- Union Employee Benefit Funds
- [NYS Department of Civil Service Website](#)

Management/Confidential (M/C) Benefits

- M/C Life Insurance
 - Enrollment is optional
 - Multiple of salary or fixed amount
 - [M/C Life Insurance Calculator](#)
- M/C Income Protection Plan (IPP)
 - Enrollment is mandatory if hired after January 1, 1986
 - Short and Long Term Disability Insurance
 - Provides partial income replacement

Available Benefits

HBA Role

- Inform M/C employees about the M/C Life Insurance program.
 - Send completed M/C Life applications to EBD.
- Inform M/C employees they are automatically enrolled in M/C IPP.
- Refer M/C employees to online publications.
 - [M/C Life](#)
 - [M/C IPP](#)

Benefit Plan Options

Benefit Plan Options

HBA Role

As the HBA, you are not expected to know everything about the Empire Plan and NYSHIP HMOs. However, you should have some knowledge of the differences between health plan options, so you can better advise your employees.

The Empire Plan

- Unique plan designed exclusively for New York State's public employees
- Plan design is determined by collective bargaining
- Managed by the Department of Civil Service
- Contracts with qualified companies to administer the plan



The Empire Plan

NYSHIP Health Maintenance Organizations

- Private health insurance companies contracted by NYSHIP
- Provide coverage through a network of providers
- Service specific geographic regions
- Premiums and copayments vary between HMOs



Empire Plan vs. HMOs

Enrollees have a choice between the Empire Plan or a NYSHIP approved HMO.

Empire Plan

- Benefits are available worldwide
- Over 300,000 participating physicians and other providers and facilities nationwide
- Out-of-network coverage available
- No referrals needed

HMOs

- Live/work in the HMO's service area
- Coverage for services received outside the specified geographic area is limited
- Limited or no out-of-network coverage available
- Referrals to specialists may be required

Empire Plan vs. HMOs

nyshiponline

[Civil Service Home](#) [Site Map](#) [HIPAA Privacy Information](#) [About Us](#) [Awards](#) [Tech Help](#) [Copyright/Disclaimer](#)

[Current Topics](#) [What's New?](#) [Health Benefits & Option Transfer](#) [Other Benefits](#) [Using Your Benefits](#) [Forms](#) [Planning to Retire?](#) [Find a Provider](#) [Calendar](#) [MyNYSHIP - Employee Self-Service](#)

M/C; Legislature • Empire Plan

[Change Your Group](#) [Search](#)

2019 NYSHIP Plan Comparison

	Empire Plan (View SBC)			MVP HMO (View SBC)	CDPHP HMO (View SBC)
	Network Hospital Benefits	Participating Provider	Non-Participating Provider		
Office Visits		\$20 per visit ^[1]	Basic Medical ^[1]	\$25 per visit (\$10 for children) ^[1]	\$20 per visit
Annual Adult Routine Physicals		No copayment	Basic Medical ^[1]	No copayment	No copayment
Well Child Care		No copayment	Basic Medical ^[1]	No copayment	No copayment
Specialty Office Visits		\$20 per visit ^[1]	Basic Medical ^[1]	\$40 per visit	\$20 per visit
Diagnostic/Therapeutic Services					
Radiology	\$30 or \$40 per outpatient visit ^{[1] [2]}	\$20 per visit ^[1]	Basic Medical ^[1]	\$25 per visit	\$20 per visit ^[1]
Lab Tests	\$30 or \$40 per outpatient visit ^{[1] [2]}	\$20 per visit ^[1]	Basic Medical ^[1]	No copayment	\$20 per visit ^[2]
Pathology	No copayment	\$20 per visit ^[1]	Basic Medical ^[1]	No copayment	\$20 per visit ^[2]
EKG/EEG	\$30 or \$40 per outpatient visit ^{[1] [2]}	\$20 per visit ^[1]	Basic Medical ^[1]	\$25 per visit	\$20 per visit ^[1]
Radiation	No copayment	No copayment	Basic Medical ^[1]	\$40 per visit	\$20 per visit
Chemotherapy	No copayment	No copayment	Basic Medical ^[1]	\$40 per visit	\$20 per visit

www.cs.ny.gov/employee-benefits/nyship/shared/apps/plan-comparison/



Department of
Civil Service

Benefit Plan Options

HBA Role

- After processing an enrollment into the Empire Plan or a NYSHIP HMO, you should notify the employee with a confirmation letter including the following information:
 - What option the employee is enrolled in (Empire Plan or NYSHIP HMO)
 - Type of coverage (Individual or Family)
 - List of covered dependents, if applicable
 - Effective date of coverage
 - Biweekly payroll deduction amount
 - The pay period in which premium deduction will begin (including any retroactive deduction amounts, if applicable)

Opt-out Program

- The Opt-out Program allows certain NYS employees who are eligible for NYSHIP and enrolled in other employer-sponsored health insurance to “opt-out” of NYSHIP medical coverage and receive an incentive payment.
- Opt-out Incentive Payments
 - Individual - \$1,000 annually (\$38.47 per bi-weekly check)
 - Family - \$3,000 annually (\$115.39 per bi-weekly check)
- Incentive payments are prorated and credited to enrollee’s 26 paychecks.
- Incentive Payments are considered taxable income.

NYSHIP Opt-out Program

- The Opt-out Program is available to certain actively working New York State employees.
 - Effective in the 2019 plan year UUP employees are not eligible to participate.
- Eligible employees can enroll in the Opt-out Program when newly eligible for NYSHIP benefits or during the annual Option Transfer Period.
- NYS retirees are not eligible for the Opt-out Program.
 - Participation in the Opt-out Program satisfies the requirement of enrollment in NYSHIP for retirement purposes.

Eligibility Factors for the Opt-out Program

Employees of M/C, UCS, and all union groups are eligible with the exception of GSEU and UUP employees

Must be eligible for NYSHIP coverage with the employer contribution

Must prove enrollment in other employer-sponsored group health insurance coverage

Must have been enrolled in NYSHIP by April 1st of the previous plan year or when first eligible (if after April 1st)

Must elect enrollment into the Opt-out Program during the Option Transfer Period or when newly eligible for benefits

Enrollees are no longer eligible to receive the incentive payment when they do not continue to meet these eligibility requirements.

What is other employer-sponsored group health insurance coverage?

Health insurance coverage through enrollee's other employment

Health insurance coverage through employment of the enrollee's spouse, domestic partner or parent

Health insurance coverage available to the enrollee through the U.S. Dept. of Veterans Affairs

- [PS-409 Opt-out Attestation Form](#)

Can other employer-sponsored group health insurance coverage be other NYSHIP coverage?

Can be NYSHIP coverage through spouse/domestic partner or parents employment with a Participating Agency or Participating Employer*

Can't be NYSHIP coverage through spouse/domestic partner or parents' employment with NYS

Can't be NYSHIP coverage through the enrollee's other employment with a NYS agency, Participating Agency or Participating Employer

*Only eligible for the individual incentive payment

Opt-out Program

Enrollees are no longer eligible to receive the incentive payment when they do not continue to meet the eligibility requirements for the Opt-out Program.

Some examples of loss of eligibility include:

- Employee is terminated
- Employees hours are changed to less than half-time
- Employee loses other employer-sponsored health insurance coverage
 - Employee must notify HBA
 - Employee can enroll in a NYSHIP plan if a request is submitted within 30 days
 - Enrollees who fail to make a timely request will be subject to late enrollment waiting period and incentive payments will be recouped retroactive to the date the enrollee was no longer eligible for other employer-sponsored coverage.

Opt-out Program

When receiving Family incentive payments and the enrollee's only dependent experiences a change that causes the dependent to become no longer eligible for NYSHIP, the enrollee's incentive payment will change to the individual amount for the remainder of the plan year.

Some examples of dependent loss of eligibility include:

- Child reaches age 26
 - Processes automatically in NYBEAS
- Divorce/Termination of Domestic Partnership
 - Employee must notify HBA

Opt-out Program

Once enrolled in the Opt-out Program:

- Enrollees can not switch from individual Opt-out to family Opt-out
- Enrollees cannot elect to change from the Opt-out Program to NYSHIP coverage outside the Option Transfer Period unless they experience a PTCP qualifying event.
 - Must submit request within 30 days of Qualifying Event

Opt-out Program

- Enrollees out on leave in a status that is eligible for NYSHIP benefits with an Employer Contribution (e.g. Workers Comp, FMLA, disciplinary leave) will remain eligible for the incentive payments .
 - The enrollee is still eligible for incentive payments, but won't receive the payments until back on the payroll.
 - Retroactive amounts will be paid with current amount once added back on payroll.
- Enrollees out on leave in a status that is not eligible for NYSHIP benefits with an Employer Contribution (e.g. Leave without pay) are not eligible for the incentive payments until they return to the payroll.
 - Enrollees will not receive incentive payments for the period they were out on leave.

Opt-out Program

- Employees who currently participate in the Opt-out Program will not be required to re-elect Opt-out during each Option Transfer Period.
- Starting with the 2020 plan year, employees enrolled in the Opt-out Program will automatically continue enrollment into the next plan year
- Opt-out Program enrollees will only be dis-enrolled when they:
 - Lose eligibility,
 - Requests to cancel Opt-out enrollment or change to a NYSHIP plan during the annual Option Transfer Period, or
 - Requests to cancel Opt-out enrollment or change to a NYSHIP plan outside of the annual option transfer period after experiencing a PTCP qualifying event.

Opt-out Program

HBA Role

- After processing an Opt-out Program enrollment, you should notify the employee and include the following information:
 - If the employee has been enrolled in Individual Opt-out or Family Opt-out
 - Biweekly Opt-out incentive payment amount (\$38.46 for Individual or \$115.38 for Family)
 - The pay period in which the Opt-out incentive payments will begin
- Update NYBEAS when employees or dependents lose eligibility

Benefit Plan Options

Resource	Purpose
Empire Plan At-A Glance	Briefly describes Empire Plan benefits
Empire Plan Certificate	Thoroughly describes Empire Plan benefits
Health Insurance Choices	Refer here for more information on NYSHIP HMOs
HBA Manual	Refer here for more information on Opt-out Program & Annual Option Transfer Period
Planning for Option Transfer	Refer here for more information on Opt-out Program & Annual Option Transfer Period
HBA Memo NY18-34	Refer here for more information on Opt-out Program & Annual Option Transfer Period
NYSHIP General Information Book	Refer here for more information on Opt-out Program & Annual Option Transfer Period

Annual Option Transfer Period

Annual Option Transfer Period

- The annual Option Transfer Period allows NYSHIP enrollees to make changes to their NYSHIP option for the upcoming plan year.
- Enrollees cannot change their option outside of the annual Option Transfer Period unless they experience a Qualifying Event.
- Enrollees may elect to enroll in the Opt-out Program (if eligible) during the annual Option Transfer Period.
- Enrollees may elect to change their coverage from Family to Individual or cancel coverage altogether.

Not Open Enrollment!

- The Annual Option Transfer Period is **not** a time for employees to freely enroll in coverage or freely add dependents to their coverage.
- Employees and dependents **not** newly eligible for NYSHIP benefits will be subject to a late enrollment waiting period (Five Pay Periods). A late enrollment waiting period will apply when:
 - A previously eligible employee requests to enroll in individual or family coverage
 - An enrollee requests to add previously eligible dependents that changes coverage from Individual to Family
 - An enrollee requests to add previously eligible dependents to existing Family coverage

Permitted Changes

- Change of NYSHIP Option
 - The Empire Plan to a NYSHIP HMO
 - NYSHIP HMO to the Empire Plan
 - NYSHIP HMO to a different NYSHIP HMO
 - Enroll in the Opt-out Program
 - Change from the Opt-out Program to the Empire Plan or a NYSHIP HMO
- Change of Coverage
 - Change from Family to Individual
 - Remove dependents from Family coverage
 - Cancel Coverage

Annual Option Transfer Period

HBA Role

- Inform employees about the Option Transfer Period.
- Advise employees of changes permitted during the option transfer period.
- Assist employees with completing option transfer requests.

Resources

- [HBA Manual](#)
- [HBA Memo NY18-34](#)
- [Planning for Option Transfer](#)
- [NYSHIP General Information Book](#)

Summary & Resources

Summary

- Generally, employees must meet the following requirements to be eligible for NYSHIP Coverage.
 - Appointed/elected to a position in State service
 - Working at least half time on a regular schedule
 - Expected to work six biweekly payroll periods
 - On the payroll at the time of enrollment
- Employees must satisfy a new hire waiting period before coverage becomes effective.
- Eligible dependents include a spouse, a domestic partner, or children.
- Under certain circumstances, dependents may need to satisfy a late enrollment waiting periods before benefits become effective.

Summary

- Health, dental, and vision benefits are available to employees. M/C Life Insurance and the M/C IPP are also available to M/C employees.
- NYSHIP health insurance options include the Empire Plan, NYSHIP HMOs, or the Opt-out Program.
- Employees who currently participate in the Opt-out Program will no longer be required to re-elect Opt-out during each Option Transfer Period starting with the 2020 plan year.
- The annual Option Transfer Period allows NYSHIP enrollees to make changes to their NYSHIP option for the upcoming plan year,
- During the Option Transfer Period applicable waiting periods will apply when enrolling in coverage or adding dependents to coverage.

Resources

Resource	Purpose
HBA Manual	Provides HBAs with guidance on the rules of NYSHIP, processing of transactions in NYBEAS, and the HBA's responsibilities
HBA Online	Resource center for HBAs
NYSHIP General Information Book	Provides general information about eligibility, enrollment and other NYSHIP rules
NYSHIP Rates & Deadlines	Provides the bi-weekly cost of each NYSHIP Plan
Health Insurance Choices	Explains available options under NYSHIP
Empire Plan At A Glance	Briefly describes Empire Plan benefits
Planning For Option Transfer	Outlines changes allowed during the Annual Option Transfer Period
NYSHIP Online	Resources center for HBAs and employees

Resources

Resource	Purpose
<u>HBA Memo NY18-36</u>	Announces updates to the HBA Manual
<u>NYSHIP Policy Memos</u>	Provides guidance for NYSHIP procedures
<u>Policy/Memo 139r1</u>	Table of required dependent proofs
<u>Policy/Memo 145</u>	Adding Dependents to Family Coverage
<u>HBA Memo NY18-34</u>	Information about the Annual Option Transfer Period

NYSHIP Online

nyshiponline
Employee Benefits Division
Department of Civil Service

Current Topics

What's New?

Health Benefits & Option Transfer

Other Benefits

Using Your Benefits

Forms

Planning to Retire?

Find a Provider

Calendar

MyNYSHIP - Employee Self-Service



[NYSHIP Online](#)

HBA Online

hba_online
benefits resource center

You Should Know...
Easy Reference
Publications & Forms
HBA Memos
Policy Memos
Phone Numbers / Links
Meetings & More
Health Plan Choices
HBA Manuals
E-Learning
HIPAA Privacy Information
Site Map
Contact Us / Disclaimer
NYSHIP Home

04/15/2019 9:17 am

Find the **benefit**, click on the group. *Benefits vary by group.*

Current Topics

2018 PA/PE Webinars

Young Adult Option Coverage

General Information Book for:

NY Active

NY Retiree

Participating Employers (PEs)

Participating Agencies (PAs)

Pre-retirement Planning

New York State and PE



NYS Agencies

Participating Agencies and
Participating Employers

dental

APSU

C-82

M/C

NYSCOPBA

PBA Supervisors

PBA Troopers

PE

PEF

PIA

SEHP

vision Davis Vision Information

APSU

C-82

MC

NYSCOPBA

PBA

PE

PEF

life

M/C

IPP Income Protection Plan

M/C

DC-37

survivor benefits

New York State Active Employees

workers' compensation

ARS Publications for Executive
Branch Agencies and Unified Court
System

ARS Manual

Dispute Resolution Program

Workers' Compensation
Pharmacy Benefits

Claimant Information Packet

HBA Manual

hba_online
benefits resource center
Super Search
Memos ▾
HBA Broadcast Messages
Notices
Manuals ▾
Union Contracts
Civil Service Law

NY Manual

Events

- Adopting a Child
▾
- Continuing Coverage for a Disabled Child
▾
- Divorce
▾
- Domestic Partner
▾
- Losing Coverage
▾
- Marriage
▾
- Moving
▾
- Newborn Child
▾
- Newly Eligible Employee
▾
- Newly Hired Employee
▾
- Rehired Retiree
▾

Topics

- COBRA - Continuation of Coverage
▾
- Cost of Coverage
▾
- Dependent Eligibility Requirements
▾
- Effective Date Rules
▾
- Imputed Income
▾
- Medicare
▾
- Option Changes
▾
- Preferred List Status
▾
- Sick Leave Credit
▾
- The Opt-out Program
▾
- The Pre-Tax Contribution Program
▾

Search

Filter

UPDATES

TRANSACTIONS

GLOSSARY

CONTACT

HBA Help Line & EBD

Contact the HBA Help Line at
(518) 474-2780

when you need further clarification or assistance after you have used the resources available to you.

Retirees call EBD at
1-800-833-4344
for assistance.

Please submit feedback for the HBA training by completing
[HBA Training Survey](#)