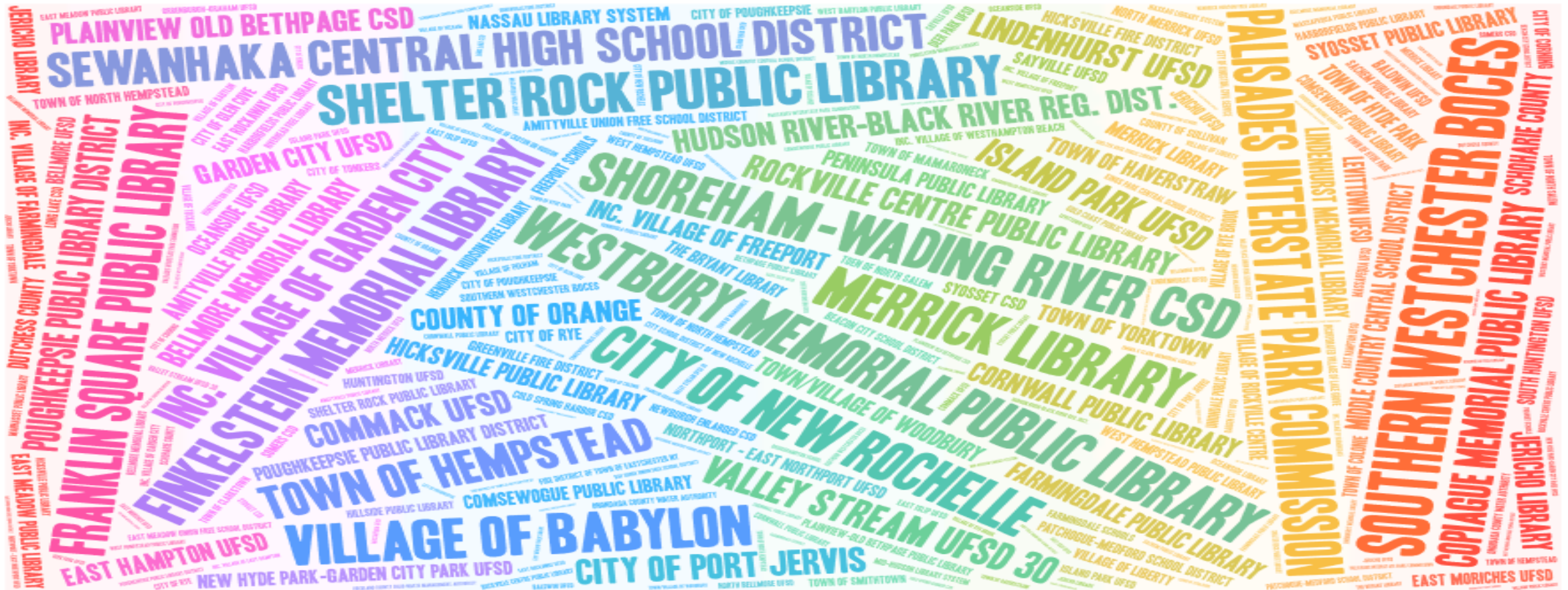


2021 Annual Webinar for Participating Agencies

Prepared for use by the Department of Civil Service, Employee Benefits Division representatives only.

Welcome to the 2021 Annual Webinar For Participating Agencies



Agenda

- A Message from the Director of EBD
- Benefits Administration from PA/PE Unit
- PELU Announcements
- Empire Plan Benefit Changes
- Financial Update
- Questions and Answers





NYSHIP
New York State
Health Insurance Program

A Message from the Director of EBD

Presenter – Jim DeWan, Director of the Employee Benefits Division



Message from Director; Jim DeWan

518-473-1977

James.DeWan@cs.ny.gov

Daniel.Yanulavich@cs.ny.gov

Thank you!
Please Review
HBA Online for
Information



NYSHIP
New York State
Health Insurance Program

Benefits Administration

Presenters –Kara Hillicoss, PA/PE Unit Supervisor

Announcements from the PA/PE Unit

Topics

- PA HBA Manual
- Pension Deductions
- Worklist
- Young Adult Option

PA HBA Manual

A **NEW** HBA Manual

- It is available on HBA online.
- This manual has been developed to provide HBAs with step-by-step guidance on the rules and regulations of NYSHIP, processing of transactions in New York Benefits Eligibility and Accounting System (NYBEAS), and the HBA's responsibilities.
- The original Manual that was called "Manual for NYSHIP Participating Agencies" has been renamed to "Administrative Guide for NYSHIP Participating Agencies."
- We are releasing it out in multiple phases.

PA HBA Manual

Phase 1

At launch, the Manual contains the necessary information to assist you in processing a new hire and enrollment and includes links to reference materials and forms.

PA Manual

The screenshot displays the PA Manual interface with three main sections:

- Events:** A list of events with dropdown arrows, including "Other" Children, Adopting a Child, Continuing Coverage for a Disabled Child, Divorce, Domestic Partner, Employees Newly Eligible for NYSHIP, Marriage, Moving, and Newborn Child.
- Topics:** A list of topics with dropdown arrows, including Dependent Eligibility Requirements, Employee Eligibility Requirements, Roles & Responsibilities, Student Dependent with Prior Military Service, The Health Insurance Portability and Accountability Act (HIPAA) and Protecting Personal Information, and When Coverage Begins.
- Search:** A search section with a "Filter" input field and four buttons: UPDATES, TRANSACTIONS, GLOSSARY, and CONTACT.

PA HBA Manual

WWW.CS.NY.GOV



Access Civil Service exam announcements and learn about the exam process.

- General Exam Information
- Exams Open to State Employees
- Exams Open to the Public
- Continuous Recruitment Exams
- Exams Open to Local Governments



Learn more about currently available programs and spotlighted exam opportunities.

- Test Center Supervisors & Monitors
- Teachers
- Correction Officer Trainee Exam
- Nurses
- Veterans Temporary Hiring Program
- Veterans & Individuals With Disabilities



Access online information about your health and other employee benefits, including new telehealth services for Empire Plan enrollees.

- Empire Plan Telehealth Benefits
- NYSHIP Online**
- Join NYSHIP
- Paid Family Leave for State Employees



Among other duties, the Commission hears and determines appeals on a wide variety of human resource and employment issues.

- Overview
- Meeting Dates
- Commission Calendars
- 211 Waiver Guidelines
- Appeal Guidelines

PA HBA Manual

Department of Civil Service

Sign in to the Department of Civil Service Web site.

User ID:

Password:

Submit

or

Don't have a Department of Civil Service Account?
[Create an account now.](#)

[I forgot my User ID or Password.](#)

If you think you may have a Department of Civil Service account, but do not know your User ID, please do not create another account. Instead, you may:

- Try to [recover your account](#)
- Contact the ITS Enterprise Service Desk for assistance at: 1-844-891-1786 or fixit@its.ny.gov. The Service Desk hours of operation are Monday - Friday 7:30 am to 5:00 pm. When contacting the service desk via email, please provide a phone number where we may contact you.

- You will be directed to the Civil Service Sign on Page
- Here you will enter your User ID (same as NYBEAS) and the password you created
- Hit Submit

PA HBA Manual

[Home Services](#)
[Job Seekers](#)
[State Employees](#)
[Retirees](#)
[HR Professionals](#)

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

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

Current Topics

- PA/PE Webinars
- Young Adult Option Coverage

General Information Book for:

- NY Active
- NY Retiree
- Participating Employers (PEs)
- Participating Agencies (PAs)
- Student Employee Health Plan (SEHP)


dental

- APSU
- C-82
- M/C
- NYSCOPBA
- PBA Supervisors
- PBA Troopers
- PE
- PEF
- PIA
- SEHP

Pre-retirement Planning

New York State and PE


vision Davis Vision Information




PA HBA Manual

Make sure you choose the PA Manual in the menu for the HBA Manuals

HBA Manuals
More manuals are coming soon!

NY Manual	PE Manual	PA Manual
View	View	 View



PA HBA Manual

PA Manual

Events

- "Other" Children
▼
- Adopting a Child
▼
- Continuing Coverage for a Disabled Child
▼
- Divorce
▼
- Domestic Partner
▼
- Employees Newly Eligible for NYSHIP
▼
- Marriage
▼
- Moving
▼
- Newborn Child
▼

Topics

- Dependent Eligibility Requirements
▼
- Employee Eligibility Requirements
▼
- Roles & Responsibilities
▼
- Student Dependent with Prior Military Service
▼
- The Health Insurance Portability and Accountability Act (HIPAA) and Protecting Personal Information
▼
- When Coverage Begins
▼

Search

Filter

- UPDATES**
- TRANSACTIONS
- GLOSSARY
- CONTACT

PA HBA Manual

PA Manual

Events

- "Other" Children
- Adopting a Child
- Continuing Coverage for a Disabled Child
- Divorce
- Domestic Partner
- Employees Newly Eligible for NYSHIP
- Marriage
- Moving
- Newborn Child

Topics

- Dependent Eligibility Requirements
- Employee Eligibility Requirements
- Roles & Responsibilities
- Student Dependent with Prior Military Service
- The Health Insurance Portability and Accountability Act (HIPAA) and Protecting Personal Information
- When Coverage Begins

Search

Filter

- UPDATES
- TRANSACTIONS
- GLOSSARY
- CONTACT**

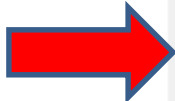
PA HBA Manual

PA Manual



Events

- "Other" Children
- Adopting a Child
- Continuing Coverage for a Disabled Child
- Divorce
- Domestic Partner
- Employees Newly Eligible for NYSHIP
- Marriage
- Moving
 - When a Dependent Moves
 - Moving Transactions
 - Notify the Enrollee
- Newborn Child



Topics



- Dependent Eligibility Requirements
- Employee Eligibility Requirements
- Roles & Responsibilities
- Student Dependent with Prior Military Service
- The Health Insurance Portability and Accountability Act (HIPAA) and Protecting Personal Information
- When Coverage Begins

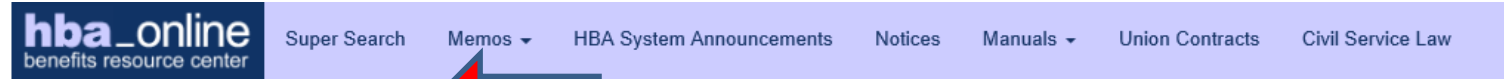
Search

Filter

- UPDATES
- TRANSACTIONS
- GLOSSARY
- CONTACT



PA HBA Manual



[Back to HBA PA Manuals Index](#)

Table of Contents

- [Roles & Responsibilities](#)
- [Role of the Health Benefits Administrator \(HBA\)](#)
- [Role of the Employee Benefits Division \(EBD\)](#)
- [Online Resources](#)
- [Contacting the Employee Benefits Division](#)
- [HBA Help Line](#)
- [HIPAA Complaints](#)

Roles & Responsibilities

Role of the Health Benefits Administrator (HBA)

An HBA's primary responsibility is to assist enrollees with their health insurance enrollment needs.

To be effective in this role an HBA must:

1. Be knowledgeable about the laws, regulations, and policies that apply to NYSHIP and how NYSHIP needs to be administered accordingly.
 - Read and understand all communications and updates issued by the Employee Benefits Division (EBD) and published on [HBA Online](#)

For example:

- [HBA Memos](#)
- NYSHIP [Policy Memos](#)

PA HBA Manual

PA Manual

Events

"Other" Child
▼

Adopting a Child
▼

Continuing Coverage for a Disabled Child
▼

Diverse

Topics

Dependent Eligibility Requirements
▼

Employee Eligibility Requirements
▼

Roles & Responsibilities
▼

Student Dependent with Prior Military Service

Search

Filter

UPDATES

TRANSACTIONS

GLOSSARY

Transactions

Transaction Name	Action Code	Reason Code	Description	Sections
Add a Spouse Coverage - Change to Family	CCO	MAR	If an enrollee has Individual coverage, click on the link for instructions on how to add their spouse by changing to Family coverage.	Marriage
Add a Spouse to Existing Coverage	DEP	ADD	If an enrollee has existing Family coverage, click on the link for instructions on how to add their spouse to coverage.	Marriage
Add Dependent Child - Change to Family Coverage	CCO	DEP	If an enrollee requests to add a dependent child to coverage and change from Individual to Family Coverage	Adopting a Child
Add Dependent Child to Existing Family Coverage	DEP	ADD, NWB	If an enrollee requests to add a dependent child to existing Family Coverage	Adopting a Child
Add Domestic Partner - Change to Family Coverage	CCO	ADP	If an enrollee has Individual coverage, click on the link for instructions on how to add their domestic partner by changing to Family coverage.	Domestic Partner



PA HBA Manual

HBA HELPLINE 518-474-2780

We will need to verify you each time you call by asking

- Agency Code (5-digit number)
- Your first and last Name
(if you are not listed, we will ask for your NYBEAS user id)
- The SSN of the enrollee you are calling about
- The enrollee's first and last name

Materials needed

- Signed into HBA Online (Manual)
- General Information Booklet (GIB)
- 503 form and proofs if you are asking about new enrollment/dependents



NYSHIP
New York State
Health Insurance Program



Questions?

Pension Deductions

- Pension deductions can be set up for retired enrollees that are part of either the New York State and Local Retirement System (ERS) or Teacher's Retirement System (TRS)

ERS Maximum Deduction
allowed
\$999

TRS Maximum deduction
allowed
\$2000

Pension Deductions

What is a Rate Qualifier?

Ex. 50/35

- 50% is the percentage the employer pays for the individual portion
- 35% is the percentage the employer pays for the dependent portion

So, to figure out the cost for Employee share you use the Full Share Rates

Here is 2021 Rates

Individual: \$1,074.87

Family: \$2,452.24

Pension Deductions

For the Rate share of 50/35

- 50% of Individual = \$1,074.87 times by 50% = \$537.44

Next:

- Take Family Share \$2,452.24 subtract Individual Share \$1,074.87 = \$1,377.87 (Dependent Portion)
- Take the Dependent Portion \$1,377.87 and times it by 35 % = \$482.08
- Add the 50% of individual \$537.44 to 35% of the dependent's portion: \$482.08 = \$1,019.52 which is the **employer** share of the premium

Subtract Employer share from Family Premium \$2,452.24 - \$1,019.52 = \$1,432.72 which is employee share

Pension Deductions

Items to Review BEFORE requesting a Pension Deduction

- Benefits>Transaction>Personal/Employment
- You should have the following filled out:
 - Retirement REG #
 - Retirement System (1 ERS, 2 TRS, 4 STATE POLICE)
 - Tier
 - DO NOT enter RET #- this must feed over from retirement system

Name / Id	Address/Phone	Personal Details
Employment Information		ENROLLEE, SAMPLE EmplID: 123456789
Personal Data		Employment Information
Date of Birth:	<input type="text" value="02/10/1959"/>	Hire Date: <input type="text" value="01/01/2009"/> Rehire Date: <input type="text" value="01/01/2009"/>
Date of Death:	<input type="text"/>	Termination Date: <input type="text"/> Service Date: 01/01/2009
Original Start Date:	<input type="text" value="01/01/2009"/>	Last Date Worked: <input type="text"/> <input type="checkbox"/> Disabled
Retirement Information		
Retirement Reg.#:	<input type="text"/>	Medicare Id: <input type="text"/>
Retirement System:	<input type="text"/>	Retirement Number: <input type="text"/>
Retirement Type:	<input type="text"/>	Retirement Tier: <input type="text"/>
Personal History Find View All First 1 of 2 Last		
*Effective Date:	<input type="text" value="07/09/2009"/>	*Marital Status: <input type="text" value="Married"/>
*Sex:	<input type="text" value="Female"/>	Marital Status Date: <input type="text" value="05/30/1981"/>

[Name / Id](#) | [Address/Phone](#) | [Personal Details](#)

Pension Deductions

How to request a Pension Deduction

- Benefits> Transactions> Preferred Payment Change
- In the Top row you need to choose what method you want , ERS, TRS or APY
- The 2nd row you will choose what Rate Qualifier the retiree is paying

Preferred Payment Change

Employee Information
Enrollee, Sample EmplID: 123456789 Empl Rcd #: 0

Preferred Rate Qualifier Find | View All First 1 of 1 Last

Action Dt.	Effseq	*Preferred Pay Method	User ID
<input type="text"/>	0	<input type="text"/>	<input type="text"/>

Preferred Rate Qualifier *** PA enrollees only *** Find | View All First 1 of 1 Last

Action Dt.	Effseq	*Preferred Rate Qualifier	User ID
<input type="text"/>	0	<input type="text"/>	<input type="text"/>

Save Return to Search

DO NOT process PPC more than a month prior to retirement (ideally you should process within 2 weeks of retirement)

Pension Deductions

These Are the Existing Rate Qualifiers Offered in NYBEAS

Q	ER Rate 100/100
1	ER Rate 100/95
2	ER Rate 100/90
3	ER Rate 100/80
4	ER Rate 100/75
5	ER Rate 100/65
6	ER Rate 100/50
7	ER Rate 100/35
8	ER Rate 95/95
9	ER Rate 95/85
A	ER Rate 90/90
B	ER Rate 90/85
C	ER Rate 90/75
D	ER Rate 90/50
E	ER Rate 85/85

If your rate qualifiers do not match these, you cannot put your retiree into pension deduction; you must keep them in APAY and continue to directly bill them

G	ER Rate 85/75
H	ER Rate 85/50
I	ER Rate 75/75
J	ER Rate 75/50
K	ER Rate 75/35
L	ER Rate 65/45
M	ER Rate 60/60
N	ER Rate 50/50
O	ER Rate 50/35
P	ER Rate 95/90
Q	ER Rate 95/80
R	ER Rate 90/80
S	ER Rate 80/80
U	ER Rate 83/83
Y	ER Rate 85/80

Pension Deductions

When Does the Pension Deduction Kick In?



- Pension deductions are not immediate
 - Once a Retirement number is given, a payment method is processed
- ERS deductions could take up to 6 months
- TRS deductions could take up to 3 months
- You will have to bill the enrollee directly until the pension does kick in

Pension Deductions

How to see if a Preferred Payment Change Worked?

- Look in NYBEAS Update History – See if the payment method was processed,
- Check your transaction listing that is mailed out each month, once it is processed it will be on that report
- Worklist called “PA Pension Deduction WL”

Employee Information																			
ENROLLEE, SAMPLE										EmplID: 123456789		Empl Rcd #: 0							
Plan Type																			
Plan Type: Medical 10												View All		First		1 of 1		Last	
Event Information																			
Action Date	Effective Date	Eff Seq	Action	Reason	CBR EvtId	Ovrd Sw	Source ID	Request Date	Event Date	User ID	Dep Info	Comment	View Audit Info						
11/10/2021	02/01/2022	0	PMC	TRS Pension Deduction	0	N			02/01/2022	AXP26									
04/20/2021	07/01/2021	0	PGM	Benefit Program Change	0	N	JOBUPDTE			KGH									

Pension Deductions

Did Pension Deductions really work?

- You should also check the account tab to make sure that the deduction started after the Payment Method was processed.

[Billings](#) | [Benefits/Billings](#) | [Accounting](#) | [Accounting Summary](#) | [Card #'s](#) | [Job](#)

Employee Information

ENROLLEE, SAMPLE EmpID: 123456789

Record Type: *Tax Type: [Refresh Data](#) Ending Balance: 58.47

Employee Account Details											
Activity Date	Billing Period Begin Date	Bill Type	Trans Type	Ben Prog	Ben Plan	Covg Cd	Bill Units	Tax Sts	Period Begin Date	Trans Amount	Running Balance
11/07/2021	12/01/2021	RGLR	CHRG	PR7	001	A	1	A	12/01/2021	58.47	58.47
10/31/2021			PMNT					A		-58.47	0.00
10/02/2021	11/01/2021	RGLR	CHRG	PR7	001	A	1	A	11/01/2021	58.47	58.47
09/30/2021			PMNT					A		-58.47	0.00
09/07/2021	10/01/2021	RGLR	CHRG	PR7	001	A	1	A	10/01/2021	58.47	58.47
08/31/2021			PMNT					A		-58.47	0.00
08/06/2021	09/01/2021	RGLR	CHRG	PR7	001	A	1	A	09/01/2021	58.47	58.47

[Return to Search](#) | [Previous in List](#) | [Next in List](#) | [Previous tab](#) | [Next tab](#) | [Refresh](#)

[Events](#) | [Benefits](#) | [Medicare Part D](#) | [Hold Harmless](#) | [Programs](#) | [Billings](#) | [Benefits/Billings](#) | [Accounting](#) | [Accounting Summary](#) | [Card #'s](#) | [Job](#) | [Ben.](#)

Pension Deductions

Retiree Re-enrolling into NYSHIP?

- When you re-enroll a retiree into the benefits, their pension will not automatically kick back in.
- Review the NYBEAS Update History-Billing tab to confirm they are in APAY with E in the rate qualifier column. If they are not, contact EBD.

Employee Information														
ENROLLEE, SAMPLE												EmplID: 123456789		Empl Rcd #: 0
Plan Type														
Plan Type: Medical 10														
Billings Details														
Effective Date	CBR EvtId	Comp	CustID	Rate Qual	Rate Share	Billing	Paygroup	Surchg %	Pay Meth	Tax Elect	Tax Flag	Imp Inc	Sick Leave Amt	PEP Amt
11/01/2021	0	PA	03400	F	85/85	Regular	Mnthly-PA	0	TPEN	A	A	N	0.00	0.00
09/01/2002	0	PA	03400	E	% Empl	Regular	Mnthly-PA	0	APAY	A	A	N	0.00	0.00
11/01/2000	0	PA	03220	E	% Empl	Regular	Mnthly-PA	0	APAY	A	A	N	0.00	0.00
09/01/2000	0	PA	03331	E	% Empl	Inactive	Mnthly-PA	0	APAY	A	A	N	0.00	0.00
02/01/1993	0	PA	03331	E	% Empl	Regular	Mnthly-PA	0	APAY	A	A	N	0.00	0.00

Pension Deductions

Incorrect Billing Information

Plan Type View All											
Plan Type: Medical 10											
Billings Details View All											
Effective Date	CBR Evtld	Comp	CustID	Rate Qual	Rate Share	Billing	Paygroup	Surchg %	Pay Meth	Tax Elect	Tax Flag
11/01/2021	0	PA		O	50/35	Regular	Mnthly-PA	0	TPEN	A	A
10/01/2021	0	PA		O	50/35	Regular	Mnthly-PA	0	APAY	A	A
10/01/2020	0	PA		O	50/35	Inactive	Mnthly-PA	0	TPEN	A	A
08/01/2020	0	PA		O	50/35	Regular	Mnthly-PA	0	TPEN	A	A
07/01/2020	0	PA		E	% Empl	Regular	Mnthly-PA	0	APAY	A	A
09/01/1997	0	PA		E	% Empl	Regular	Mnthly-PA	0	APAY	A	A



Correct Billing Information

Billings Details View All										
Effective Date	CBR Evtld	Comp	CustID	Rate Qual	Rate Share	Billing	Paygroup	Surchg %	Pay Meth	Tax Ele
10/01/2021	0	PA	03400	E	% Empl	Regular	Mnthly-PA	0	APAY	A
11/01/2000	0	PA	03220	E	% Empl	Regular	Mnthly-PA	0	APAY	A





NYSHIP

New York State
Health Insurance Program



Questions?

Worklist

What is a Worklist ?

Worklist are prioritized list of the work items that an agency has to do

Worklist items are created by different actions

Should be reviewed/worked daily or at least weekly depending on the size of your agency



Worklist

What is a Worklist ?

The most common one that I am sure you know is the Correction Worklist

When you send a correction to EBD to fix/ update a file. That correction comes on a worklist for EBD to work and once it is completed – it will generate a worklist for you as the HBA.

Correction Complete Worklist Or Correction Invalid if EBD doesn't do the correction.

You must review these corrections to make sure you do not have to take any future action and to make sure that EBD fixed the file the way you needed.

HBA Worklist

Where do you find your Worklist?

NYBEAS
HRDEV

[Home](#) | [Messages\(0\)](#) | [Worklist](#) | [Add to Favorites](#) | [Sign out](#) | [Help](#)



Menu

Search: [»](#)

- ▶ My Favorites
- ▶ Benefits
- ▶ COBRA
- ▶ MyNYSHIP
- ▶ NYBEAS Reports
- ▶ Workforce Administration
- ▶ System Announcement
- ▶ Set Up HRMS
- ▶ Worklist
- ▶ Reporting Tools
- ▶ User Info
- ▶ PeopleTools
- ▶ [Change My Password](#)

HBA Worklist

You will have different Worklist depending on the type of Agency you are PA, PE or NYS

Worklist Summary							Customize Find View All	First 1-6 of 7 Last
	Detail	Filter	Business Process	Activity	Worklist	Count		
1	Detail	Filter	Administer Workflow	Send Note	<Target Roleusers>	46		
	Detail	Filter	NYBEAS Depend Recert Required	NYBEAS Depend Recert Required	Dependent Rectification <HBA>	0		
3	Detail	Filter	BEA Administer Workflow	DEVA Invalid Address	DEVA Invalid Address 2016	657		
4	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Hire Notifications	Incomplete Personal Dat <HBA>	5		
5	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Hire Notifications	New Enrollment	50		
6	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Job Notifications	Retiree Rehires <HBA>	4		

Field 1: Field 2: Field 3: [Sort](#) [Save Comments](#)

Worklist Details			Customize Find View All	First 1 of 1 Last
	Sent From	WL Created on	WL Comments	
1			<input type="text"/>	

HBA Worklist

If a worklist is on your NYBEAS, then that is for you to review, or you could have to take action to an enrollee's file.

5	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Hire Notifications	New Enrollment	50
6	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Job Notifications	Retiree Rehires <HBA>	4
7	Detail	Filter	NYBEAS Dependent Beneficiary	NYBEAS Dependent Temporary Disability	Dependent Temp Disability <HBA>	1

Field 1: Field 2: Field 3: [Sort](#) [Save Comments](#)

Worklist Details											
Customize Find View All First 1 of 1 Last											
Mark Worked	ID	DeptID	Name	Date of Birth	Type	Disab. End Date	Depend. ID	Sent From	WL Created on	WL Comments	Reassign
1 <input checked="" type="checkbox"/>	Work It 123456789	12345	Sample, Enroll	12/27/1969	EXT	9/30/2021	03	Hillicoss, Kara	10/15/2021 10:51:32AM	<input type="text"/>	Reassign



NYSHIP
New York State
Health Insurance Program



Questions?

Young Adult Option

What is the Young Adult Option (YAO)?

A coverage option for a child dependent who has aged off. It allows them to purchase individual health insurance coverage through NYSHIP.



Young Adult Option

Who can enroll in the YAO?

- A child, adopted child, child of a domestic partner (if the agency covers domestic partners), or stepchild of a NYSHIP enrollee
- Unmarried
- Is age 29 or younger
- Is not eligible for coverage through the young adult's own employer-sponsored health plan
- Is living, working or residing in the insurer's service area
- Is not covered under Medicare

Young Adult Option

When can they enroll in the YAO?

- At the time, the young adult no longer qualifies as a dependent under the parent's NYSHIP plan due to age.
- If a change of circumstances allows the young adult to meet eligibility requirements for the Young Adult Option, they can enroll within 60 days of newly qualifying
- Coverage may be elected during the Young Adult Option annual 30-day open enrollment period, which is determined by the Agency (usually goes with Annual Option Transfer Period)

Young Adult Option

- How much does the YAO cost?
 - It is the full cost of the premium for Individual coverage.
- How long is the YAO?
 - A young adult may be enrolled until the last day of the month in which they turn 30.
- YAO vs. COBRA
 - An enrollee has no right to COBRA coverage when coverage under YAO ends. However, once enrollment ends for a COBRA enrollee, they can transition to the YAO if eligible.



Young Adult Option

How to enroll in the YAO?

Benefits > Transactions > Young Adult Enrollment

Young Adult Enrollment

Enter any information you have and click Search. Leave fields blank for a list of all values.

Find an Existing Value

EmplID:	begins with ▾	<input type="text"/>
Empl Rcd Nbr:	= ▾	<input type="text"/>
Last Name:	begins with ▾	<input type="text"/>
First Name:	begins with ▾	<input type="text"/>
Department:	begins with ▾	<input type="text"/>

Case Sensitive

Search

Clear

[Basic Search](#)



[Save Search Criteria](#)

Young Adult Option

Young Adult Enrollment

Employee Info
ENROLLEE, SAMPLE EmplID: 123456789 Empl Rcd #: 0

Plan Type
*Plan Type: 10 Medical COBRA Event ID: 0

Enrollee's Current Coverage Information

Eff Date	Event Id	Covrg Elect	Benefit Plan	Coverage
	0			

Transaction Data

*Action	*Reason	Event Dt	Request Dt	Effective Dt	Override
ENR	YAD	11/01/2021	10/05/2021	11/01/2021	No

Young Adult

Enroll Young Adult Dependents

Save Return to Search



Young Adult Option

Personal Data

ENROLLEE, SAMPLE EmplID: 123456789 Empl Rcd #: 0

Plan Type: 10 Medical [Return to the Main Panel](#)

Young Adult Data [Find](#) First ◀ 1 of 1 ▶ Last

Dependent/Beneficiary ID:
02 CHILD ENROLLEE S Son DOB: 10/15/1995

Member Type
 Not Covered Contract Holder National ID: 444-88-7591

Personal Data

ENROLLEE, SAMPLE EmplID: 123456789 Empl Rcd #: 0

Plan Type: 10 Medical [Return to the Main Panel](#)

Young Adult Data [Find](#) First ◀ 1 of 1 ▶ Last

Dependent/Beneficiary ID:
02 CHILD ENROLLEE S Son DOB: 10/15/1995

Member Type
 Not Covered Contract Holder National ID: 444-88-7591

Young Adult Option

Young Adult Enrollment

Employee Info
ENROLLEE, SAMPLE EmplID: 123456789 Empl Rcd #: 0

Plan Type
 *Plan Type: Medical COBRA Event ID: 0

Transaction Data

*Action	*Reason	Event Dt	Request Dt	Effective Dt	Override
ENR	YAD	11/01/2021	10/05/2021	11/01/2021	No
Young Adult					

[Enroll Young Adult Dependents](#)

[Save](#) [Return to Search](#)

Events [Benefits](#) [Medicare Part D](#) [Hold Harmless](#) [Programs](#) [Billings](#)

Employee Information
ENROLLEE,CHILD EmplID: 987654321 Empl Rcd #: 0

Plan Type View All First 1 of 1 Last
Plan Type: Medical 10

Event Information View All First 1 of 1 Last

Action Date	Effective Date	Eff Seq	Action Reason	CBR Evtld id	Former ID	Source ID	Request Date	User ID	Dep Info	Comment	View Audit Info
11/15/2021	11/01/2021	0	ENR Young Adult	0	123456789	NYBUPDTE	10/05/2021	OPPAUPD			

[Return to Search](#) [Previous tab](#) [Next tab](#) [Refresh](#)

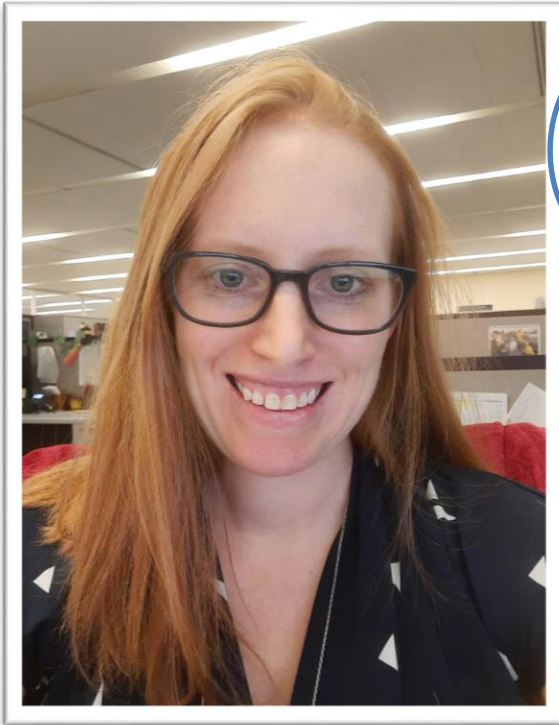
Young Adult Option

YAO eligibility ends before age 30 when

- When the Young Adult parent is no longer a NYSHIP enrollee
- If the Young Adult no longer meets the eligibility requirements
- The NYSHIP premium for the young adult is not paid in full by the due date or within 30-day grace period.

Participating Agency/Participating Employer Unit (PA/PE Unit)

Amanda Perkins



Please be sure to periodically check for recently issued memos and updates on HBA online.

Also please enter comments in NYBEAS

Michael Tibbitts



Remember to have NYBEAS, HBA Online open and ready as well as the enrollee's information before calling EBD

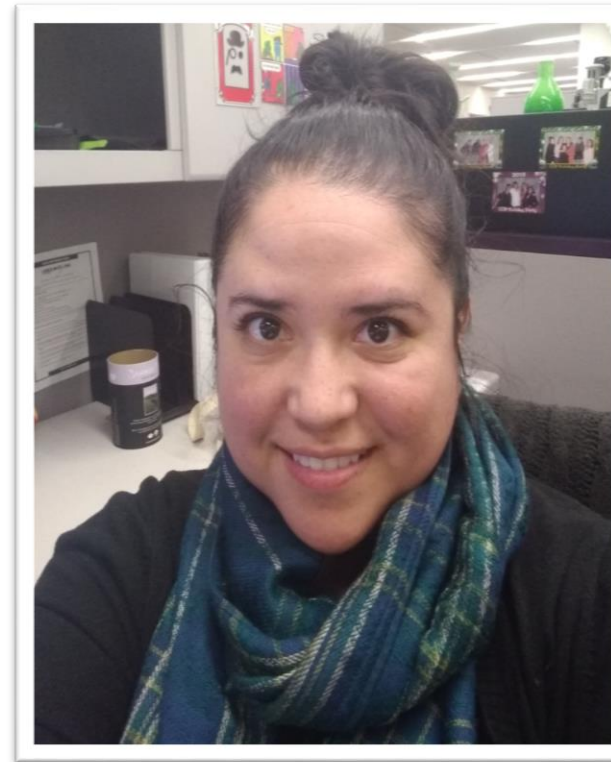
EBD Staff

Melissa Spring



We will ask you each time you call for your agency code, your first and last name before we can answer the questions.

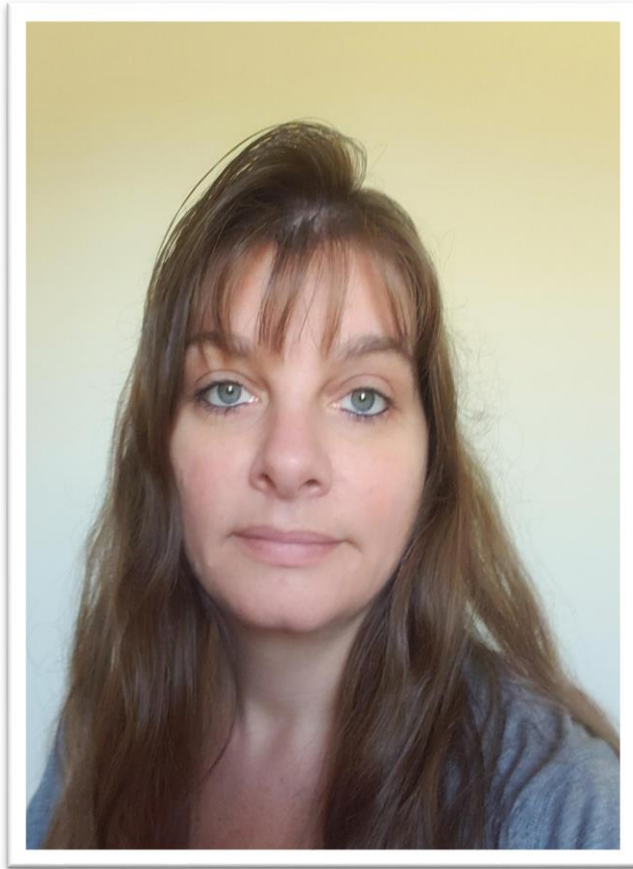
Pamela Alvarado-McNamara



Remember to key transactions timely. Also please make sure you obtain and maintain the required proofs.

PA/PE Unit

EBD Staff



Kara Hillicoss

Remember to mark your calendars to run your agency reconciliation every month on the Mondays that follows the first Friday

PA/PE Unit



NYSHIP

New York State
Health Insurance Program



Questions?



NYSHIP
New York State
Health Insurance Program

PELU Announcements

Presenter – Lauren Leadley, Public Employer Liaison Unit

PELU Announcements

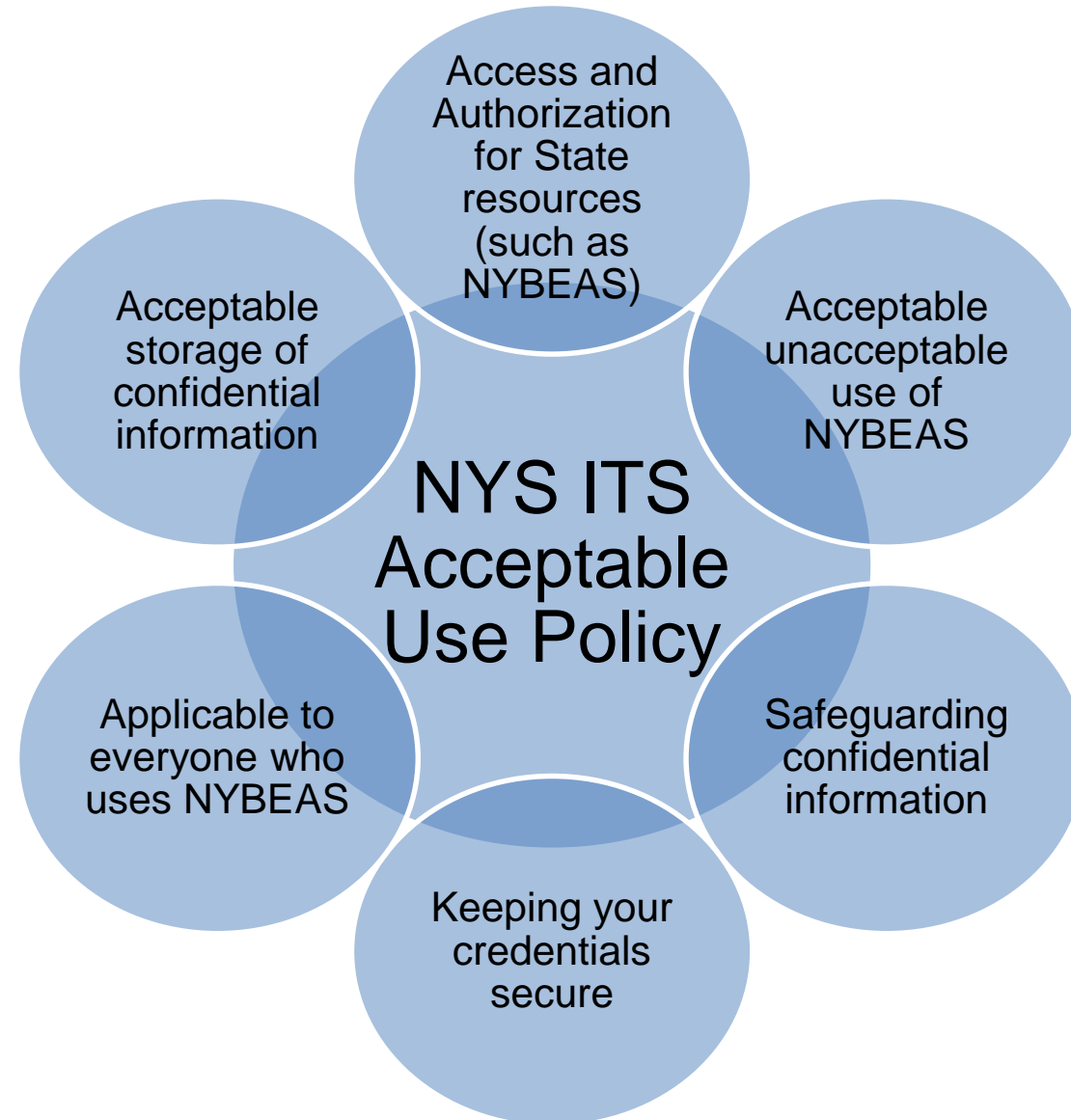
Topics

- NYS ITS Policy
- Tier 5/6 HBA Memo
- New Title for NYSHIP Manual
- Staff
- Contact

NYS ITS Policy

- HBA Memos [PA21-16](#) and [PAEX21-14](#) were published on November 3
- DAOs must ensure all NYBEAS users read and comply with the NYS ITS Acceptable Use Policy
- A link to the policy is included in the HBA Memo

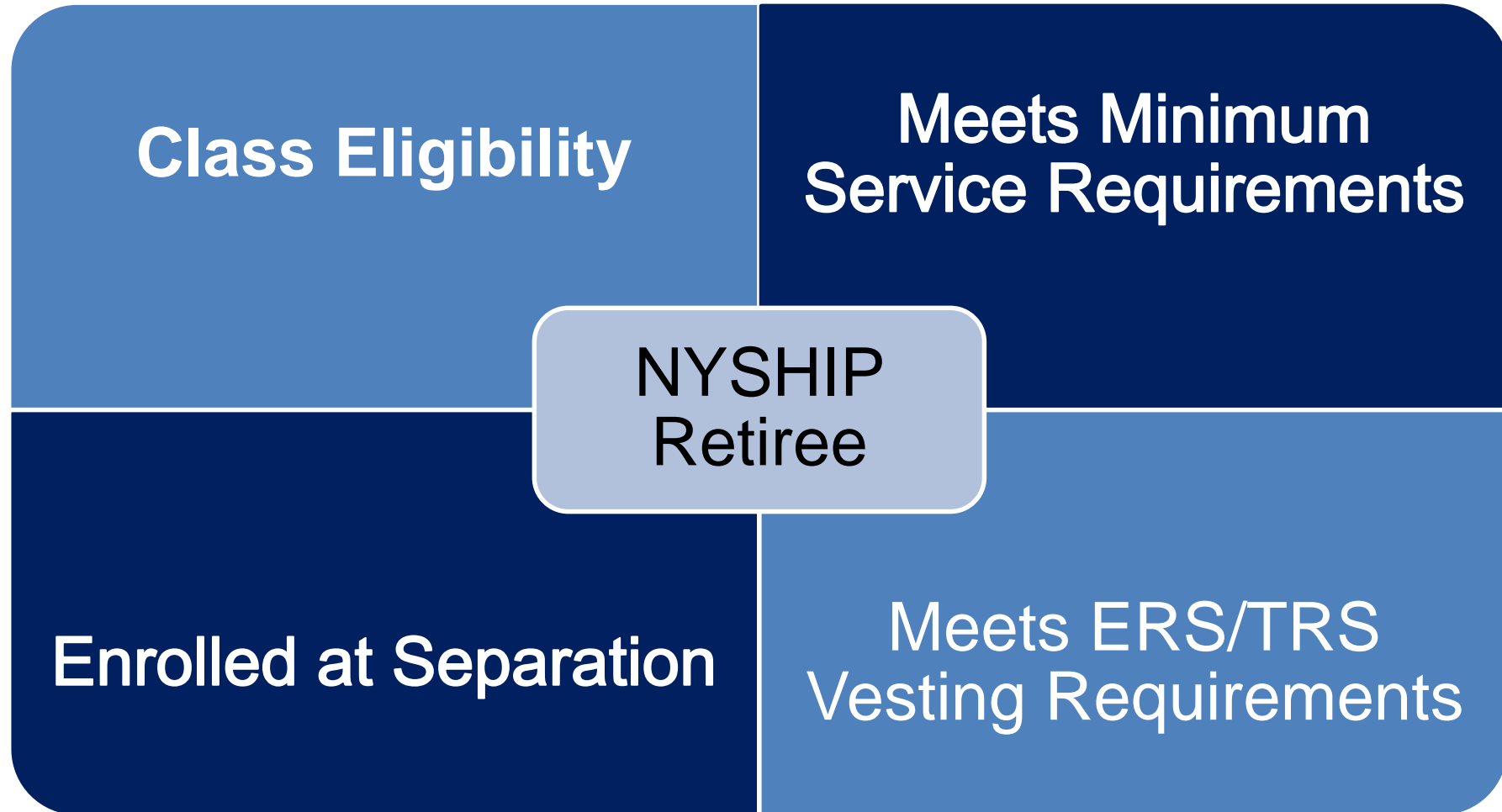
NYS ITS Policy



Tier 5/6 HBA Memo

- HBA memos [PA21-17](#) and [PAEX21-15](#) were published on November 3
- Reviews NYSHIP Retiree eligibility requirements

Tier 5/6 HBA Memo



Tier 5/6 HBA Memo

Tiers 1-4

First joined NYSLRS
or NYSTRS prior to
January 1, 2010

5 Year
Vesting Requirement

Tiers 5-6

First joined NYSLRS
or NYSTRS on or after
January 1, 2010

10 Year
Vesting Requirement

Tier 5/6 HBA Memo

- Reiterates NYSHIP Regulations, Section 73.1(e), which defines a retiree as a person who:
 - Has retired as a member of NYSLRS or NYSTRS; or
 - “Was not” a member of NYSLRS or NYSTRS and is at least 55
- Tier 5 and 6 members with less than 10 years of service credit are not eligible for NYSHIP retiree coverage
 - Withdrawing from NYSLRS or NYSTRS does not change this

Tier 5/6 HBA Memo

- PAs with retiree health insurance service requirement of at least 10 years:
 - Unlikely to cause issues
- PAs with retiree health insurance service requirements of 5 - 10 years:
 - Tier 5 or 6 members with less than 10 years of NYSLRS or NYSTRS service credit do not qualify for NYSHIP retiree coverage, despite the PA's service requirement

New Title for NYSHIP Manual

- The “Manual for NYSHIP Participating Agencies” now has a new name



New Title for NYSHIP Manual

- The “Administrative Guide for Participating Agencies”



New Title for NYSHIP Manual

- You can find the Guide on the Department of Civil Service Marketing Site
 - <https://www.cs.ny.gov/employee-benefits/pa-market/benefits-information.cfm>



Introduction Benefits Information Financial Reports Providers/Pharmacies Civil Service Home
Customer Service FAQ Rates **Administrative Guide** Contact Us NYSHIPOnline Home

The Empire Plan is a unique health insurance plan designed especially for public employees in New York State. Empire Plan benefits include inpatient and outpatient hospital coverage, medical/surgical coverage, Centers of Excellence for transplants, infertility and cancer, home care services, equipment and supplies, mental health and substance abuse coverage and prescription drug coverage.

Public Employer Liaison Unit (PELU) Staff

Remember to include your agency code in the subject line when you e-mail us.

Please refer to the Administrative Guide for helpful information!

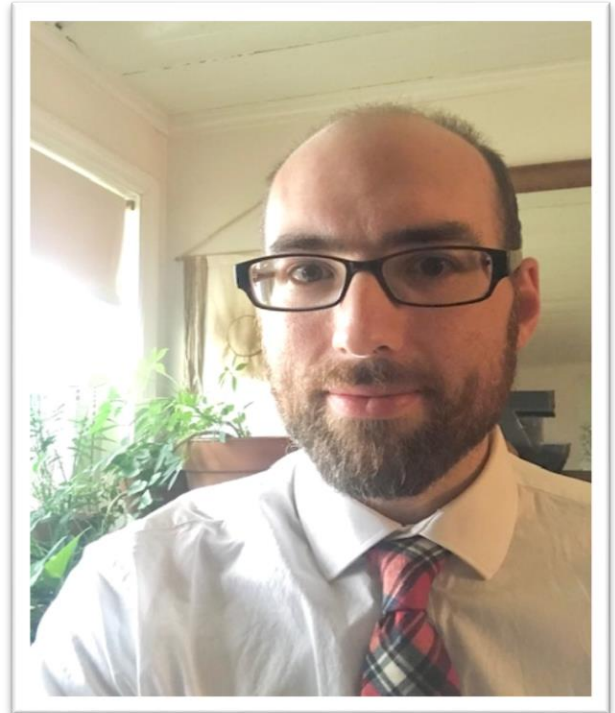
Make sure to keep your NYBEAS credentials secure.



Amy Orr



Lauren Leadley



Jesse Horton

When to Contact PELU

- Questions about NYSHIP policies
- Changes in NYSHIP benefits that require a revised resolution such as contribution rate changes or newly offering benefits to a class or category of employee/retiree
- Contact us 90 days in advance of the effective change
- Please contact PELU by e-mail at PELU@cs.ny.gov



NYSHIP
New York State
Health Insurance Program



Questions?



NYSHIP
New York State
Health Insurance Program

Empire Plan Benefit Changes

Presenter- Mindy Beyer, Contract Manager, Vendor Management Unit

**New York State Department of Civil Service
Employee Benefits Division**

Prepared for use by the Department of Civil Service, Employee Benefits Division representatives only.

Empire Plan Benefit Changes

Topics

- New ID Cards
- Surprise Bills
- Benefit Updates
- COVID-19 Related Benefits

New ID Cards

- Benefit cards are now being reissued for all Empire Plan members. Reissuance is expected to go into mid/late December.
- This is to ensure compliance with new federal regulations
- Changes include new information on the front of the card, related to out-of-pocket costs. The member's ID number has **not** changed.
- **Plan members can use their new card immediately**; there is no requirement to call the Empire Plan/register the card.

New ID Cards

Sample Image of new Family Coverage Card:

NEW YORK STATE | **NYSHIP**
New York State Health Insurance Program | **The Empire Plan**

123456789

JEANNIE EMPIRE PLAN ENROLLEE
JOHN EMPIRE PLAN DEPENDENT PARTNER
JANE EMPIRE PLAN DEPENDENT
MICHAEL EMPIRE PLAN DEPENDENT
JAMES EMPIRE PLAN DEPENDENT
MARY EMPIRE PLAN DEPENDENT

In-network OOP Limits: Drug: \$XXXX, Non-Drug: \$XXXX (Ind); Drug: \$XXXX, Non-Drug: \$XXXX (Family)
Non-network Combined Deductible: \$XXXX (Enrollee; Spouse/Partner; all Children combined)
Non-network Combined Coinsurance Max: \$XXXX (Enrollee; Spouse/Partner; all Children combined)
Physical Medicine Program Deductible: \$250 (Enrollee; Spouse/Partner; all Children combined)

For enrollee services, precertification & provider relations, please call:
1-877-7-NYSHIP (1-877-769-7447)

For details on your health benefits, visit
www.cs.ny.gov/employee-benefits

Providers: This card represents but does not guarantee enrollment in the New York State Health Insurance Program (NYSHIP) for Government Employees.

Submit hospital, skilled nursing facility and hospice claims to your local Blue Plan. Hospital and related services provided by Empire HealthChoice Assurance, Inc., a licensee of the Blue Cross and Blue Shield Association.

BLUE CROSS PLAN 303 Blue Cross Prefix: YLS

Group# 030500 Bin# 004336

Submit medical provider claims in accordance with your participating provider agreement. Submit behavioral health provider claims to Beacon Health Options. All other non-hospital providers call 1-877-769-7447 for information about eligibility, benefits and claims submission.

In-network Drug OOP Limit does not apply to Empire Plan Medicare Rx enrollees.

Administered by the New York State Department of Civil Service

New ID Cards

Important Note:

- Benefit cards that are undeliverable will be sent to the enrollee's agency
- Cards will not be forwarded by the post office; for example, if an enrollee recently moved to an address not yet updated on NYBEAS, the benefit cards will be sent to the enrollee's agency.
- DCS encourages agencies to provide returned cards to enrollees when practicable

Surprise Bills

- No Surprises Act – part of recent (December 2020) federal legislation
- The No Surprises Act will be effective January 1, 2022
- The new federal rules will expand protections nationwide. These will apply to certain services, including:
 - Out-of-network emergency services received at a hospital
 - Items and services provided by certain out-of-network providers at an in-network facility
- Plan members with questions should call The Empire Plan toll-free (1-877-769-7447)

Benefit Updates

LiveHealth Online

- As a reminder, LiveHealth Online is a telehealth service available 24 hours a day, 7 days a week
- Update: This service will continue to be covered in full for Plan members (no copay) through December 31, 2022
- To begin the process for remote care, go to www.empireblue.com/nys
- For questions or assistance, Plan members can call 1-888-548-3432 or (1-888-LiveHealth)

Benefit Updates

Diabetic Supplies – New Option

- Effective January 1, 2022, Empire Plan members can obtain certain diabetic supplies at a network pharmacy, with no out-of-pocket cost
- These supplies are: syringes, needles, alcohol swabs and gauze
- Empire Plan members can continue to obtain all diabetic supplies through the Medical Program by contacting HCAP at 1-877-769-7447

Benefit Updates

2022 In-Network Out of Pocket Limits

- There is a limit on the amount an enrollee can pay for in-network services/supplies
- These limits change annually per federal guidance
- In 2022, the maximum amounts are as follows:

Empire Plan Program	Individual Coverage – Annual Limit	Family Coverage – Annual Limit
Hospital/Medical/MHSU	\$5,650	\$11,300
Prescription Drug	\$3,050	\$6,100
Total Limit	\$8,700	\$17,400

COVID-19 Benefits

Reminder:

HBA Online and the October 2021 *Empire Plan Report* have detailed information on COVID-19 benefit related topics.

COVID-19 Benefits

- The federal public health emergency period was extended through January 15, 2022
- Currently all diagnostic tests, office visits, and urgent care or emergency department visits related to diagnosing COVID-19 are covered in full under The Empire Plan
- The COVID-19 vaccine is free, and available to persons age 5 and older. To find a vaccination site, go to: www.vaccines.gov or call 1-800-232-0233

COVID-19 Benefits

Resources for Support:

- **The Empire Plan NurseLine**
 - Available 24 hours a day, 7 days a week
 - Call The Empire Plan toll-free at 1-877-7-NYSHIP (1-877-769-7447)
 - Registered nurses can assist with health-related questions, including those about COVID-19
 - No additional cost/no copay for services
- **NY Project Hope**
 - Emotional Support Hotline available 7 days a week, from 8:00am – 10:00pm
 - Call 1-844-863-9314
 - No charge for services



NYSHIP

New York State
Health Insurance Program



Questions?



NYSHIP
New York State
Health Insurance Program

Financial Update

Presenter- Paul McKinney, Office of Financial Services

New York State Department of Civil Service

Prepared for use by the Department of Civil Service, Employee Benefits Division representatives only.

Financial Update

Topics

- 2022 Rate Renewal
- 2022 PA Monthly Rates
- Projected Dividends

2022 Rate Renewal

- Net Premium increase: 6.6%
- Empire Plan Program Trends:
 - Hospital Program – 7.4%
 - Medical Program – 5.6%
 - Prescription Drug Program – 8.8%
 - Mental Health & Substance Abuse Program – 9.6%
- Rate Includes 0% margin
- \$500 Million Dividend Application

2022 Participating Agencies Monthly Net Rates

Empire PlanPrime

- Individual \$1,196.12
- Family \$2,763.74

Empire Mediprime

- Individual \$392.52
- Family-1 \$1,109.94
- Family-2 \$1,109.94

Excelsior PlanPrime

- Individual \$878.20
- Family \$1,680.24

Excelsior Mediprime

- Individual \$57.62
- Family-1 \$295.44
- Family-2 \$199.91

Projected Dividends - All Payors

Dividend Account Summary			
31-Dec-2020	Balance	\$	433,304,318
26-Mar-2021	Plan Year 2020 Gain - Empire BlueCross	\$	397,044,439
26-Mar-2021	Plan Year 2020 Gain - United Healthcare	\$	312,091,025
27-May-2021	Plan Year 2021 Dividend Application	\$	(400,000,000)
24-Jun-2021	United HealthCare Class Action Settlements	\$	204,495
	Interest: January - September 30, 2021	\$	672,083
30-Sep-2021	Balance	\$	743,316,361
	Interest: October - December 31, 2021	\$	117,000
31-Dec-2021	Balance	\$	743,433,361
	Interest: January - March 31, 2022	\$	117,000
1-Apr-2022	Plan Year 2022 Dividend Application	\$	(500,000,000)
	Interest: April - December 31, 2022	\$	115,000
31-Dec-2022	Balance	\$	243,665,361

When to Contact OFA

- Questions about NYSHIP Bills (Missing or can't open)
- Questions about remitting payments
- Payments not applied to account

Email address: EBDAccounting@cs.ny.gov

Office of Financial Administration (OFA)



NYSHIP

New York State
Health Insurance Program



Questions?

Final Questions and Answers



End of Meeting

