

2023 Annual Webinar for Participating Agencies

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

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

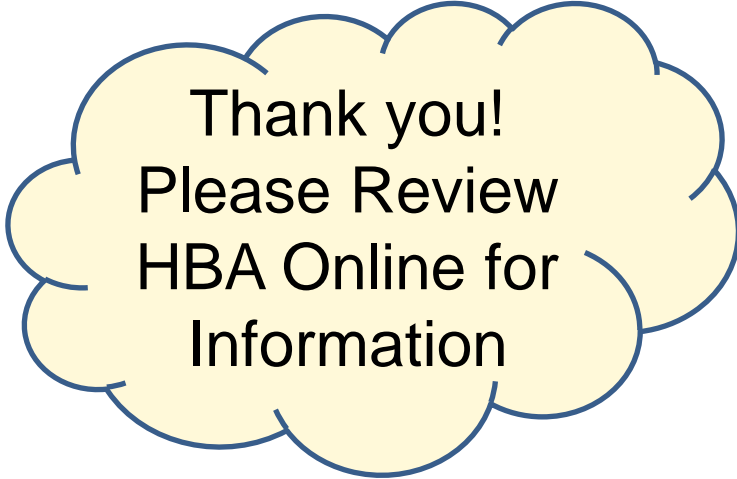
Presenter – Daniel Yanulavich, Employee Benefits Division Director

Message from the Director

Daniel Yanulavich

518-473-1977

Daniel.Yanulavich@cs.ny.gov



Thank you!
Please Review
HBA Online for
Information



NYSHIP
New York State
Health Insurance Program

Benefits Administration

Presenters –Michael Jones, PA/PE Unit Supervisor

PA/PE Unit Topics

- HBA/DAO Access
 - System access for each role
- Correction Requests
 - How to submit and following up on the Corrections Worklist
- Preferred Payment Changes
 - Timely processing
- Effective Dates
 - Processing changes in compliance with NYSHIP effective date rules
- HBA Manual
 - New content

HBA/DAO Access

HBA/DAO Access

Data Access Officer (DAO)

A designated employee of an agency who is authorized to request and terminate user permissions for HBA access for NYBEAS and HBA Online

Health Benefits Administrator (HBA)

A designated employee of an agency who is authorized to access NYBEAS and HBA Online

Note: A DAO cannot be an HBA or have access to NYBEAS. An HBA cannot be a DAO

DAO Access

Agencies designate or change their DAOs by sending a completed *EBD 545 DAO form* signed by the authorized signatory of the agency to EBD

DAOs can request adds, deletes or changes to user permissions for both NYBEAS and HBA Online through the Online Civil Service Permission Request System (OCSPR)

DAOs can request changes to DAO or HBA contact information by sending a fax to 518-485-5590 or an e-mail cs.sm.dao-hba@cs.ny.gov

If a DAO is unable to access OCSPR, they should contact the HBA Helpline at 518-474-2780 Option 3 for assistance

HBA Access

Agencies DAOs designate or change HBAs through the Civil Service Online Permission Request System (OCSPR)

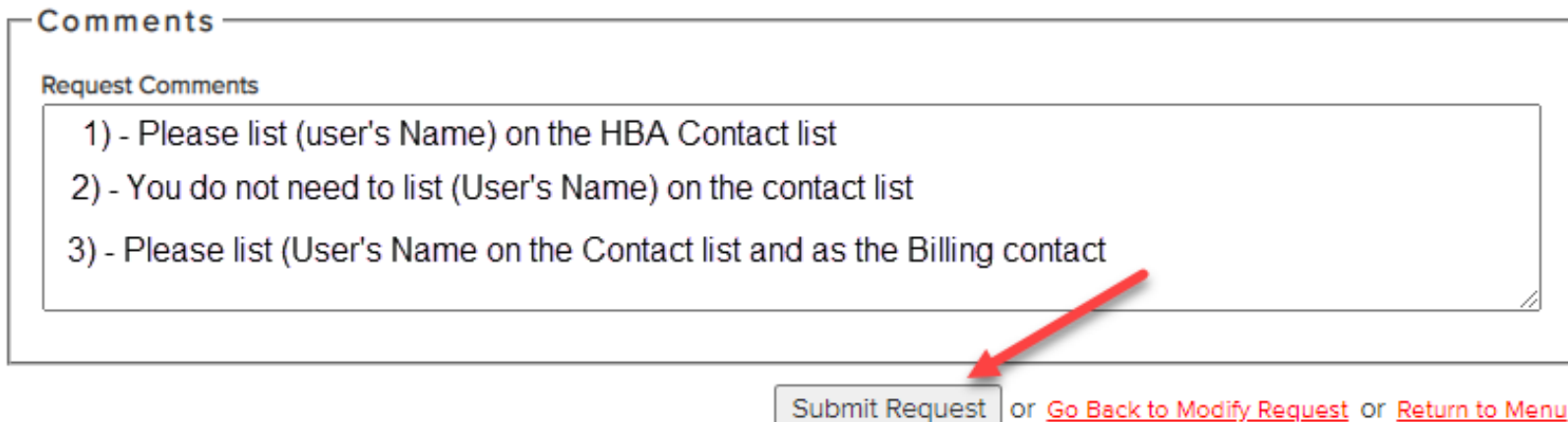
DAOs must indicate if the user is a new HBA under the “Request Comments” section. If there is no comment added, then the user will not be added to EBD’s contact list and EBD will not disclose info to the user

Comments

Request Comments

1) - Please list (user's Name) on the HBA Contact list
2) - You do not need to list (User's Name) on the contact list
3) - Please list (User's Name on the Contact list and as the Billing contact

Submit Request or [Go Back to Modify Request](#) or [Return to Menu](#)



HBA Access

Once the DAO submits the request thru OCSPR, the request goes to the NYS ITS department for review

Once the user has been approved, the DAO who submitted the request will receive **two e-mails** from the ITS Service Desk

One e-mail will provide the User ID for the new user and one will provide the password associated with the User ID

The DAO must forward the email to the user, including all attachments in the email

HBA Access

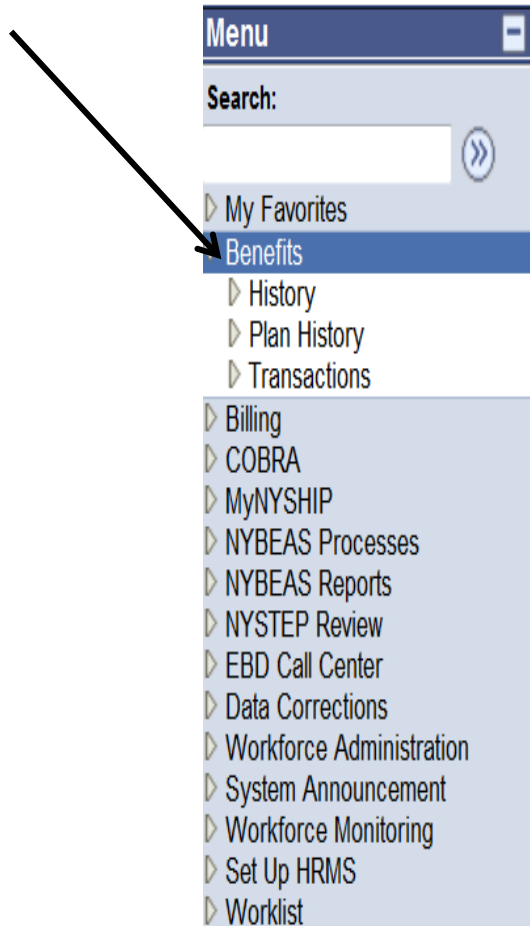
For password reset assistance with NYBEAS or HBA Online, you must contact the NYS IT department:

- Phone: 844/891-1786
- Email: fixit@its.ny.gov

EBD cannot reset an HBA password!

Corrections Requests

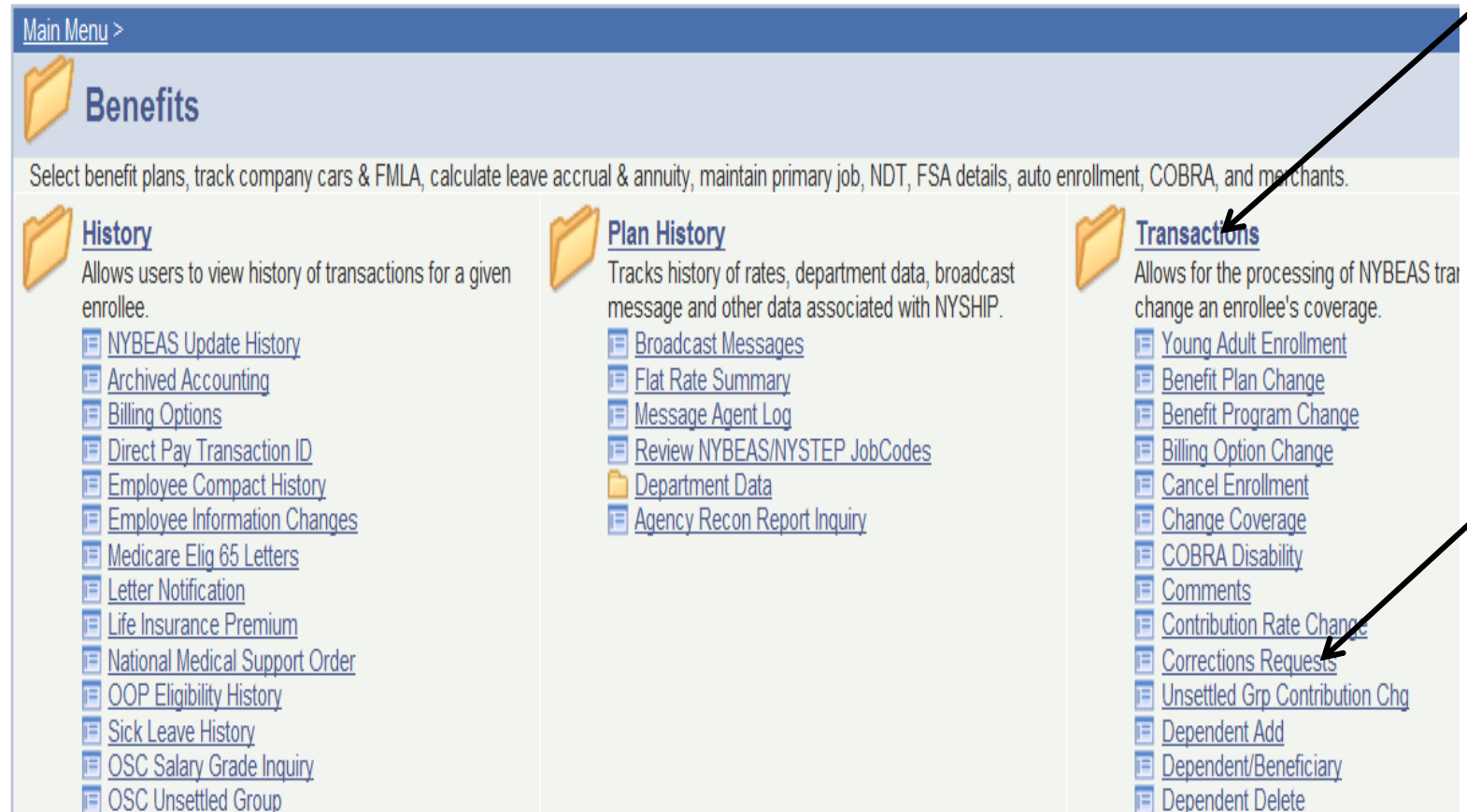
Corrections Requests Transaction



Menu

Search:

- My Favorites
- Benefits**
- History
- Plan History
- Transactions
- Billing
- COBRA
- MyNYSHIP
- NYBEAS Processes
- NYBEAS Reports
- NYSTEP Review
- EBD Call Center
- Data Corrections
- Workforce Administration
- System Announcement
- Workforce Monitoring
- Set Up HRMS
- Worklist



Main Menu >

Benefits

Select benefit plans, track company cars & FMLA, calculate leave accrual & annuity, maintain primary job, NDT, FSA details, auto enrollment, COBRA, and merchants.

- History**
Allows users to view history of transactions for a given enrollee.
 - [NYBEAS Update History](#)
 - [Archived Accounting](#)
 - [Billing Options](#)
 - [Direct Pay Transaction ID](#)
 - [Employee Compact History](#)
 - [Employee Information Changes](#)
 - [Medicare Elig 65 Letters](#)
 - [Letter Notification](#)
 - [Life Insurance Premium](#)
 - [National Medical Support Order](#)
 - [OOP Eligibility History](#)
 - [Sick Leave History](#)
 - [OSC Salary Grade Inquiry](#)
 - [OSC Unsettled Group](#)
- Plan History**
Tracks history of rates, department data, broadcast message and other data associated with NYSHIP.
 - [Broadcast Messages](#)
 - [Flat Rate Summary](#)
 - [Message Agent Log](#)
 - [Review NYBEAS/NYSTEP JobCodes](#)
 - [Department Data](#)
 - [Agency Recon Report Inquiry](#)
- Transactions**
Allows for the processing of NYBEAS transactions to change an enrollee's coverage.
 - [Young Adult Enrollment](#)
 - [Benefit Plan Change](#)
 - [Benefit Program Change](#)
 - [Billing Option Change](#)
 - [Cancel Enrollment](#)
 - [Change Coverage](#)
 - [COBRA Disability](#)
 - [Comments](#)
 - [Contribution Rate Change](#)
 - [Corrections Requests](#)
 - [Unsettled Grp Contribution Chg](#)
 - [Dependent Add](#)
 - [Dependent/Beneficiary](#)
 - [Dependent Delete](#)

Corrections Requests Transaction

Click *Find an Existing Value* to search a correction request that has already been submitted. Click *Add a New Value* to start a new correction request

Corrections Requests

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

[Find an Existing Value](#) [Add a New Value](#)

EmplID: begins with

Empl Rcd Nbr: =

Last Name: begins with

First Name: begins with

Department: begins with

Reference Number: begins with

Status: =

Action Date: =

[Search](#) [Clear](#) [Basic Search](#) [Save Search Criteria](#)

[Find an Existing Value](#) | [Add a New Value](#)

Add a New Value

The screenshot displays the NYBEAS HBEAS web application interface. At the top left, the logo 'NYBEAS HBEAS' is visible. A navigation menu on the left lists various options, with 'Corrections Requests' highlighted. The main content area features a header with 'Home', 'Worklist', 'Add to Favorites', and 'Sign out' links. Below this, there are tabs for 'Find an Existing Value' and 'Add a New Value'. The 'Add a New Value' tab is active, showing a form with an 'EmpID:' field (with an arrow pointing to it and the text 'Enter SSN Here') and an 'Empl Rcd Nbr:' field containing the value '0'. A yellow 'Add' button is located below the form, with an arrow pointing to it. At the bottom of the form area, there are links for 'Find an Existing Value' and 'Add a New Value'. A 'New Window' button is also present in the top right corner.

Corrections Requests Status

DO NOT change the *Status* from *HBA Pending* until all information has been entered! This must be done last

Header Request | Correction Request | Comments | Billing & EBD Corrections

EmplID 123123123 NAME, ENROLLEE Empl Rcd# 0 Ref# NEW

*Status HPNC HBA Pending Old Ref# None

ID Delete HBA Phone # Agency 00500

For EBD/CU Only

Pull Carrier Daily Pull Life Benefit Billing Retro

Pull Carrier Weekly Change Life Retro Eff Date

Pull Benefit Billing Retro Follow up Required

Change Benefit Billing Retro Eff date Urgent

Save Previous tab Next tab Add Update/Display

[Header Request](#) | [Correction Request](#) | [Comments](#) | [Billing & EBD Corrections](#) | [Final Correction](#) | [Final Billing Correct](#)

Header Request Tab

On the *Header Request Tab*, you are required to enter the best phone number to reach you in the event we need to reach you to discuss the corrections request

Header Request | Correction Request | Comments | Billing & EBD Corrections

EmplID 123123123 NAME, ENROLLEE Empl Rcd# 0 Ref# NEW

*Status HBA Pending Old Ref#

ID Delete HBA Phone # Agency

For EBD/CU Only

Pull Carrier Daily Pull Life Benefit Billing Retro

Pull Carrier Weekly Change Life Retro Eff Date

Pull Benefit Billing Retro Follow up Required

Change Benefit Billing Retro Eff date Urgent

Corrections Request Tab

On the *Correction Request Tab* you may need to enter information on the Benefits and Job rows

The screenshot displays the 'Correction Request' tab in a software application. The interface includes a header with navigation tabs: 'Header Request', 'Correction Request', 'Comments', 'Billing & EBD Corrections', and 'Final Correction'. Below the header, the following information is displayed:

EmplID 123123123 NAME, ENROLLEE Empl Rcd# 0 Ref# NEW
*Status: HPNL HBA Pending Benefit Summary Job Summary

The 'Benefits' section is highlighted and contains the following data:

Plan Type	Txn Type	Action	Reason	Benefit Plan	Covrg Cd	Event Dt	Request Dt	Effdt
10	Delete	ENR	REG	001	4	02/05/2024	02/05/2024	03/01/2024

The 'Job' section is also highlighted and contains the following data:

Txn Type	Action	Reason	Job Effdt	Department	NU	PCT Fill
Delete	REH	REH	02/05/2024	00500	PA	100

Two black arrows point to the 'Benefits' and 'Job' sections respectively.

Comments Tab

On the *Comments Tab* enter a comment to confirm your request. Type a comment and click *Add Comments*

Header Request Correction Request **Comments** Billing & EBD Corrections

EmplID 123123123 NAME, ENROLLEE Empl Rcd# 0 Ref# NEW

*Status: HPNC HBA Pending

Existing Comments Find | View All First 1 of 1 Last

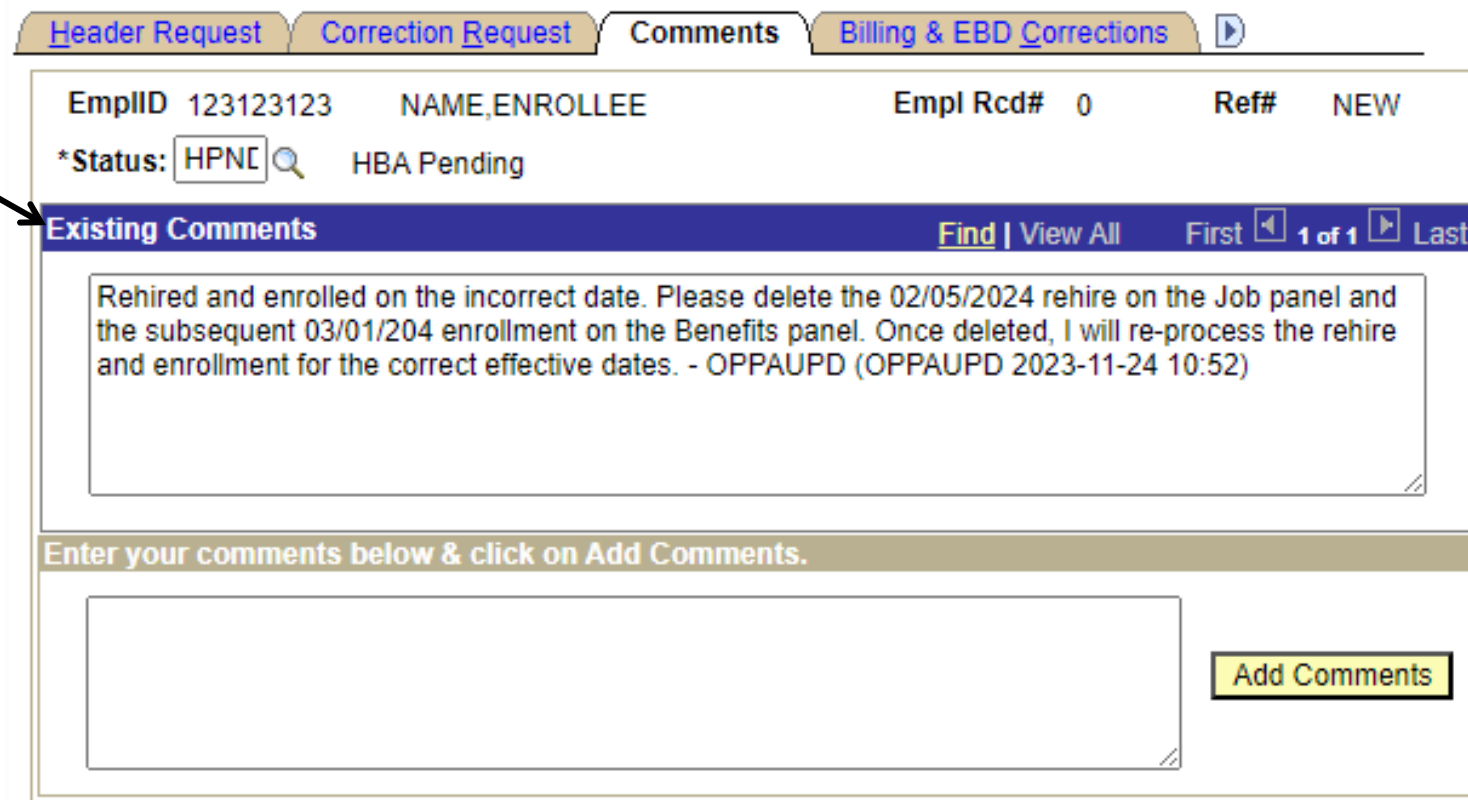
Enter your comments below & click on Add Comments.

Rehired and enrolled on the incorrect date. Please delete the 02/05/2024 rehire on the Job panel and the subsequent 03/01/204 enrollment on the Benefits panel. Once deleted, I will re-process the rehire and enrollment for the correct effective dates.

Add Comments

Comments Tab

Your comment will save to the *Existing Comments* box



The screenshot shows a web application interface with four tabs: **Header Request**, **Correction Request**, **Comments**, and **Billing & EBD Corrections**. The **Comments** tab is active. The main content area displays the following information:

EmplID 123123123 NAME,ENROLLEE Empl Rcd# 0 Ref# NEW
*Status: HBA Pending

Existing Comments Find | View All First 1 of 1 Last

Rehired and enrolled on the incorrect date. Please delete the 02/05/2024 rehire on the Job panel and the subsequent 03/01/204 enrollment on the Benefits panel. Once deleted, I will re-process the rehire and enrollment for the correct effective dates. - OPPAUD (OPPAUD 2023-11-24 10:52)

Enter your comments below & click on Add Comments.

Add Comments

Corrections Request Status

After entering information on the Correction Request tab and Adding Comments to the Comments tab, click the magnifying glass to change the status of the correction request

Header Request Correction Request Comments Billing & EBD Corrections

EmplID 123123123 NAME,ENROLLEE Empl Rcd# 0 Ref# NEW

*Status: HBA Pending

Existing Comments Find | View All First 1 of 1 Last

Rehired and enrolled on the incorrect date. Please delete the 02/05/2024 rehire on the Job panel and the subsequent 03/01/204 enrollment on the Benefits panel. Once deleted, I will re-process the rehire and enrollment for the correct effective dates. - OPPAUPD (OPPAUPD 2023-11-24 10:52)

Enter your comments below & click on Add Comments.

Add Comments

Corrections Request Status

Click *EWRK* for *EBD Worklist*

Look Up Status

Field Value:

Look Up

Clear

Cancel

[Basic Lookup](#)

Search Results

View All First ◀ 1-3 of 3 ▶ Last

<u>Field Value</u>	<u>Translate</u>	<u>Long Name</u>
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EWRK	EBD Worklist	
----------------------	------------------------------	--

HCAN	HBA Cancelled	
----------------------	-------------------------------	--

HPND	HBA Pending	
----------------------	-----------------------------	--

Saving Corrections Request

Save the Correction Request and it will be sent to EBD

Header Request Correction Request Comments Billing & EBD Corrections

EmplID 123123123 NAME, ENROLLEE Empl Rcd# 0 Ref# NEW

*Status: EWRI EBD Worklist

Existing Comments Find | View All First 1 of 1 Last

Rehired and enrolled on the incorrect date. Please delete the 02/05/2024 rehire on the Job panel and the subsequent 03/01/204 enrollment on the Benefits panel. Once deleted, I will re-process the rehire and enrollment for the correct effective dates. - OPPAUD (OPPAUD 2023-11-24 10:52)

Enter your comments below & click on Add Comments.

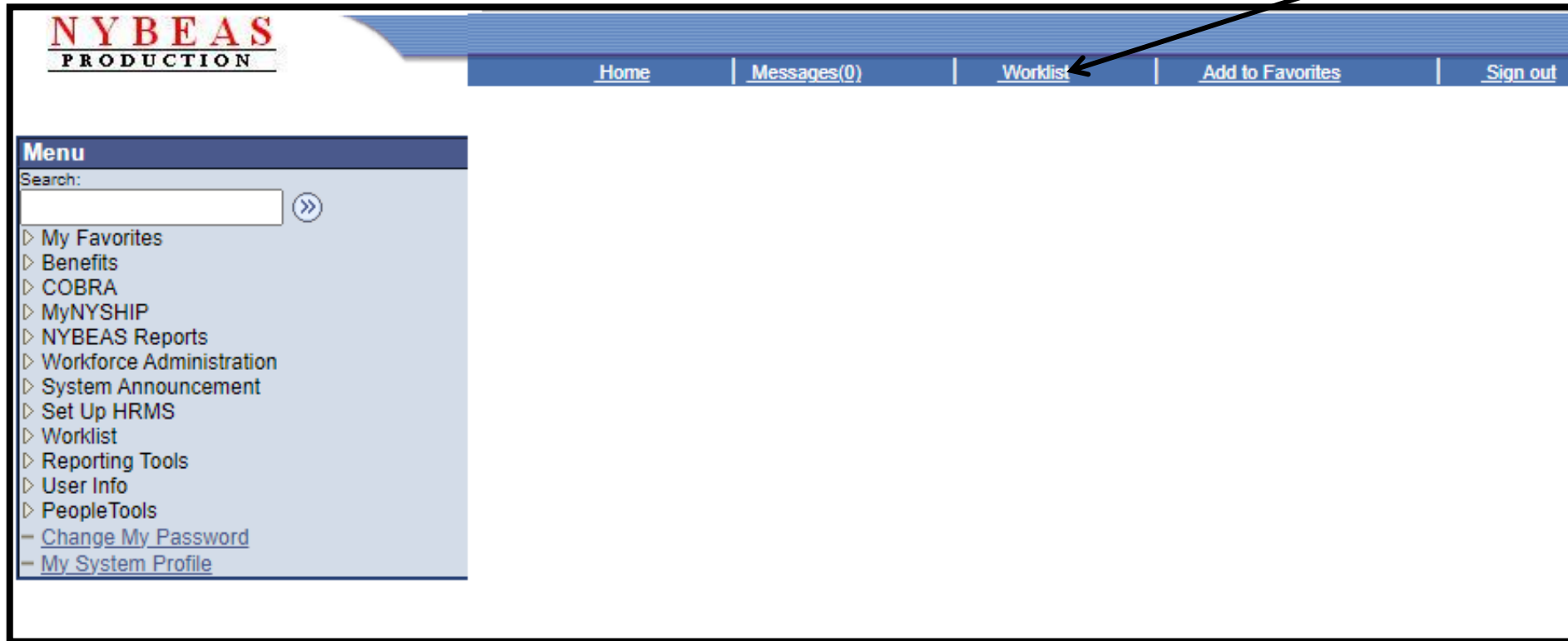
Add Comments

Save Previous tab Next tab +Add Update/Display

[Header Request](#) | [Correction Request](#) | [Comments](#) | [Billing & EBD Corrections](#) | [Final Correction](#) | [Final Billing Correction](#)

Corrections Requests Worklist

Click Worklist from the upper right corner of NYBEAS



NYBEAS PRODUCTION

Home | Messages(0) | **Worklist** | Add to Favorites | Sign out

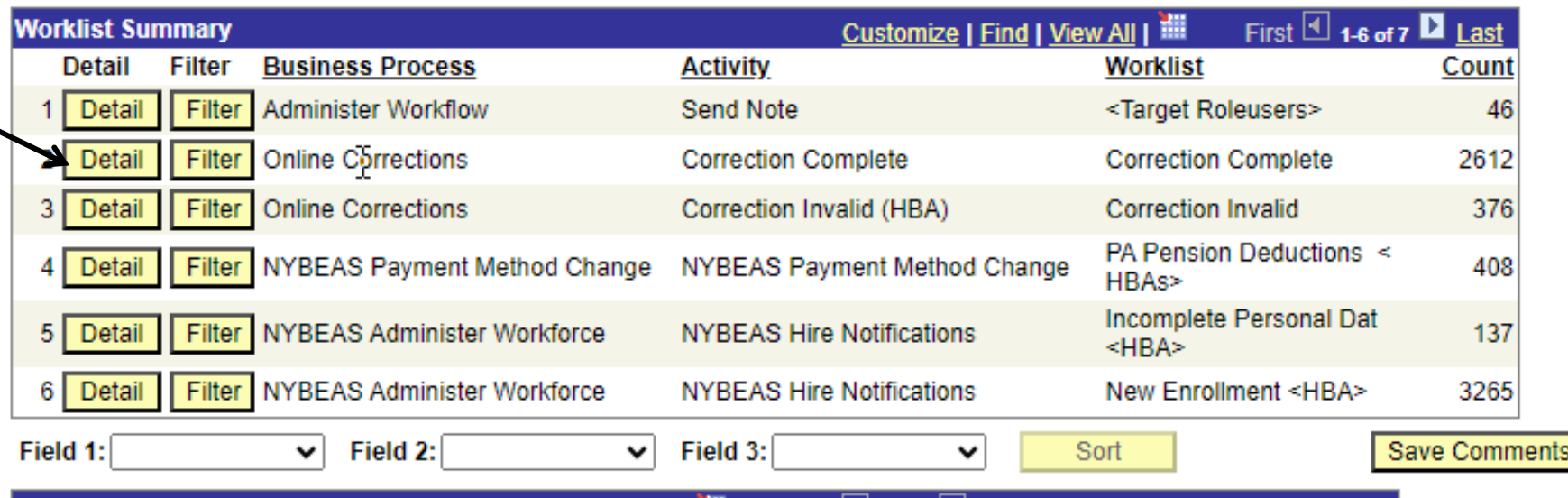
Menu

Search:

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

Corrections Requests Worklist

From your *Worklist Summary* click *Detail* to open your Corrections Requests Worklist



The screenshot shows a 'Worklist Summary' table with columns for 'Detail', 'Filter', 'Business Process', 'Activity', 'Worklist', and 'Count'. The table contains six rows of data. An arrow points to the 'Detail' button in the second row. Below the table are three dropdown menus labeled 'Field 1:', 'Field 2:', and 'Field 3:', followed by a 'Sort' button and a 'Save Comments' button.

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					
2	Detail	Filter	Online Corrections	Correction Complete	Correction Complete	2612					
3	Detail	Filter	Online Corrections	Correction Invalid (HBA)	Correction Invalid	376					
4	Detail	Filter	NYBEAS Payment Method Change	NYBEAS Payment Method Change	PA Pension Deductions <HBAs>	408					
5	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Hire Notifications	Incomplete Personal Dat <HBA>	137					
6	Detail	Filter	NYBEAS Administer Workforce	NYBEAS Hire Notifications	New Enrollment <HBA>	3265					

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

Corrections Requests Worklist

The returned correction will be in your *Worklist Details*. Click *Work It* to open the correction request

Worklist Details										
Customize Find View 100 First 1-15 of 2612 Last										
Mark Worked	ID	Empl Rcd#	DeptID	Name	Ref. Nbr.	Sent From	WL Created on	WL Comments	Reassign	
1 ✓	Work It	0	03977		222672	Tibbitts, Michael	06/22/2020 2:13:28PM	<input type="text"/>	Reassign	
2 ✓	Work It	0	03613		222738	Tibbitts, Michael	06/22/2020 3:32:30PM	<input type="text"/>	Reassign	
3 ✓	Work It	0	03228		222691	Tibbitts, Michael	06/22/2020 3:33:54PM	<input type="text"/>	Reassign	
4 ✓	Work It	0	03038		222850	Tibbitts, Michael	06/23/2020 2:26:19PM	<input type="text"/>	Reassign	
5 ✓	Work It	0	03145		222857	Tibbitts, Michael	06/24/2020 1:07:20PM	<input type="text"/>	Reassign	
6 ✓	Work It	0	03300		222901	Spring, Melissa	06/25/2020 9:25:52AM	<input type="text"/>	Reassign	
7 ✓	Work It	0	03496		222853	Tibbitts, Michael	06/25/2020 12:54:27PM	<input type="text"/>	Reassign	
8 ✓	Work It	0	03613		222743	Tibbitts, Michael	06/25/2020 1:35:21PM	<input type="text"/>	Reassign	
9 ✓	Work It	0	03989		222758	Tibbitts, Michael	06/25/2020 2:40:20PM	<input type="text"/>	Reassign	
10 ✓	Work It	0	03381		222932	Tibbitts, Michael	06/26/2020 12:13:32PM	<input type="text"/>	Reassign	
11 ✓	Work It	0	03145		222904	Spring, Melissa	06/26/2020 3:39:06PM	<input type="text"/>	Reassign	

Corrections Requests Worklist

Review the status to determine if the request is *Complete* or *Invalid Return to HBA*



The screenshot displays a web interface for managing corrections requests. At the top, there are four tabs: "Header Request", "Correction Request", "Comments", and "Billing & EBD Corrections". The "Correction Request" tab is active. Below the tabs, the request details are shown: "EmplID 123123123", "NAME.ENROLLEE", "Empl Rcd# 0", and "Ref# NEW". The status is displayed as "status: COMI" with "Complete" written next to it. An arrow points to the "COMI" status. Below the details is a section for "Existing Comments" with a "Find | View All" link and "First 2 of 2 Last" navigation. A comment box contains the text: "Rehire and enrollment have been deleted. HBA can re-process for the correct date. - OPPAUD (OPPAUD 2023-11-24 11:10)". At the bottom, there is a text area for adding comments and an "Add Comments" button.

Correction Requests

- You must review the *Comments Tab* to view responses from EBD for further action required by you. Even if the status is Complete, you will likely need to take further action
- If EBD determines the correction cannot be processed the Status will be changed to *Invalid Return to HBA*
 - Call the Help Line for assistance
- The *Comments Tab* will inform if further processing is needed or of the reason why the correction request was marked Invalid

Corrections Requests Example

This comment indicates that further processing is needed by the HBA. EBD Corrections Unit deleted information in NYBEAS. The HBA can now process for the correct date. If not done by the HBA, the processing will not be completed and larger issues may arise

Header Request **Correction Request** Comments Billing & EBD Corrections

EmplID 123123123 NAME,ENROLLEE Empl Rcd# 0 Ref# NEW
*Status:: COMI Complete

Existing Comments Find | View All First 2 of 2 Last


Rehire and enrollment have been deleted. HBA can re-process for the correct date. - OPPAUPD (OPPAUPD 2023-11-24 11:10)

Enter your comments below & click on Add Comments.

Add Comments

Correction Requests

- Navigate to NYBEAS Update history to determine if NYBEAS was updated how you intended
- Remove the correction from your worklist by clicking *Mark Worked*



The screenshot shows a table titled 'Worklist Details' with a dark blue header. The table has columns for 'Mark Worked', 'ID', 'Emp/ Rcd#', 'DeptID', 'Name', 'Ref. Nbr.', 'Sent From', 'WL Created on', 'WL Comments', and 'Reassign'. The first row is highlighted in light green and has a green checkmark in the 'Mark Worked' column. An arrow points from the left to this checkmark. The table contains 7 rows of data.

Mark Worked	ID	Emp/ Rcd#	DeptID	Name	Ref. Nbr.	Sent From	WL Created on	WL Comments	Reassign
✓	Work It	0	03977		222672	Tibbitts, Michael	06/22/2020 2:13:28PM	<input type="text"/>	Reassign
2 ✓	Work It	0	03613		222738	Tibbitts, Michael	06/22/2020 3:32:30PM	<input type="text"/>	Reassign
3 ✓	Work It	0	03228		222691	Tibbitts, Michael	06/22/2020 3:33:54PM	<input type="text"/>	Reassign
4 ✓	Work It	0	03038		222850	Tibbitts, Michael	06/23/2020 2:26:19PM	<input type="text"/>	Reassign
5 ✓	Work It	0	03145		222857	Tibbitts, Michael	06/24/2020 1:07:20PM	<input type="text"/>	Reassign
6 ✓	Work It	0	03300		222901	Spring, Melissa	06/25/2020 9:25:52AM	<input type="text"/>	Reassign
7 ✓	Work It	0	03496		222853	Tibbitts, Michael	06/25/2020 12:54:27PM	<input type="text"/>	Reassign

Preferred Payment Changes

Preferred Payment Changes

- To set a retiree up to have their NYSHIP premium contribution deducted from their pension, you will need to process a *Preferred Payment Change (PPC)* in NYBEAS
- Do NOT process a PPC until at most 2 weeks prior to retirement or the change will not go through and the record will remain in APAY
- Step by step transaction instructions for processing a PPC can be found in the PA Manual

Preferred Payment Changes

- Before processing a *PPC*, use the *Personal/Employment* transaction in NYBEAS to enter the employees Retirement Registration Number, Retirement System, and Retirement Tier
- The **Retirement Registration Number** must be inserted accurately, or the change will not go through
 - If you are unsure of the number, confirm with the employee
- If a **Retirement Number** is inserted, the PPC will be blocked so make sure you leave that field blank

Personal/Employment Transaction

Retirement Information

Retirement Reg.#: R123456789

Medicare Id:

Retirement System 1 Employee's Retirement System

Retirement Number:

Retirement Type: REGULAR

Retirement Tier: Tier IV

Leave the **Retirement Number** field BLANK

Preferred Payment Changes

Preferred Rate Qualifier				Find View All	First	1 of 1	Last
Action Dt.	Effsec	*Preferred Pay Method	User ID				
11/08/2022	<input type="text" value="0"/>	<input type="text"/>	MKJ2	<input type="button" value="+"/> <input type="button" value="-"/>			

Preferred Rate Qualifier *** PA enrollees only ***				Find View All	First	1 of 1	Last
Action Dt.	Effsec	*Preferred Rate Qualifier	User ID				
11/08/2022	<input type="text" value="0"/>	<input type="text"/>	MKJ2	<input type="button" value="+"/> <input type="button" value="-"/>			

→

Preferred Rate Qualifiers

These are the rates of contribution from the employer. If the amount your agency contributes does not match any of the below, you cannot put your retiree into pension deduction; you must keep them in APAY

Code	Rate Qualifier
0	100/100
1	100/95
2	100/90
3	100/80
4	100/75
5	100/65
6	100/50
7	100/35
8	95/95
9	95/85

Code	Rate Qualifier
A	90/90
B	90/85
C	90/75
D	90/50
F	85/85
G	85/75
H	85/50
I	75/75
J	75/50
K	75/35

Code	Rate Qualifier
L	65/46
M	60/60
N	50/50
O	50/35
P	95/90
Q	95/80
R	90/80
S	80/80
U	83/83
Y	85/80

System	Maximum Deduction
ERS	\$999
TRS	\$2000

Preferred Payment Changes

- The *Preferred Payment Change* should go through within the first 3 months following the retirement date
- If the change has not occurred, then you may have processed it too early or the Retirement information may be incorrect
- Confirm the retirement system and retirement registration number are correct and then reprocess the PPC

Preferred Payment Changes

- If the PPC still does not go through and you have already tried to reprocess it, you will need to manually update the retirement number in NYBEAS and then send EBD a request
- The Retirement Registration Number and Retirement Number will be the same number
 - For ERS this number will begin with an R
 - Example R123456789
- After updating the retirement number, process a Corrections Request specifying the Rate Qualifier in the Comment of your request
 - Example: Please change John Doe to EPEN. The rate qualifier should be 90/90.

Effective Dates

Effective Dates

- When you process an enrollment transaction in NYBEAS, the Timeliness of the Request Date, and the First Date of Eligibility or Qualifying Event (if applicable) must be used to determine the effective date of coverage
- When an enrollee requests coverage changes that either do not have a qualifying event or the request is made more than 30 days after an event, the enrollee will be subject to a late enrollment waiting period: the effective date will be the first day of the third month following the month in which the request was made

Effective Dates – New Hire/Newly Eligible

New Hire / Newly Eligible Employee	Request Date	Effective Date
<i>Without an Initial Waiting Period</i>	No later than 30 Days after the <u>First Date of Eligibility</u>	First Day the Employee Actively Works a Benefits Eligible Position
	More than 30 Days after the <u>First Date of Eligibility</u>	First Day of the third month following the <u>Request Date</u>
<i>With an Initial Waiting Period</i>	During the <u>Initial Waiting Period</u>	The Day After the Completion of the <u>Initial Waiting Period</u>
	No later than 30 Days after the <u>First Date of Eligibility</u>	The Day After the Completion of the <u>Initial Waiting Period</u>
	More than 30 Days after the <u>First Date of Eligibility</u>	First Day of the third month following the <u>Request Date</u>

Effective Dates – Enrollee Qualifying Event

Previously Eligible Employee	Request Date	Effective Date
Employee experienced a qualifying event to newly enroll in coverage	No later than 30 Days after the qualifying event	The Date of the <u>Qualifying Event</u>
Employee experienced a qualifying event to newly enroll in coverage	More than 30 Days after qualifying event	First Day of the third month following the <u>Request Date</u>
Employee did not experience a qualifying event to newly enroll in coverage	The signature date on the <u>PS-503</u>	First Day of the third month following the <u>Request Date</u>

Effective Dates – Dependent Qualifying Event

There is a Qualifying Event to Add a Dependent	Request Date	Effective Date
Employee was previously eligible for/enrolled in NYSHIP coverage	No later than 30 Days after the qualifying event	The <u>Event Date</u>
Employee was previously eligible for/enrolled in NYSHIP coverage	More than 30 Days after the qualifying event	First Day of the third month following the <u>Request Date</u>

- This could be a newly eligible dependent, such as a newborn child or a new spouse, or a previously eligible dependent who experienced a qualifying event that allows them to enroll in coverage without a waiting period, such as a loss of other coverage.
- If the employee/retiree is already enrolled in coverage, the dependent can be added to coverage effective the date of the qualifying event. If the employee/retiree is not enrolled in coverage, they can enroll in coverage adding the dependent effective the date of the qualifying event.

Effective Dates – No Qualifying Event

Previously Eligible Enrollee/Dependent	Request Date	Effective Date
Enrollee/Dependent did not experience a Qualifying Event	The signature date on the <u>PS-503</u>	First Day of the third month following the <u>Request Date</u>

If an enrollee or a dependent was previously eligible for NYSHIP coverage and was not enrolled/added to coverage at the time they were first eligible and they have not experienced a qualifying event to newly enroll in coverage, then their coverage will be effective after a late enrollment waiting period, the first day of the third month following the request date.

Effective Dates - Newborn

- A newborn child can be added without the social security number and/or birth certificate, however you must follow up to obtain this information once it is available
- If you receive a PS-503 requesting the addition of a newborn more than 30 days after the child's birthdate, forward the request to EBD for review and/or processing

Participating Agency Manual

PA Manual

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

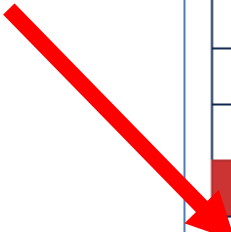
life
M/C

IPP Income Protection Plan
M/C
DC-37

survivor benefits
New York State Active Employees

workers' compensation
ARS Publications for

vision Basic Vision Information



PA Manual

HBA Manuals

More manuals are coming soon!

NY Manual

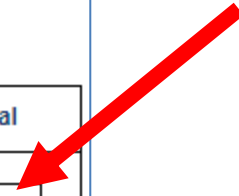
View

PE Manual

View

PA Manual

View



PA Manual

Events

- "Other" Child
- Adopting a Child
- Continuing Coverage for a Disabled Child
- Divorce
- Domestic Partner

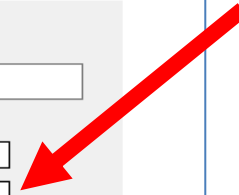
Topics

- Dependent Eligibility Requirements
- Employee Eligibility Requirements
- Roles & Responsibilities
- Student Dependent with Prior Military Service
- The Health Insurance Portability and Accountability Act (HIPAA) and

Search

Filter

- UPDATES
- TRANSACTIONS
- GLOSSARY
- CONTACT




PA Manual

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
Add Domestic Partner to Existing Family Coverage	DEP	ADP	If an enrollee has existing Family coverage, click on the link for instructions on how to add their domestic partner to coverage.	Domestic Partner
Add Newborn - Change to Family	CCO	NWB	If an enrollee with Individual coverage who are adding their newborn.	Newborn Child

PA Manual - Transaction

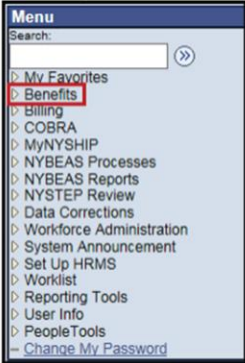


NYSHIP
New York State
Health Insurance Program

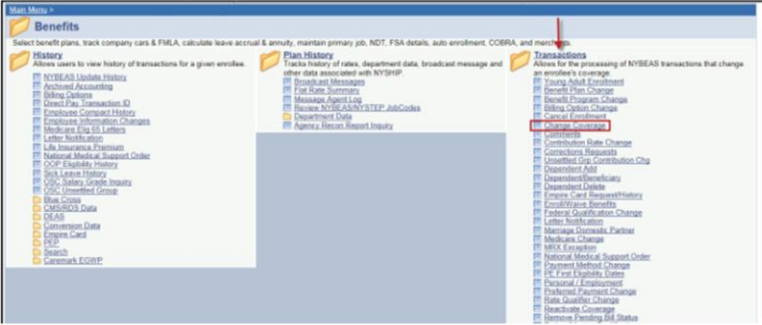
Marriage – Adding a New Spouse and Changing from Individual to Family Coverage

To add a spouse when the enrollee has Individual coverage, you will use the **Change Coverage** transaction.

- From the NYBEAS homepage, select **Benefits**



- Under the Transactions menu, choose **Change Coverage**



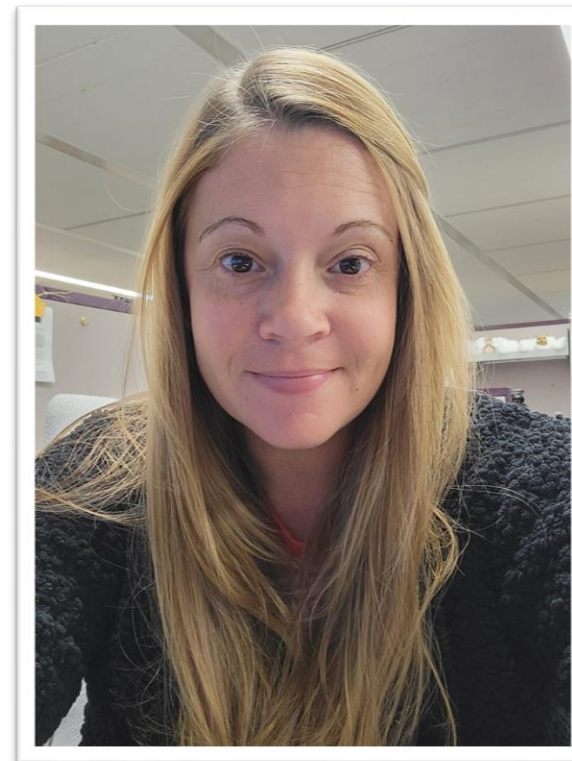
Participating Agency & Participating Employer (PA/PE) Unit Staff

Amanda Perkins



Please have NYBEAS open and ready when you call the HBA Help Line.

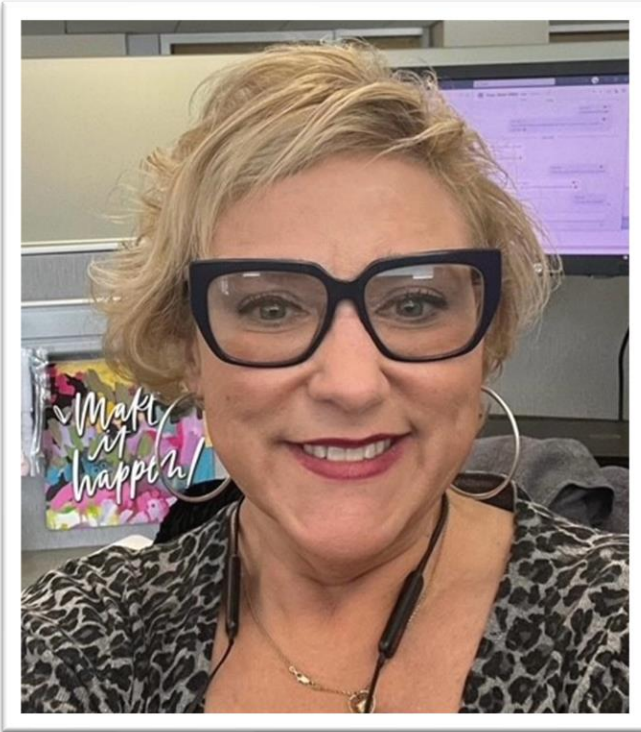
Melissa Spring



Please have your agency code and the employee's SSN ready when you call the HBA Help Line.

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

Elizabeth Varsany



Please to access the NEW HBA Manual. This is your toolbox for step-by-step NYBEAS transactions and much more!

Michael Santiago



Please run your monthly reconciliation report on the Monday following the first Friday of each month to reconcile your bill.

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

Mike Jones



Please make sure you update your DAO and HBA information with EBD when you have staff changes!



NYSHIP
New York State
Health Insurance Program



Questions?



NYSHIP
New York State
Health Insurance Program

PELU Announcements

Presenter – Jesse Horton, Public Employer Liaison Unit

Topics

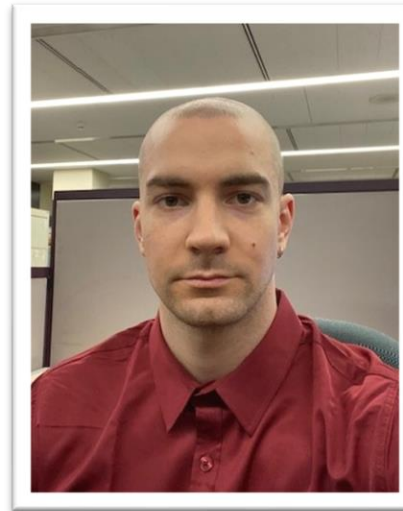
- PELU Staff Introduction
- Policy Memo 150, Six months notice of change
- Policy Memo 127, Withdrawing Medicare Enrollees
- Timely processing
- Federal Premium Reporting
- Dual Family Prohibition & Buyout Programs
- When to Contact PELU

Public Employer Liaison Unit (PELU) Staff



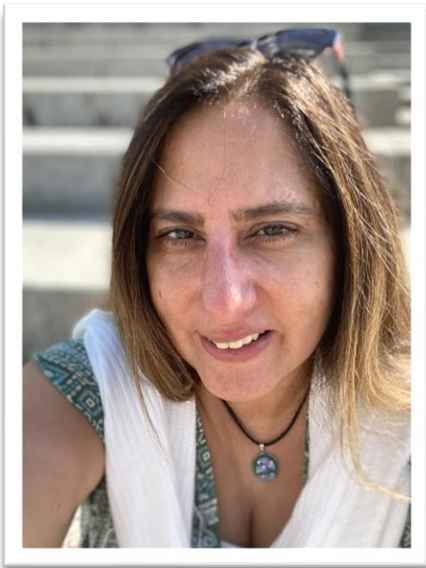
Amy Orr

Use your NYSHIP resources: many answers to your questions can be found in the General Information Book, the HBA Manual, and the NYSHIP Administrative Guide.



August Heinrich

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



Susana Alvear

Be sure to regularly check HBA Memos for important announcements.



Jesse Horton

Make sure to keep your NYBEAS credentials secure.

Policy Memo 150

- On October 17, 2023, the Employee Benefits Division (EBD) published [Policy Memo 150](#)
- The memo requires that incoming agencies submit their request to join NYSHIP at least 6 months in advance
- The memo also requires that existing agencies requesting to make changes to their NYSHIP participation provide EBD with at least 6 months notice prior to the effective date of the change

Policy Memo 150

- Such changes to NYSHIP participation could include a change in benefit plans, for example switching from the Empire Plan to the Excelsior Plan or vice versa
- Changes could also include a change in contribution rate, change in eligible classes, change in minimum service time for retirement, etc.

Policy Memo 150

- The 6-month minimum notice is necessary to coordinate changes in coverage among multiple EBD units and insurance carriers without causing disruptions to member enrollments
- In addition, the 6-month timeframe is necessary to ensure compliance with statutes requiring advance notice to enrollees of a change in benefit
- For examples, 90-days notice of change in coverage is required for prescription drugs plans
- Please review Policy Memo 150 for more information

Policy Memo 127

- Agencies that participate in NYSHIP may not withdraw only their Medicare-eligible retirees from NYSHIP, in accordance with NYSHIP [Policy Memo 127](#).

Policy Memo 127

- Some agencies have begun offering non-NYSHIP Medicare Advantage Plans to their Medicare-primary enrollees. This is allowable only if Medicare-primary enrollees are given the choice to stay in NYSHIP.
- Enrollees and their covered dependents may not be enrolled in different plan options.

Policy Memo 127

- Participating Agencies are not allowed to withdraw only their Medicare-eligible enrollees from NYSHIP because this practice is detrimental to the plan.
- As a reminder, the NYSHIP premium cost is significantly reduced for Medicare-primary members.
- Any Participating Agency or Participating Employer that wishes to remove Medicare-primary retirees from eligibility for NYSHIP must withdraw all of its retirees from NYSHIP.

Timely Processing

- As reminder, it is extremely important that all changes to enrollment records are processed in NYBEAS in a timely manner
- Typically, changes should be processed within 7 days of the request or event
- Timely processing is required to ensure accurate billing and a smooth transition of benefits for enrollees
- Numerous problems can arise when transactions are not processed timely

Timely Processing

- For example, when a retirement is not processed in time for a Medicare eligible enrollee, claims are incorrectly paid as plan-primary
- When EBD is eventually notified the employee has been retired, claims must be reversed
- Medicare has a limit on how far back they will pay claims, and will refuse claims submitted outside this time frame

Timely Processing

- Reversed claims can be costly to the enrollee and the plan, and increased plan costs mean increased premiums for all plan enrollees
- In addition, agencies may incur additional premium costs if there is a difference in premium amount and transactions are processed outside the 6-month refund window

Timely Processing

- As another example, problems can arise when job transactions, such as terminations or leaves of absence are not keyed on time
- Employees and their dependents may continue to have access to the benefits well after their eligibility has ended
- By the time the job record is corrected, claims may have already been paid and the costs cannot be recovered
- Once again, this can be costly to the plan, which is ultimately costly for plan enrollees and agencies

Mandatory Federal Premium Reporting

- As a reminder, the federal Consolidated Appropriations Act requires that all health insurance plans annually report the average monthly premium paid by employees and employers
- Plans, including NYSHIP, must report 2023 premium to the federal government by mid-2024
- As has been done in past years, agency HBAs will be required to submit employee and employer premium information for their agencies using the dedicated NYBEAS page

Mandatory Federal Premium Reporting

- Please monitor HBA Online for an official announcement
- We plan to release an HBA memo in early 2024 with deadlines and instructions for submitting your premium information
- Premium information will likely be due In March 2024
- **This is a mandatory federal requirement**

Optional Dual Family Prohibition

- New York State prohibits dual family coverage for its employees through
 - Employees may not be enrolled in family coverage and as a dependent on another enrollee's NYSHIP policy
- This provision is included in the State's collective bargaining agreements with its public employee unions
- Participating Agencies may similarly prohibit their employees from being enrolled in dual family coverage to lower their overall health insurance costs

Optional Buyout Programs

- New York State offers a health insurance buyout program to its employees
 - Employees can receive \$1,000 for opting out of individual coverage
 - Employees can receive \$3,000 for opting out of family coverage
- Participating Agencies may implement similar programs to lower their overall health insurance costs
- [Policy Memo 122r1](#) outlines the Department's policy on buyout programs for health insurance coverage

When to Contact PELU

- Questions about NYSHIP policies
- Changes in NYSHIP benefits such as contribution rate changes, changes in service time requirements, or newly offering benefits to a class or category of employee/retiree
- Contact us at least 60 days in advance of the effective date of the 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

- What's New for January 1, 2024
- Benefit Updates and Reminders

Empire Plan Benefit Changes

What's New for January 1, 2024

Expansion of Site of Care Program for Infusions:

- This program will be expanded to include all drug infusion therapies except those used to treat cancer or hemophilia.
- Empire Plan primary members impacted by this change will receive a letter and assistance in coordinating the transition.
- There will be **no** copayments for the infusion when an alternate setting is used, which may include a freestanding infusion suite, a doctor's office, or your home.
- This list of therapies included for this program can be found at:
<https://www.empireblue.com/nys/resources-forms>

Empire Plan Benefit Changes

What's New for January 1, 2024

Empire BlueCross Becoming Anthem Blue Cross:

- Empire BlueCross, the administrator of The Empire Plan Hospital Program, will be changing its name to Anthem Blue Cross.
- This transition will not impact coverage or network access.
- For the latest information about this change and for information about Empire Plan hospital benefits, go to: www.empireblue.com/nys
 - Using this link, plan members can set up an account to review benefits, view claims, submit inquiries and access LiveHealth Online.

Empire Plan Benefit Changes

What's New for January 1, 2024

Assignment of Benefits for Medical/Surgical Providers:

- Enrollees who obtain services from out-of-network providers may opt to have The Empire Plan pay covered expenses to providers directly.
- To choose this option, sign the “Assignment of Benefits” field to authorize payment to your provider when submitting your claim to UnitedHealthcare or when completing forms required by your provider.
- As a reminder, out-of-pocket costs will be much higher when using an out-of-network provider.

Empire Plan Benefit Changes

Benefit Updates and Reminders

Preventive Care – RSV (Respiratory Syncytial Virus):

- For adults ages 60 and older, the RSV vaccine is covered at no cost when provided by a vaccination network pharmacy or participating medical provider.
- For infants/children ages 0 through 19 months, RSV monoclonal antibodies are covered at no cost when administered by a participating medical provider. Please note this treatment is not available at retail pharmacies.
- For women between 32 to 36 weeks of pregnancy, the RSV vaccine is covered at no cost when administered by a participating medical provider. Per state regulation, vaccines for this group are not available at retail pharmacies.

Empire Plan Benefit Changes

Benefit Updates and Reminders

Preventive Care – COVID-19 and Influenza Vaccines:

- The flu vaccine and all COVID-19 vaccines and boosters are covered at no cost when provided by a vaccination network pharmacy or participating medical provider.
- The CDC (Centers for Disease Control) recommends the COVID-19 primary series vaccine for everyone age six months and older, and the COVID-19 boosters for individuals age five years or older.

Empire Plan Benefit Changes

Benefit Updates and Reminders

No Copayment for In-Network Opioid Treatments:

- Empire Plan members have no copayment when receiving services from a network MHSU (Mental Health and Substance Use) provider for opioid treatment that includes the prescribing of agonists, including methadone, Suboxone and buprenorphine. However, prescriptions obtained at a retail pharmacy are still subject to the applicable copayment.
- Also, there are no copayments for therapy and counseling sessions related to the same opioid treatment provided by a network MHSU provider.

Empire Plan Benefit Changes

Benefit Updates and Reminders

UnitedHealthcare App:

- Empire Plan members can use the UnitedHealthcare (UHC) app to:
 - Find participating providers, view medical claims, and check deductibles.
 - Choose paperless communications.
- Just scan the QR code to get registered.



Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

- **The Empire Plan NurseLineSM** is available 24/7. Registered nurses can answer health-related questions and assist in finding a network provider.
- **The Clinical Referral Line** for the Mental Health and Substance Use Disorder Program is available 24/7. Licensed clinicians can help find a provider and schedule an appointment if necessary.
- **CVS Caremark** representatives are available 24/7 to answer questions about prescription drug benefits and assist in finding a network pharmacy.
- **1-877-7-NYSHIP (1-877-769-7447)** is the number to call for the above services; this number is found on the back of the Empire Plan benefit ID card.

Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

LiveHealth Online is a telehealth benefit that provides access to a board-certified doctor, psychiatrist, psychologist, and licensed therapist by telephone or a video visit on your smartphone, tablet or personal computer.

- \$0 copayment – service is at no cost to Empire Plan members.
- To register or to schedule a visit, go to www.empireblue.com/nys or call 1-888-LiveHealth (1-888-548-3432).
- Representatives are available 24/7.

Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

Talkspace provides online access to therapy with a licensed clinician.

- Members can text providers and set up video or telephone calls.
- Therapy is subject to a copay, similar to an in-person visit.
- To get started, you can go to <https://www.talkspace.com/empireplan>

Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

Empire Plan Center of Excellence Programs - Overview:

- Nationwide access to care from providers who are recognized as leaders.
- All Center of Excellence (COE) programs include paid-in-full benefits for services provided at the COE.
- All COE programs include a travel, lodging and meal expenses benefit for travel within the United States.
- Plan members must call and register for the applicable COE Program to access benefits.

Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

Empire Plan Center of Excellence Listing of Programs:

- **Cancer Services** – Medical/Surgical Program (UnitedHealthcare)
- **Transplants** – Hospital Program (Empire BlueCross)
- **Substance Use Disorder** – MHSU Program (Carelon)
- **Infertility Benefits** – Medical/Surgical Program (UnitedHealthcare)

Empire Plan Benefit Changes

Benefit Updates and Reminders

Empire Plan Member Resources:

Empire Plan Center of Excellence Programs - More Information:

- Use the link below to access a publication about Empire Plan COE benefits, including a list of COE locations:

<https://www.cs.ny.gov/employee-benefits/nyship/shared/publications/reporting-on/2023/reporting-on-centers-of-excellence-2023.pdf>



NYSHIP
New York State
Health Insurance Program



Questions?



NYSHIP
New York State
Health Insurance Program

Financial Update

Presenter - Katelyn Wilder
Acting Director
Office of Financial Administration

New York State Department of Civil Service
Employee Benefits Division

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

2024 Rate Renewal

- Empire Plan Net Premium increase: 12.0%
- Empire Plan Program Trends:
 - Hospital Program: 7.6%
 - Medical Program: 7.3%
 - Prescription Drug Program: 10.9%
 - Mental Health & Substance Use Program: 10.8%
- Rates Include 0% margin
- No Dividend Application



2024 Participating Agencies Monthly Net Rates

Empire PlanPrime

- Individual \$1,445.66
- Family \$3,367.09

Empire Mediprime

- Individual \$548.95
- Family-1 \$1,654.92
- Family-2 \$1,498.01

Excelsior PlanPrime

- Individual \$1,344.47
- Family \$3,131.42

Excelsior Mediprime

- Individual \$510.54
- Family-1 \$1,539.11
- Family-2 \$1,393.20



NYSHIP
New York State
Health Insurance Program



Questions?

Final Questions and Answers



End of Meeting

