



NY25-12
PE25-09

MEMORANDUM

TO: Health Benefits Administrators of New York State Agencies and Participating Employers
FROM: Employee Benefits Division
SUBJECT: Notification Preferences Added to *NYSHIP Health Insurance Transaction Form* for NY/PE (PS-404)
DATE: June 17, 2025

The Employee Benefits Division (EBD) has added a Notification Preferences section to the PS-404 form, *NYSHIP Health Insurance Transaction Form for NYS & PE Employees*. This new section allows enrollees to change how they receive NYSHIP publications. Enrollees may choose one of the following options:

- “I would like to receive publications by email only”
- “I would like to receive publications by email and mail”

If an enrollee does not select an option, they continue to receive publications by mail only.

15 NOTIFICATION PREFERENCES

To change how you receive NYSHIP publications, select one option below. If no option is selected, you will continue to receive mail only. A valid personal email is required for email delivery. Some communications must be sent by mail.

☐ I would like to receive publications by email only.

☐ I would like to receive publications by email and mail.

Effective immediately, please discontinue use of all prior versions of the PS-404 form. The updated version is attached to this memo and is also posted in the [Publications & Forms](#) section of HBA Online.

A new supplement to the PS-404 form is also available: PS-404S, *NYSHIP Health Insurance Transaction Form Additional Dependent Information Supplement*. It allows enrollees to add or update more dependents than the PS-404 form can accommodate. This supplement is attached to this memo and is also posted in the [Publications & Forms](#) section of HBA Online.

Processing the Digital Correspondence election in NYBEAS

Enrollees may choose one of the following options:

- “I would like to receive publications by email only”
 - opts into receiving digital NYSHIP publications by email, and
 - opts out of receiving printed NYSHIP publications by mail



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- “I would like to receive publications by email and mail”
 - opts into receiving digital NYSHIP publications by email

If the enrollee checks one of these boxes, enter their election in NYBEAS.

To enter the election in NYBEAS: Go to Benefits > Transactions > Digital Correspondence Elect.

Menu
Search: []
My Favorites
Benefits
History
Plan History
Transactions
Billing
COBRA
MyNYSHIP
NYBEAS Processes
NYBEAS Reports
NYSTEP Review
Income Protection Plan(IPP)
Data Corrections
Paid Family Leave
Workforce Administration
System Announcement
Organizational Development
Workforce Monitoring
Set Up HRMS
Worklist
Reporting Tools

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
Enrollee Supplemental E-Box
DP Enrollee Billing Number
ERS Retirement Data
ERS Addresses
Medicare Elig 65 Letters
Letter Notification
Life Insurance Premium
Medicare PartA / PartB Letter
Med Advantage HMO

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 that change an enrollee's coverage.
Benefit Plan Change
Benefit Program Change
Billing Option Change
Cancel Enrollment
Change Coverage
Comments
Contribution Rate Change
Corrections Requests
Dependent Add
Dependent/Beneficiary
Dependent Delete
Empire Card Request/History
Enroll/Waive Benefits
Federal Qualification Change
Donate Life Registry Elect
Digital Correspondence Elect

Enter the enrollee's Employee ID or their first and last name.

Digital Correspondence Elect

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

Find an Existing Value

EmplID: [begins with ▼] []

Empl Rcd Nbr: [= ▼] []

Last Name: [begins with ▼] []

First Name: [begins with ▼] []

Department: [begins with ▼] []

☐ Case Sensitive

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

OR



Before selecting the election, make sure:

- An Email Type is selected
- The Email Address is filled in and is their personal email address (double-check the spelling)
- The “Preferred” box is checked

Digital Correspondence Elect

Employee Information
SAMPLE,ENROLLEE EmplID: Empl Rcd #: 0

Election Confirmation
☐ This employee has elected to receive digital publications. User ID: OPCORUPD
☐ This employee has elected to opt-out of print publication Last Updated Date: 05/16/2025

Email Addresses Customize | Find | First 1 of 1 Last

*Email Type	*Email Address	Preferred
Home		☐

Business
Home
Other
Personal
School
Work

Save Return to Search

Check the box labeled “This employee has elected to receive digital publications.” If the enrollee also wants to stop receiving printed copies, check the second box. After checking the first box, a reminder message to check the second box will pop up. By only checking the first box, the enrollee will receive both email and printed publications.

An enrollee cannot be opted out of print without also being opted into digital publications.

hrdev.cs.state.ny.us says

By selecting only this box, the enrollee will receive digital publications. (24000,931) Check both boxes for the enrollee to no longer receive printed copies.

OK

Digital Correspondence Elect

Employee Information
SAMPLE,ENROLLEE EmplID: Empl Rcd #: 0

Election Confirmation
☒ This employee has elected to receive digital publications. User ID: OPEBDSUP
☐ This employee has elected to opt-out of print publication Last Updated Date: 05/19/2025

Email Addresses Customize | Find | First 1 of 1 Last

*Email Type	*Email Address	Preferred
Home	Enrollee.sample@email.com	☒

Save Return to Search

Select **Save** and the election will be entered successfully.



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If an enrollee states that they didn't receive a publication in the mail, verify whether they opted out of printed publications. Go to the Personal / Employment page and open the Address / Phone tab.

Below the email address section, look for the line: "To opt into/review digital communications, click here." Click the "click here" link to open the Digital Correspondence Elect screen. The screen displays whether the enrollee has elected to stop receiving print publications. The enrollee's option can also be changed on that screen.

Name / Id	Address/Phone	Personal Details
Employment Information		
SAMPLE, ENROLLEE		EmplID:
Medical Benefit Plan		
Benefit Plan	001	Description Empire Plan
Plan Type	10	Termination Date
Current Addresses Customize Find View All Last		
<u>Address Type</u>	<u>As Of Date</u>	<u>Status</u> <u>Address</u> View Address Detail
Home	01/01/2021	A 123 MAIN ST ALBANY, NY 12239 ALBANY View Address Detail +
Phone Information Customize Find First 1 of 1 Last		
<u>*Phone Type</u>	<u>Telephone</u>	
	+ -	
Email Addresses Customize Find First 1 of 1 Last		
<u>*Email Type</u>	<u>*Email Address</u>	<u>Preferred</u>
Home	Enrollee.sample@email.com	☒ + -
To opt into/review digital communications, click here		
Save	Return to Search	Previous tab Next tab Include History
Name / Id Address/Phone Personal Details		

If you have questions about the NYSHIP email project, please email communications@cs.ny.gov. If you have questions about this memo, please call the HBA Helpline at 518-474-2780.

Attachments:

PS-404 NYSHIP Health Insurance Transaction Form for NYS & PE Employees
PS-404S NYSHIP Health Insurance Transaction Form Additional Dependent Information Supplement