

2011 Rates & Information for Retirees of Participating Employers

For Retirees, Vestees, Dependent Survivors, and Enrollees Covered Under Preferred List Provisions of Participating Employers and their Enrolled Dependents

Choose Your Health Insurance Plan

You may change your New York State Health Insurance Program (NYSHIP) health insurance option for any reason at any time once during the year. You may change from a NYSHIP HMO to The Empire Plan, or from The Empire Plan to an HMO or from one HMO to another HMO in your area. Consider your options carefully. You are choosing a benefit package for yourself and your dependent(s) for a 12-month period.

You may change options more than once in a 12-month period only: if you are enrolled in an HMO and you or one of your enrolled dependents (other than a student attending college) move permanently out of your HMO's service area; or you move to a new permanent address* and your new home area is served by a NYSHIP-approved HMO that did not serve your previous home area; or you add a newly eligible dependent to your coverage.

No action is required if you wish to keep your current health insurance option and still qualify for that plan.

*As a general rule, the Centers for Medicare & Medicaid Services (CMS) states that, except under certain circumstances, if an enrollee's temporary residence is out of the HMO's Medicare Advantage Plan service area for more than six consecutive months, the enrollee will be disenrolled from that HMO Medicare Advantage Plan.

Choices Explains Your Current Plan and Other Available Plans

If you are considering changing your health insurance plan or wish to review your current plan, refer to the *Choices for 2011* booklet that was mailed to your home this fall (also available from the Employee Benefits Division). You can also visit our web site at <https://www.cs.state.ny.us> for this information or to use our online NYSHIP Plan Comparison tool to generate a side-by-side comparison of the benefits provided by each of the NYSHIP plans in your area. From the Department home page click on Benefit Programs then NYSHIP Online. Select your group if prompted, and then choose Health Benefits & Option Transfer. Click on Rates and Health Plan Choices for the most up-to-date option transfer information or to find the easy-to-use NYSHIP Plan Comparison tool.

If there are any copayment or benefit changes for 2011, your current plan will notify you directly. Read your *Empire Plan Report* or recent HMO notices for changes that may affect you.

If you have questions about The Empire Plan, call toll free at 1-877-7-NYSHIP (1-877-769-7447). Select the Medical/Surgical Program and then the appropriate prompt for assistance with option transfer benefit questions. If you have questions about NYSHIP-approved HMOs, call the HMOs directly. (See the rate listing inside or the *Choices* booklet for telephone numbers.) Be sure you understand how your benefits will



New York State Health Insurance Program 2011 Rates

Check your plan – this is your only notice of a rate change.

Code	Plan and Service Area
001	The Empire Plan (available to enrollees and their eligible dependents worldwide) 1-877-7-NYSHIP (1-877-769-7447) Medical/Surgical Program: UnitedHealthcare, PO Box 1600, Kingston, NY 12402-1600 (TTY: 1-888-697-9054) Hospital Program: Empire BlueCross BlueShield, NYS Service Center, PO Box 1407, Church Street Station, New York, NY 10013-1407 (TTY: 1-888-697-9054) Mental Health/Substance Abuse Program: UnitedHealthcare/OptumHealth, PO Box 5190, Kingston, NY 12402-5190 (TTY: 1-888-697-9054) Prescription Drug Program: UnitedHealthcare/Medco Health Solutions, PO Box 5900, Kingston, NY 12402-5900 (TTY: 1-888-697-9054)
210	Aetna* 99 Park Ave., New York, NY 10016 1-800-323-9930 Medicare Advantage Customer Service 1-800-282-5366 (TTY: 1-888-697-9054) www.aetna.com Serving Bronx, Kings, Nassau, New York, Orange, Putnam, Queens, Richmond, Rockland, Suffolk, Sullivan and Westchester counties
066	Blue Choice* 165 Court St., Rochester, NY 14647 585-454-4810 or 1-800-462-0108 (TTY: 1-877-398-2282); Medicare Advantage Serving Livingston, Monroe, Ontario, Seneca, Wayne and Yates counties
063	Capital District Physicians' Health Plan (CDPHP) (Capital)* Patroon Creek Corporate Center, 500 Patroon Creek Blvd., Albany, NY 12211-0800 1-888-248-6522 (TTY: 1-877-261-1164) www.cdphp.com Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
300	Capital District Physicians' Health Plan (CDPHP) (Central)* Patroon Creek Corporate Center, 500 Patroon Creek Blvd., Albany, NY 12211-0800 1-888-248-6522 (TTY: 1-877-261-1164) www.cdphp.com Serving Broome, Chenango, Delaware, Essex, Hamilton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)* Patroon Creek Corporate Center, 500 Patroon Creek Blvd., Albany, NY 12211-0800 1-888-248-6522 (TTY: 1-877-261-1164) www.cdphp.com Serving Dutchess, Orange and Ulster counties
067	Community Blue* PO Box 80, Buffalo, NY 14240 716-887-8840 or 1-877-576-6440 (TTY: 1-888-249-2583) Senior Blue Cross of New York www.bcbswny.com Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
280	Empire BlueCross BlueShield HMO (Upstate) 11 Corporate Woods Blvd., PO Box 11800, Albany, NY 12211-0800 1-888-697-9054 Serving Albany, Clinton, Columbia, Delaware, Essex, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
290	Empire BlueCross BlueShield HMO (Downstate) 11 Corporate Woods Blvd., PO Box 11800, Albany, NY 12211-0800 1-888-697-9054 Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk and Westchester counties
320	Empire BlueCross BlueShield HMO (Mid-Hudson) 11 Corporate Woods Blvd., PO Box 11800, Albany, NY 12211-0800 1-888-697-9054 Serving Dutchess, Orange, Putnam, Sullivan and Ulster counties
220	GHI HMO 789 Grant Ave., Lake Katrine, NY 12449 or PO Box 4181, Kingston, NY 12401 1-877-244-4466 (TTY: 1-877-244-4466) Serving Albany, Columbia, Delaware, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
350	GHI HMO 789 Grant Ave., Lake Katrine, NY 12449 or PO Box 4181, Kingston, NY 12401 1-877-244-4466 (TTY: 1-877-244-4466) Serving Albany, Columbia, Delaware, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
050	HIP Health Plan of New York* 55 Water St., New York, NY 10041 1-877-861-0175 (TTY: 1-888-447-4833) hipusa.com®
072	HMOBlue Excellus BlueCross BlueShield (Central New York Region) 333 Butternut Dr., Syracuse, NY 13214 1-800-447-4833 Serving Broome, Cayuga, Chemung, Cortland, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
160	HMOBlue Excellus BlueCross BlueShield (Utica Region) 12 Rhoads Dr., Utica, NY 13502 1-800-722-7884 (TTY: 1-877-244-4466) Serving Chenango, Clinton, Delaware, Essex, Franklin, Fulton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
059	Independent Health* 511 Farber Lakes Dr., Buffalo, NY 14221 1-800-501-3439 (TTY: 716-631-3108) www.independenthealth.com
058	MVP Health Care* (Rochester) PO Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) Serving Genesee, Livingston, Monroe, Ontario, Orleans, Seneca, Steuben, Wayne, Wyoming and Yates counties
060	MVP Health Care* (East) PO Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) Serving Albany, Columbia, Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties
330	MVP Health Care* (Central) PO Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) Serving Broome, Cayuga, Chenango, Cortland, Delaware, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
340	MVP Health Care* (Mid-Hudson) PO Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) Serving Dutchess, Orange, Putnam, Rockland, Sullivan and Ulster counties
360	MVP Health Care (North) PO Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) Serving Dutchess, Orange, Putnam, Rockland, Sullivan and Ulster counties

Please read this rate sheet carefully to find the rate that applies to you.
 There are different rates for different groups as a result of legislation and
 administrative agreements.

		Monthly Rate (See page 6 for more)	
		A	
		Ind	Fam
https://www.cs.state.ny.us		0.00	186.75
1-800-241-6894 (TTY: 1-800-241-6894) 1-800-855-2881 1-800-759-1089			
1-800-654-5984		171.76	934.65
Putnam and Westchester counties in New York State, and all counties in New Jersey			
Blue Choice 1-877-883-9577 (TTY: 1-800-421-1220) www.excellusbcb.com		0.00	156.46
Creech Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 Medicare-primary 518-641-3950 Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties		4.65	217.97
Creech Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 Medicare-primary 518-641-3950 Franklin, Hamilton, Herkimer, Madison, Oneida, Otsego and Tioga counties		84.97	420.05
Creech Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 Medicare-primary or 518-641-3950		106.05	472.21
Empire Blue HMO Medicare Advantage Plan PO Box 62, Buffalo, NY 14240 1-800-329-2792 (TTY: 1-877-834-6918) Schoharie, Warren and Washington counties		0.00	317.39
1-800-453-0113 (TTY: 1-800-241-6894) www.empireblue.com Schoharie, Warren and Washington counties		115.71	573.30
1-800-453-0113 (TTY: 1-800-241-6894) www.empireblue.com		219.21	843.96
1-800-453-0113 (TTY: 1-800-241-6894) www.empireblue.com		220.96	848.70
1-800-7920 www.ghi.com		174.49	753.75
1-800-7920 www.ghi.com Serving Dutchess, Orange, Putnam, Rockland, Sullivan and Ulster counties		236.34	921.77
1-800-7920 www.ghi.com Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk and Westchester counties		53.38	325.53
1-800-447-6269 (TTY: 1-877-398-2275) www.excellusbcb.com		128.99	517.93
1-800-447-398-2275) www.excellusbcb.com Franklin, Hamilton, Herkimer, Madison, Otsego and St. Lawrence counties		92.60	481.81
1-800-447-398-2275) www.excellusbcb.com Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties		0.00	192.08
1-800-662-6277 (TTY: 1-800-662-1220) Medicare-eligible 1-800-209-3945 www.joinmvp.com		0.00	163.06
1-800-662-6277 (TTY: 1-800-662-1220) www.joinmvp.com Franklin and Washington counties		0.00	171.56
1-800-662-6277 (TTY: 1-800-662-1220) www.joinmvp.com Franklin, Hamilton, Herkimer, Madison, Otsego, Tioga and Tompkins counties		27.63	272.14
1-800-662-6277 (TTY: 1-800-662-1220) www.joinmvp.com		19.03	249.37
1-800-662-6277 (TTY: 1-800-662-1220) www.joinmvp.com Serving Franklin and St. Lawrence counties		107.43	474.31

Notes: Rates for retirees do not reflect sick leave credits.
(For more information on how sick leave credit impacts your premium.)

B		C		D	
Ind	Fam	Ind	Fam	Ind	Fam
56.18	242.93	186.75	186.75	561.83	1308.84
225.59	988.48	331.55	331.55	710.09	2036.28
43.93	200.39	156.46	156.46	439.32	1065.16
55.54	268.86	192.54	192.54	513.51	1283.69
136.20	471.28	223.96	223.96	597.29	1493.13
157.17	523.33	231.41	231.41	617.27	1542.90
52.78	371.15	235.97	235.97	527.83	1471.70
170.58	628.17	267.45	267.45	664.38	1734.18
274.13	898.88	309.39	309.39	768.39	2005.97
275.94	903.68	310.31	310.31	770.70	2011.94
230.99	810.25	301.29	301.29	739.51	1944.69
292.84	978.27	327.84	327.84	801.35	2112.70
106.99	379.14	213.70	213.70	589.45	1444.27
180.86	569.80	236.72	236.72	647.68	1594.56
142.67	531.88	234.05	234.05	593.28	1529.47
50.98	243.06	192.08	192.08	509.84	1278.18
43.47	206.53	163.06	163.06	434.70	1086.95
45.76	217.32	171.56	171.56	457.63	1143.86
77.58	322.09	197.71	197.71	527.10	1317.94
68.63	298.97	193.17	193.17	514.97	1287.67
158.27	525.15	231.00	231.00	615.83	1539.83

Enrollee contributions for Retirees, Vestees, Dependent Survivors and enrollees covered under Preferred List provisions. The premium contributions of retirees and some dependent survivors of the Thruway Authority are included on this rate sheet. Retirees of other Participating Employers: Contact your former employer for 2011 rates. Dependent survivors of other Participating Employers: Contact the former employer of the enrollee for 2011 rates. COBRA and Young Adult Option enrollees will be notified of their rates separately.

To enroll in an HMO or to remain enrolled in your current HMO, you must live or work[†] in the HMO's NYSHIP service area.

- A** Retirement Prior to 1/1/83 and all retirees of Thruway Authority
Retirees of other Participating Employers: Contact your former employer for 2011 rates.
- B** Retirement on or after 1/1/83 and certain Dependent Survivors;
Eligible survivors of active employees who died on or after April 1, 1979 or of retirees who retired on or after April 1, 1979; DC-37 Retirees; Enrollees covered under Preferred List provisions
- C** Amended Dependent Survivors;
Eligible survivors of active employees who died between April 1, 1975 and March 31, 1979; Some dependent survivors of Thruway Authority
- D** Vestees, Long Term Disability Enrollees and all other Dependent Survivors

* Medicare-primary enrollees will be enrolled in this plan's Medicare Advantage Plan.

[†] If Medicare-primary, check with the plan.

1. Medicare Part B Premium and Your Credit (Reimbursement)

The State will reimburse you and your enrolled dependents for the standard Part B premium when Medicare becomes primary to NYSHIP, unless you or your dependent receives reimbursement from another source or are NYSHIP-primary for claims purposes. The standard Medicare Part B premium varies somewhat depending on your individual circumstances, such as when you first became Medicare-eligible.

2. Insurance Premium Deduction

Your share of the NYSHIP premium, less any sick leave credit, is shown as a deduction in this box.

Your retirement check of December 31, 2010, should reflect the 2011 rates.

IF YOU ARE CHANGING YOUR HEALTH INSURANCE PLAN: The correct deduction for your new health insurance plan plus or minus any retroactive adjustment needed will be reflected in your pension check. The date of the adjustment will depend on when your health insurance plan change is received and processed.

be affected if you change plans. Changing plans may result in substantially different coverage.

To Contact the Employee Benefits Division

You may call the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands). Please call Monday through Friday between 9 a.m. and 3 p.m. Eastern time to speak to a representative, or any time to use our automated telephone system.

Your Retirement Check and "Notice of Change" Document

Your deductions will change to reflect the 2011 health insurance rates of your 2011 health insurance plan.

If you receive your pension by direct deposit, your retirement system will notify you of any deduction changes. The sample check stub and "Notice of Change" document (for the direct deposit enrollee) shown to the left are from the New York State and Local Employees' Retirement System. *Note: If you receive your pension from another retirement program, your check stub and "Notice of Change" document will be different.*

Enrollees Who Pay the Employee Benefits Division Directly

The 2011 rate for your current health insurance plan will be reflected in your December bill for your January coverage. If you are changing options, the date of the bill when you see your premium change will depend on when your health insurance plan change is received and processed.

Retirees, Vestees, and Enrollees covered under Preferred List Provisions

Check with your former agency for information about Medicare premium reimbursement.

Keep Your Health Insurance Up to Date

You must write to the Employee Benefits Division at the New York State Department of Civil Service, Alfred E. Smith State Office Building, Albany, New York 12239, when changes in your family or marital status affect your coverage or if your address changes. Be sure to sign your letter and include your Social Security number, telephone number and address in your letter. Act promptly. Deadlines may apply. See your *NYSHIP General Information Book* for details.

NOTICE OF CHANGE IN NET RETIREMENT SYSTEMS BENEFIT PAID FOR MONTH ENDING September 30, 2010.

Registration #: YTD Federal Tax Withheld:
Retirement \$:

The credits and deductions which make up your net retirement benefits are shown below for the last month and this month. Items which will change this month are indicated by an "X".

Benefits	Last Month	This Month
Normal Allowance		
Cost of Living		
Supplemental Allowance	00.00	00.00
Benefit Adjustments	00.00	00.00
Gross Benefit		

NEW YORK STATE & LOCAL RETIREMENT SYSTEM

Name: Check #: **1**
Retirement #: Date: May 31, 2010
Registration #:

	NORMAL ALLOWANCE	C.O.L.A./ SUPPLEMENTAL	MEDICARE CREDIT		GROSS TOTAL
Health					
Net Re					
This d					
the au					
already					
I hope					
booklet					
805-03					

IN THE EVENT OF THE DEATH OF THE PAYEE, THIS CHECK IS VOID AND MUST BE RETURNED TO THE PAYER.

If you have any questions, need to order forms and booklets, or to change your mailing address, contact our Call Center toll-free at (866) 805-0990, or (518) 474-7736 in the Albany, New York area.

You may also call this number to request an Electronic Fund Transfer (EFT) enrollment form. With EFT, funds are deposited directly into your account, replacing the traditional "check in the mail." EFT is the most reliable, easiest and safest way to get your monthly pension payment with no hassles.

DETACH HERE BEFORE CASHING

State of New York
Department of Civil Service
Employee Benefits Division
P.O. Box 1068
Schenectady, New York 12301-1068
<https://www.cs.state.ny.us>



Important Health Insurance Information
for the Enrollee, Enrolled Spouse/Domestic Partner
and Other Enrolled Dependents

Address Service Requested

2011 Rates for PE Retirees – November 2010

**Your Only Notice of
Health Insurance
Rate Changes for 2011**

**Please do not send mail or
correspondence to the return
address listed above. See
page 1 for address.**

It is the policy of the State of New York Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on the Department of Civil Service web site (<https://www.cs.state.ny.us>). Click on Benefit Programs then NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. COBRA Enrollees: Contact the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

 PE Retiree Rates & Information was printed on paper containing recycled fiber using environmentally sensitive inks.  AL1045 2011 PE Retiree Rates & Information

Employee Benefits Division Web Site

Visit our web site at <https://www.cs.state.ny.us> to find the latest benefit information. You may also view your enrollment record, change your address, order Empire Plan Benefit Cards, compare benefit plans and submit option transfer requests online using MyNYSHIP, a secure portion of the Employee Benefits Division's web site, NYSHIP Online. Go to <https://www.cs.state.ny.us>. Click on Retirees, then Health Benefits and follow the prompts to MyNYSHIP - Enrollee Self Service. Or, you can go directly to <https://www.cs.state.ny.us/mynyship>. See the *Choices for 2011* booklet for details.

Lifetime Sick Leave Credit

When you retired, you may have been entitled to convert your unused sick leave into a lifetime monthly credit that reduces your cost for health insurance for as long as you remain enrolled in NYSHIP. Your monthly credit remains the same throughout your lifetime. However, the balance you pay for your health insurance premium is likely to change each year. When the premium rises, the balance you must pay may also rise. To calculate the balance you will pay in calendar year 2011, subtract your monthly sick leave credit from the new monthly premium.