

For Retirees, Vestees, Dependent Survivors,
and Enrollees Covered Under Preferred List
Provisions of New York State Government
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.



New York State Department of Civil Service
Employee Benefits Division
Albany, New York 12239
<https://www.cs.ny.gov>

If your modified adjusted gross income for 2011 was below \$85,000 (if you filed an individual return) or \$170,000 (if you filed a joint return), the following information does NOT apply to you.

Medicare’s Income-Related Monthly Adjustment Amount (IRMAA)

The information below applies only if you are subject to Medicare’s Income-Related Monthly Adjustment Amount (IRMAA) based on the income levels listed below.

If you are Medicare-primary, enrolled in a NYSHIP option that includes Medicare Part D prescription drug coverage and your income is above a certain limit, Medicare requires you to pay an IRMAA to Social Security in addition to your NYSHIP premium for your prescription drug coverage. The chart below shows estimated Medicare Part D prescription drug plan IRMAA cost, based on income. If you are subject to IRMAA, what you pay may be higher or lower.

2013 Estimated Part D IRMAA Chart		
If your 2011 Modified Adjusted Gross Income was:		You pay:
Individual Tax Return	Joint Tax Return	
\$85,000 or below	\$170,000 or below	Your Plan Premium
\$85,001 - \$107,000	\$170,001 - \$214,000	\$11.60 + Your Plan Premium
\$107,001 - \$160,000	\$214,001 - \$320,000	\$29.90 + Your Plan Premium
\$160,001 - \$214,000	\$320,001 - \$428,000	\$48.30 + Your Plan Premium
above \$214,000	above \$428,000	\$66.60 + Your Plan Premium

To Contact the Employee Benefits Division

You may call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands). Please call Monday through Friday between 9 a.m. and 4 p.m. Eastern time to speak to a representative.

Keep Your Health Insurance Up to Date

You must write to the Employee Benefits Division at the New York State Department of Civil Service, 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.

Employee Benefits Division Web Site

Visit our web site at <https://www.cs.ny.gov> 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.ny.gov>. Click on Retirees, then Health Benefits and follow the prompts to MyNYSHIP - Enrollee Self Service. Or, you can go directly to <https://www.cs.ny.gov/mynship>. See the *Choices for 2013* booklet for details.

Enrollees Who Pay the Employee Benefits Division Directly

The 2013 rate for your current health insurance plan will be reflected in your December bill for your January coverage. If you are changing

Continued on page 8

New York State Health Insurance Program 2013 Rates

Check your plan -

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.

Enrollee contributions for Retirees, Vestees, Dependent Survivors and enrollees covered under Preferred List provisions.

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.

COBRA and Young Adult Option enrollees will be notified of their rates separately.

Code	Plan	Individual	Family	In
001	The Empire Plan	0.00	215.27	
210	Aetna*	178.45	960.04	
066	Blue Choice*	0.00	168.70	
067	BlueCross BlueShield of Western New York*	3.59	271.10	
063	Capital District Physicians' Health Plan (CDPHP) (Capital)*	0.00	202.52	
300	Capital District Physicians' Health Plan (CDPHP) (Central)*	65.36	349.11	
310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)*	55.17	320.76	
280	Empire BlueCross BlueShield HMO (Upstate)*	57.84	370.10	
290	Empire BlueCross BlueShield HMO (Downstate)*	218.21	790.94	
320	Empire BlueCross BlueShield HMO (Mid-Hudson)*	221.03	798.80	
220	GHI HMO (Capital)	27.64	332.67	
350	GHI HMO (Hudson Valley)	54.29	382.27	
050	HIP Health Plan of New York*	86.48	380.81	
072	HMOBlue (Central New York Region)	179.00	626.38	
160	HMOBlue (Utica Region)	196.92	742.22	
059	Independent Health*	8.50	218.99	
058	MVP Health Care* (Rochester)	0.00	182.33	
060	MVP Health Care* (East)	0.00	199.26	
330	MVP Health Care* (Central)	47.49	297.01	
340	MVP Health Care* (Mid-Hudson)	46.76	293.36	
360	MVP Health Care (North)	145.46	549.06	

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

† If Medicare-primary, check with the plan.

- this is your only notice of a rate change.

**Monthly Rates: Rates for retirees do not reflect sick leave credits.
(See page 8 for more information on how sick leave credit impacts your premium.)**

Retirement on or after 1/1/83 includes retirement on or after 1/1/12 from a title allocated or equated to Salary Grade 9 or below)		Retirement on or after 1/1/12 from a title allocated or equated to Salary Grade 10 or above		Eligible survivors of active employees who died on or after April 1, 1979 or of retirees who retired on or after April 1, 1979; Enrollees covered under Preferred List provisions		Amended Dependent Survivors; Eligible survivors of active employees who died between April 1, 1975 and March 31, 1979		Vestees, Long Term Disability Enrollees and all other Dependent Survivors	
Individual	Family	Individual	Family	Individual	Family	Individual	Family	Individual	Family
73.15	305.64	97.53	364.47	60.96	276.23	215.27	215.27	609.56	1470.65
254.00	1053.73	279.18	1115.19	241.41	1023.00	365.45	365.45	808.02	2269.84
55.15	237.35	73.54	282.73	45.96	214.66	168.70	168.70	459.61	1134.41
74.53	360.40	98.17	420.75	62.70	330.21	238.94	238.94	594.73	1550.49
66.83	285.55	89.11	340.23	55.69	258.21	202.52	202.52	556.95	1367.03
134.68	435.90	157.78	493.94	123.12	406.87	234.71	234.71	642.99	1581.83
123.55	406.38	146.35	463.65	112.16	377.75	227.98	227.98	625.03	1536.94
121.45	449.88	142.65	503.42	110.85	423.11	229.64	229.64	587.90	1506.46
282.33	871.37	303.70	925.35	271.64	844.37	296.04	296.04	752.54	1936.70
285.31	879.43	306.74	933.56	274.60	852.37	297.71	297.71	756.71	1947.56
98.81	421.89	122.53	481.73	86.95	391.98	245.54	245.54	620.69	1602.84
124.65	470.48	148.10	529.63	112.92	440.90	249.32	249.32	640.60	1637.87
157.98	470.20	181.81	529.80	146.06	440.39	241.26	241.26	682.30	1647.35
250.64	715.76	274.52	775.12	238.70	686.08	278.14	278.14	775.99	1888.54
267.34	830.36	290.81	889.27	255.60	800.90	302.45	302.45	783.75	1993.55
79.47	308.50	103.13	367.53	67.64	278.98	218.99	218.99	599.90	1475.86
60.40	257.32	80.53	306.63	50.33	232.66	182.33	182.33	503.32	1232.66
65.77	280.98	87.69	334.78	54.81	254.07	199.26	199.26	548.08	1345.14
115.36	381.99	137.98	438.82	104.05	353.57	222.75	222.75	613.06	1504.08
114.12	377.70	136.57	434.11	102.89	349.49	220.82	220.82	608.06	1491.36
214.69	635.74	237.76	693.70	203.15	606.75	264.45	264.45	722.34	1780.16

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)

<https://www.cs.ny.gov>

Medical 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 10008-1407
(TTY: 1-800-241-6894)

Mental Health/Substance Abuse Program:
UnitedHealthcare/OptumHealth,
PO Box 5190, Kingston, NY 12402-5190
(TTY: 1-800-855-2881)

Prescription Drug Program/Empire Plan Medicare Rx:
UnitedHealthcare & Express Scripts/Medco Health
Solutions, PO Box 5900, Kingston, NY 12402-5900
(TTY: 1-800-759-1089)

210 Aetna*

99 Park Ave., New York, NY 10016

1-800-323-9930

Medicare Advantage Customer Service
1-800-282-5366 (TTY: 1-800-654-5984)

www.aetna.com

Serving Bronx, Kings, Nassau, New York, Orange,
Putnam, Queens, Richmond, Rockland, Suffolk,
Sullivan and Westchester counties in New York
State, and all counties in New Jersey

066 Blue Choice*

165 Court St., Rochester, NY 14647

585-454-4810 or 1-800-462-0108

(TTY: 1-877-398-2282)

Medicare Blue Choice 1-877-883-9577

(TTY: 1-800-421-1220)

www.excellusbcbs.com

Serving Livingston, Monroe, Ontario, Seneca,
Wayne and Yates counties

**067 BlueCross BlueShield
of Western New York***

PO Box 80, Buffalo, NY 14240

716-887-8840 or 1-877-576-6440

(TTY: 1-888-249-2583)

Senior Blue HMO Medicare Advantage Plan

PO Box 62, Buffalo, NY 14240

1-800-329-2792 (TTY: 1-877-834-6918)

www.bcbswny.com

Serving Allegany, Cattaraugus, Chautauqua, Erie,
Genesee, Niagara, Orleans and Wyoming counties

Code Plan and Service Area**063 Capital District Physicians' Health Plan
(CDPHP) (Capital)***

500 Patroon Creek Blvd., Albany, NY 12206-1057

518-641-3700 or 1-800-777-2273

Medicare-primary 518-641-3950 or 1-888-248-6522
(TTY: 1-877-261-1164)

www.cdphp.com

Serving Albany, Columbia, Fulton, Greene,
Montgomery, Rensselaer, Saratoga, Schenectady,
Schoharie, Warren and Washington counties

**300 Capital District Physicians' Health Plan
(CDPHP) (Central)***

500 Patroon Creek Blvd., Albany, NY 12206-1057

518-641-3700 or 1-800-777-2273

Medicare-primary 518-641-3950 or 1-888-248-6522
(TTY: 1-877-261-1164)

www.cdphp.com

Serving Broome, Chenango, Delaware, Essex,
Hamilton, Herkimer, Madison, Oneida, Otsego
and Tioga counties

**310 Capital District Physicians' Health Plan
(CDPHP) (Hudson Valley)***

500 Patroon Creek Blvd., Albany, NY 12206-1057

518-641-3700 or 1-800-777-2273

Medicare-primary 518-641-3950 or 1-888-248-6522
(TTY: 1-877-261-1164)

www.cdphp.com

Serving Dutchess, Orange and Ulster counties

**280 Empire BlueCross BlueShield HMO
(Upstate)***

11 Corporate Woods Blvd., PO Box 11800,

Albany, NY 12211-0800

1-800-453-0113 (TTY: 1-800-241-6894)

www.empireblue.com

Serving Albany, Clinton, Columbia, Delaware,
Essex, Fulton, Greene, Montgomery, Rensselaer,
Saratoga, Schenectady, Schoharie, Warren and
Washington counties

**290 Empire BlueCross BlueShield HMO
(Downstate)***

11 Corporate Woods Blvd., PO Box 11800,

Albany, NY 12211-0800

1-800-453-0113 (TTY: 1-800-241-6894)

www.empireblue.com

Serving Bronx, Kings, Nassau, New York,
Queens, Richmond, Rockland, Suffolk and
Westchester counties

Code Plan and Service Area

320 Empire BlueCross BlueShield HMO (Mid-Hudson)*
11 Corporate Woods Blvd., PO Box 11800, Albany, NY 12211-0800
1-800-453-0113 (TTY: 1-800-241-6894)
www.empireblue.com
Serving Dutchess, Orange, Putnam, Sullivan and Ulster counties

220 GHI HMO (Capital)
55 Water St., New York, NY 10041 or PO Box 2844, New York, NY 10116
1-877-244-4466 (TTY: 1-877-208-7920)
www.emblemhealth.com
Serving Albany, Columbia, Delaware, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties

350 GHI HMO (Hudson Valley)
55 Water St., New York, NY 10041 or PO Box 2844, New York, NY 10116
1-877-244-4466 (TTY: 1-877-208-7920)
www.emblemhealth.com
Serving Dutchess, Orange, Putnam, Rockland, Sullivan and Ulster counties

050 HIP Health Plan of New York*
55 Water St., New York, NY 10041
1-877-861-0175 (TTY: 1-888-447-4833)
www.emblemhealth.com
Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk and Westchester counties

072 HMOBlue (Central New York Region)
333 Butternut Dr., Syracuse, NY 13214-1803
1-800-447-6269 (TTY: 1-877-398-2275)
www.excellusbcbcs.com
Serving Broome, Cayuga, Chemung, Cortland, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties

160 HMOBlue (Utica Region)
12 Rhoads Dr., Utica, NY 13502
1-800-722-7884 (TTY: 1-877-398-2275)
www.excellusbcbcs.com
Serving Chenango, Clinton, Delaware, Essex, Franklin, Fulton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Otsego and St. Lawrence counties

Code Plan and Service Area

059 Independent Health*
511 Farber Lakes Dr., Buffalo, NY 14221
1-800-501-3439 (TTY: 716-631-3108)
www.independenthealth.com
Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties

058 MVP Health Care* (Rochester)
PO Box 2207, 625 State St., Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277) (TTY: 1-800-662-1220);
Medicare 1-800-209-3945 · www.mvphealthcare.com
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) (TTY: 1-800-662-1220);
Medicare 1-800-209-3945 · www.mvphealthcare.com
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) (TTY: 1-800-662-1220);
Medicare 1-800-209-3945 · www.mvphealthcare.com
Serving Broome, Cayuga, Chenango, Cortland, Delaware, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, 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) (TTY: 1-800-662-1220);
Medicare 1-800-209-3945 · www.mvphealthcare.com
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) (TTY: 1-800-662-1220);
Medicare 1-800-209-3945 · www.mvphealthcare.com
Serving Franklin and St. Lawrence counties

State of New York
Department of Civil Service
Employee Benefits Division
P.O. Box 1068
Schenectady, New York 12301-1068
<https://www.cs.ny.gov>
Address Service Requested
Time-Sensitive Materials



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

2013 Rates & Information (NY Retirees) – December 2012

Your Only Notice of Health Insurance Rate Changes for 2013

**Please do not send mail or
correspondence to the return
address above. See the front
cover for address information.**

It is the policy of the New York State 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.ny.gov>). 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 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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Continued from page 3

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.

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 2013, subtract your monthly sick leave credit from the new monthly premium.

Retirement Premium Contribution Rates

As permitted under Civil Service Law, the negotiated changes to the NYSHIP premium contribution rates were extended to employees who retire from State service on or after January 1, 2012. Those who retire on or after January 1, 2012 from a title or position equated to Salary Grade 9 or below will pay 12 percent of the cost of Individual coverage and 27 percent of the cost of dependent coverage. Those who retire on or after January 1, 2012 from a title or position equated to Salary Grade 10 or above will pay 16 percent of the cost of Individual coverage and 31 percent of the cost of dependent coverage. The State's contribution to the cost of NYSHIP HMO coverage will continue to be capped based on the cost of Empire Plan coverage.