

NYSHIP Rates & Deadlines for 2016

Choose Your Health Insurance Plan For 2016 by December 18, 2015

Now is the Option Transfer Period – the time to choose the health insurance plan you want in 2016. The New York State Health Insurance Program (NYSHIP) offers you the choice of The Empire Plan or a NYSHIP-approved Health Maintenance Organization (HMO) serving the area where you live or work.

Except under very defined circumstances, you cannot change plans outside the annual Option Transfer Period, which ends December 18, 2015.

To change your health insurance plan during the Option Transfer Period, see your Health Benefits Administrator (HBA) as soon as possible. Ask for the Health Insurance Transaction Form PS-404. Return the completed form to your HBA by December 18, 2015. Or, change your option online using MyNYSHIP. Go to <https://www.cs.ny.gov/employee-benefits>. Select your group if prompted, and then click on MyNYSHIP Employee Self-Service. Or, you can go directly to <https://www.cs.ny.gov/mynyship>.

Note: You must register and receive an activation code by mail to use MyNYSHIP.

NO ACTION IS REQUIRED IF YOU WISH TO KEEP YOUR CURRENT HEALTH INSURANCE OPTION AND STILL QUALIFY FOR THAT PLAN. (See the note at the top of page 4).

November 2015

For Employees of
the State of New York
and their
enrolled Dependents



NYSHIP
New York State
Health Insurance Program

Choices Explains Your Current Plan and Other Available Plans

If you are considering changing your health insurance plan for 2016 or wish to review your current plan, ask your HBA (usually located in the personnel office) for a copy of *Health Insurance Choices for 2016*, your guide to NYSHIP options. Or, find *Choices* and other option transfer publications on our website at <https://www.cs.ny.gov/employee-benefits>. Select your group if prompted, and then click on Health Benefits & Option Transfer. Choose Rates and Health Plan Choices for the most up-to-date option transfer information.

If there are any copayment or benefit changes for 2016, your current plan will notify you directly. Read your *Empire Plan Reports* or *HMO Reports* for changes that may affect you. If you have questions about The Empire Plan, call toll free 1-877-7-NYSHIP (1-877-769-7447). Select the Medical Program and then the appropriate prompt for option transfer benefit questions.

If you have questions about NYSHIP HMOs, call the HMOs directly. (See pages 6 and 7 for telephone numbers). Be sure you understand how your benefits will be affected if you change plans. You are choosing a benefit package for yourself and your dependents for the entire 2016 program year. Changing plans may result in substantially different coverage and cost.

To generate a side-by-side comparison of the benefits provided by each of the NYSHIP plans in your area, use the NYSHIP Plan Comparison tool, available on the Department of Civil Service website. Go to our homepage at <https://www.cs.ny.gov/employee-benefits>. Select your group if prompted, and then choose Health Benefits & Option Transfer. Click on Rates and Health Plan Choices and then NYSHIP Plan Comparison. Confirm your group and select the counties in which you live and work. Then, check the box next to the plans you want to compare and click on Compare Plans to generate the easy-to-read comparison table.

Summary of Benefits and Coverage

The *Summary of Benefits and Coverage (SBC)* is a standardized comparison document required by the Patient Protection and Affordable Care Act.

To view a copy of the *SBC* for The Empire Plan or a NYSHIP HMO, visit <https://www.cs.ny.gov/sbc>. If you do not have internet access, call 1-877-7-NYSHIP (1-877-769-7447) and select the Medical Program to request a copy for The Empire Plan. If you need an *SBC* for a NYSHIP HMO, contact the HMO.

Keep Your Information Up to Date

Notify your HBA when changes in your family, marital or employment status affect your coverage or if your name, address or phone number changes. Act promptly. Deadlines may apply. See your *NYSHIP General Information Book* for details.

Retiring Or Leaving State Service In 2016?

If you continue your NYSHIP enrollment as a retiree or vestee, you may change your health insurance plan when your status changes. As a retiree or vestee, you also may change health insurance option at any time once during a 12-month period. If you are planning to leave the payroll: Will you or your spouse/domestic partner be eligible for Medicare? Are you planning to move out of the area? Ask your HBA for a copy of *Choices for Retirees* to see how retirement will affect your coverage.

Important Dates For Your Benefit Choices

<p>December 18, 2015</p>	<p>Deadline for submitting a signed Health Insurance Transaction Form PS-404 to your HBA if you want to change your health insurance option.</p>
<p>December 31, 2015 Administration Lag-Exempt Payroll Employees</p>	<p>New health insurance option begins for Administration Lag-Exempt Payroll employees. The earliest paycheck in which a deduction change will be made is the check of December 16, 2015. Based on payroll deadlines, deduction changes related to an option change request may be made in a future paycheck and will include adjustments retroactive to the beginning of the plan year.</p>
<p>December 31, 2015 Administration Lag-Payroll Employees</p>	<p>New health insurance option begins for Administration Lag-Payroll employees. The earliest paycheck in which a deduction change will be made is the check of December 30, 2015. Based on payroll deadlines, deduction changes related to an option change request may be made in a future paycheck and will include adjustments retroactive to the beginning of the plan year.</p>
<p>January 7, 2016 Institution Lag-Exempt Payroll Employees</p>	<p>New health insurance option begins for Institution Lag-Exempt Payroll employees. The earliest paycheck in which you will see a deduction change will be the check of December 24, 2015. Based on payroll deadlines, deduction changes related to an option change request may be made in a future paycheck and will include adjustments retroactive to the beginning of the plan year.</p>
<p>January 7, 2016 Institution Lag-Payroll Employees</p>	<p>New health insurance option begins for Institution Lag-Payroll employees. The earliest paycheck in which you will see a deduction change will be the check of January 7, 2016. Based on payroll deadlines, deduction changes related to an option change request may be made in a future paycheck and will include adjustments retroactive to the beginning of the plan year.</p>
<p>December 31, 2015 Triple Lag-Payroll Employees</p>	<p>New health insurance option begins for Institution Payroll employees who were triple lagged. The earliest paycheck in which you will see a deduction change will be the check of January 7, 2016. Based on payroll deadlines, deduction changes related to an option change request may be made in a future paycheck and will include adjustments retroactive to the beginning of the plan year.</p>

New York State Health Insurance Program 2016 Rates

Enrollee Contributions for Employees of New York State

Note: To enroll in an HMO, you must live or work in the HMO's service area. If you no longer live or work in the NYSHIP service area of the HMO in which you are enrolled, you must change to another plan. Service areas may change from year to year. Please check *Choices* or call the HMO for NYSHIP service area information.

Page in Choices	Code	Plan	Biweekly Costs Schedule for Employees who are unrepresented or in Negotiating Units other than PBA-T that have agreements/awards with New York State effective October 1, 2011 or later ("Settled Groups")				Biweekly Costs Schedule for Troopers of the New York State Police represented by the Police Benevolent Association (PBA)	Biweekly Costs Schedule for the BCI Unit of the New York State Police represented by Police Investigators Association (PIA)		
			Individual	Family	Individual	Family			Individual	Family
18	001	The Empire Plan	37.50	161.62	50.01	192.52	60.37	217.70	31.77	148.54
28	066	Blue Choice	43.11	144.80	53.85	172.46	63.02	195.69	35.59	130.98
30	067	BlueCross BlueShield of Western New York	33.94	146.25	45.26	174.21	55.73	200.12	28.28	132.27
32	063	Capital District Physicians' Health Plan (CDPHP) (Capital)	52.29	162.78	63.48	191.67	72.85	215.51	44.54	142.94
32	300	Capital District Physicians' Health Plan (CDPHP) (Central)	89.09	271.50	100.57	301.18	109.99	325.13	81.19	251.25
32	310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)	122.58	342.01	134.39	372.45	143.76	396.27	114.52	321.39
34	280	Empire BlueCross BlueShield HMO (Upstate)	105.29	333.46	117.28	364.66	127.36	390.49	97.13	312.45
34	290	Empire BlueCross BlueShield HMO (Downstate)	207.79	603.33	220.12	635.41	230.43	661.84	199.46	581.89
34	320	Empire BlueCross BlueShield HMO (Mid-Hudson)	198.70	578.93	210.92	610.73	221.16	636.97	190.42	557.62
36	050	HIP Health Plan of New York (Downstate)	99.55	269.03	111.22	299.01	121.03	323.83	91.55	248.64
36	220	HIP Health Plan of New York (Capital)	105.88	285.05	117.65	315.26	127.56	340.32	97.84	264.55
36	350	HIP Health Plan of New York (Hudson Valley)	105.88	285.05	117.65	315.26	127.47	340.08	97.84	264.55
38	072	HMOBlue (Central New York Region)	102.16	281.78	113.48	310.73	123.19	335.18	94.34	261.91
38	160	HMOBlue (Utica Region)	122.42	367.13	133.65	396.11	143.27	420.53	114.64	347.23
40	059	Independent Health	38.43	147.07	49.73	175.24	59.01	198.04	30.62	132.99
42	058	MVP Health Care (Rochester)	34.67	130.57	45.64	156.05	54.58	177.96	27.60	117.83
42	060	MVP Health Care (East)	48.74	132.40	59.23	158.22	68.25	181.19	41.33	119.48
42	330	MVP Health Care (Central)	81.34	191.93	92.12	219.57	101.38	243.13	73.79	172.70
42	340	MVP Health Care (Mid-Hudson)	89.47	210.07	99.78	236.74	108.69	259.34	82.15	191.33
42	360	MVP Health Care (North)	143.83	341.32	155.02	369.88	164.52	394.03	136.08	321.64

Your Biweekly Premium Contribution

For all non-UUP New York State employees who are unrepresented or in Settled groups with titles allocated or equated to Salary Grade 9 and below and United University Professions (UUP) employees with annualized salaries equal to \$41,756 or less, the State will pay 88 percent of the cost of the premium for enrollee coverage and 73 percent for the additional cost of dependent coverage.

For all non-UUP New York State employees who are unrepresented or in Settled groups with titles allocated or equated to Salary Grade 10 and above and UUP employees with annualized salaries greater than \$41,756, the State will pay 84 percent of the cost of the premium for enrollee coverage and 69 percent for the additional cost of dependent coverage.

For PIA employees, the State will pay 90 percent of the cost of the premium for enrollee coverage and 75 percent for the additional cost of dependent coverage.

The State's dollar contribution for the non-prescription drug components of the HMO premium, however, will not exceed its dollar contribution for the non-prescription drug components of The Empire Plan premium.

Note: This information does not apply to Leave Without Pay, COBRA and Young Adult Option ("Direct Pay") enrollees. Direct Pay enrollees will be notified of their rates separately.

Note: As of January 1, 2016, Aetna will no longer be offered as a NYSHIP HMO. If you currently have coverage under Aetna, be sure to review your plan materials and any other related NYSHIP mailings carefully and select The Empire Plan, a different NYSHIP HMO or the Opt-out Program (if eligible) by **December 15, 2015**.

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
P.O. Box 1600, Kingston, NY 12402-1600
TTY: 1-888-697-9054

Hospital Program: Empire BlueCross BlueShield
NYS Service Center, P.O. Box 1407,
Church Street Station, New York, NY 10008-1407
TTY: 1-800-241-6894

Mental Health/Substance Abuse Program:
Beacon Health Options, Inc.
P.O. Box 1800, Latham, NY 12110
TTY: 1-855-643-1476

Prescription Drug Program:
CVS/caremark, Inc.
P.O. Box 6590, Lee's Summit, MO 64064-6590
TTY: 1-800-863-5488

066 Blue Choice

165 Court St., Rochester, NY 14647

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

TTY: 1-877-398-2282

www.excellusbcbs.com

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

067 BlueCross BlueShield of Western New York

P.O. Box 80, Buffalo, NY 14240-0800

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

TTY: 1-888-249-2583

www.bcbswny.com

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

063 Capital District Physicians' Health Plan (CDPHP) (Capital)

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

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

TTY: 1-877-261-1164

www.cdphp.com

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

Code Plan and Service Area

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

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

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

TTY: 1-877-261-1164

www.cdphp.com

Serving Broome, Chenango, 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

TTY: 1-877-261-1164

www.cdphp.com

Serving Delaware, Dutchess, Orange and
Ulster counties

280 Empire BlueCross BlueShield HMO (Upstate)

11 Corporate Woods Blvd., P.O. 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., P.O. 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., P.O. 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
- 050 HIP Health Plan of New York (Downstate)**
55 Water St., New York, NY 10041
1-800-447-8255 TTY: 1-888-447-4833
www.emblemhealth.com
Serving Bronx, Kings, Nassau, New York, Queens,
Richmond, Suffolk and Westchester counties
- 220 HIP Health Plan of New York (Capital)**
55 Water St., New York, NY 10041
1-800-447-8255 TTY: 1-877-208-7920
www.emblemhealth.com
Serving Albany, Columbia, Greene,
Rensselaer, Saratoga, Schenectady, Warren
and Washington counties
- 350 HIP Health Plan of New York (Hudson Valley)**
55 Water St., New York, NY 10041
1-800-447-8255 TTY: 1-877-208-7920
www.emblemhealth.com
Serving Delaware, Dutchess, Orange, Putnam,
Sullivan and Ulster 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, Hamilton, 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)**
P.O. Box 2207, 625 State St.,
Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277)
TTY: 1-800-662-1220
www.mvphealthcare.com
Serving Genesee, Livingston, Monroe, Ontario,
Orleans, Seneca, Steuben, Wayne, Wyoming and
Yates counties
- 060 MVP Health Care (East)**
P.O. Box 2207, 625 State St.,
Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277)
TTY: 1-800-662-1220
www.mvphealthcare.com
Serving Albany, Columbia, Fulton, Greene, Hamilton,
Montgomery, Rensselaer, Saratoga, Schenectady,
Schoharie, Warren and Washington counties
- 330 MVP Health Care (Central)**
P.O. Box 2207, 625 State St.,
Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277)
TTY: 1-800-662-1220
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)**
P.O. Box 2207, 625 State St.,
Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277)
TTY: 1-800-662-1220
www.mvphealthcare.com
Serving Dutchess, Orange, Putnam, Rockland,
Sullivan, Ulster and Westchester counties
- 360 MVP Health Care (North)**
P.O. Box 2207, 625 State St.,
Schenectady, NY 12301-2207
1-888-MVP-MBRS (1-888-687-6277)
TTY: 1-800-662-1220
www.mvphealthcare.com
Serving Clinton, Essex, Franklin
and St. Lawrence counties

New York State
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



NYSHIP
New York State
Health Insurance Program

Important Health Insurance Information
for the Enrollee, Enrolled Spouse/Domestic Partner
and Other Enrolled Dependents
Rates & Deadlines for 2016 (Active) – November 2015

Your Only Notice of Health Insurance Rate Changes for 2016

Please do not send mail or correspondence to the return address above. See page 1 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 NYSHIP Online at <https://www.cs.ny.gov/employee-benefits>. Visit 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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Changing Plans Outside the Option Transfer Period

You may change plans outside the designated Option Transfer Period only under certain circumstances. Read your *NYSHIP General Information Book* for a list of events that allow you to change plans outside of the Option Transfer Period. Contact your HBA for more information.

Opt-Out Program for 2016

If you have coverage under another employer-sponsored health insurance program, you may be eligible for an incentive payment if you waive your NYSHIP coverage. See *Planning for Option Transfer* and *Choices* for details.

Enrollment in the Opt-out Program does not continue automatically from year to year. If you are enrolled in the Opt-out Program for 2015, to be eligible to continue receiving incentive payments in 2016, you must reenroll during the Option Transfer Period and attest to having other coverage for the coming plan year.

If you are interested in participating in the Opt-out Program for 2016, see your HBA.