

November 2023



**NYSHIP**  
New York State  
Health Insurance Program

# NYSHIP RATES & INFORMATION for 2024

## **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 OPTION

You may change your New York State Health Insurance Program (NYSHIP) health insurance option once at any time during a 12-month period. You may change from a NYSHIP-approved Health Maintenance Organization (HMO) to The Empire Plan, from The Empire Plan to an HMO or from one HMO to another HMO in your area.<sup>1</sup>

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) moves permanently out of your HMO's service area,
- You move to a new permanent address<sup>2</sup> 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.

### 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 an *SBC* for The Empire Plan or a NYSHIP HMO, visit [www.cs.ny.gov/sbc](http://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/Surgical Program to request a copy for The Empire Plan. If you need an *SBC* for a NYSHIP HMO, contact the HMO.

**Important:** You may receive information from Medicare and from non-NYSHIP plans in your area describing Medicare options available to you. Please be aware that your NYSHIP benefits will be canceled if you join a Medicare Advantage or prescription drug option that is not part of NYSHIP. Before you choose one of these plans, check with the Employee Benefits Division to see how your NYSHIP benefits will be affected.

**NO ACTION IS REQUIRED IF YOU WISH TO KEEP YOUR CURRENT HEALTH INSURANCE OPTION AND STILL QUALIFY FOR IT.**

## YOUR NYSHIP OPTIONS FOR 2024

If you are considering changing your health insurance option or wish to review your current option, there is a new Option Transfer Guide, now available on NYSHIP Online. This guide provides easy access to option transfer-related information and instructions, as well as tools and additional resources to assist you in your research. To access the guide, visit NYSHIP Online at [www.cs.ny.gov/employee-benefits/login/index-retiree.cfm](http://www.cs.ny.gov/employee-benefits/login/index-retiree.cfm) and click on the link to the right of the Retirees group wizard. You can use the NYSHIP Plan Comparison Tool to compare benefits of plans in your service area, access *Health Insurance Choices for 2024* and download enrollment forms.

Your current plan will notify you directly if there are any copayment or benefit changes for 2024.

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, contact the HMOs directly (see pages 6 and 7). Be sure you understand how your benefits will be affected if you change plans. Changing plans may result in substantially different coverage and cost.

## IF YOU DECIDE TO CHANGE YOUR OPTION

The deduction for your new health insurance plan, plus or minus any retroactive adjustment needed, will be reflected in your pension check or monthly billing statement. **The date of the adjustment will depend on when your health insurance plan change is received and processed by the Employee Benefits Division.**

<sup>1</sup> This flyer includes the most common 2024 enrollee rates for all NYSHIP options. If you reside outside New York State, your only NYSHIP option is The Empire Plan. NYSHIP HMOs have limited service areas. If you move into an area served by a NYSHIP HMO, you will be eligible to change your option to an HMO at that time.

<sup>2</sup> 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's Medicare Advantage Plan.

## KEEP YOUR INFORMATION UP TO DATE

It's important for you to keep the Employee Benefits Division (EBD) up to date with any changes to your enrollment record (address, adding or removing dependents, marital status changes) in a timely manner as deadlines may apply.

Call EBD at 518-457-5754 or 1-800-833-4344 (United States, Canada, Puerto Rico, Virgin Islands). Representatives are available Monday through Friday from 9 a.m. to 4 p.m., Eastern time.

Or write to EBD at:

New York State Department of Civil Service  
Employee Benefits Division  
Albany, NY 12239

Before sending a letter to EBD, be sure that it includes the last four digits of your Social Security number or your Empire Plan ID number, your permanent address and your phone number (including area code). The letter must also be signed and dated.

You may also make address or phone number changes online using MyNYSHIP at [www.cs.ny.gov/mynyship](http://www.cs.ny.gov/mynyship). See your *General Information Book* for more information on enrollment changes and applicable deadlines.



## YOUR NOTICE OF CHANGE DOCUMENT

If you receive your pension by direct deposit, your retirement system will notify you of any deduction changes. Your Notice of Change document will show new deduction amounts for your health plan's 2024 premium.

## ENROLLEES WHO PAY THE EMPLOYEE BENEFITS DIVISION DIRECTLY

The 2024 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 adjustment will depend on when your change request is received and processed by the Employee Benefits Division.

## 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. Not all Participating Employers (PE) offer a sick leave credit. If you have questions regarding your eligibility for a NYSHIP sick leave credit, please contact your former employer.

The amount of your monthly credit will remain the same throughout your lifetime. However, the balance you will pay for your health insurance premium may change each year. The most common reason for a change to the balance you pay would be a premium increase for your NYSHIP option for the new plan year.

If your monthly credit is less than your health insurance premium, you pay the balance. When the retiree premium rises, the balance you must pay will also rise. To calculate the balance you will pay in the calendar year 2024, subtract your monthly sick leave credit from the new monthly premium.

# NEW YORK STATE HEALTH INSURANCE PROGRAM 2024 RATES

## CHECK YOUR PLAN – THIS IS YOUR ONLY NOTICE OF A RATE CHANGE.

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.

**Not all Participating Employers (PE) use the contribution rates reflected in this flyer. If you have questions regarding whether any of these rates apply to you or what your NYSHIP rates will be for 2024, contact your former employer.**

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. Medicare-primary NYSHIP HMO enrollees will be enrolled in the HMO's Medicare Advantage Plan.

These rates reflect the monthly cost for NYSHIP retiree, Dependent Survivor and Vestee coverage. Rates for retirees do not reflect sick leave credits. (See page 3 for information on how sick leave credit impacts your premium.)

Code	Plan	Retirees of Employers that contribute 100% Individual/ 75% Dependent		Retirees and Dependent Survivors of Employers that contribute 90% Individual/ 75% Dependent		Amended Dependent Survivors (25% Dependent contribution)		Vestees and all other Dependent Survivors (full-share premium)	
		Individual	Family	Individual	Family	Individual	Family	Individual	Family
001	The Empire Plan	0.00	427.35	109.05	536.40	427.35	427.35	1,090.54	2,799.94
066	Blue Choice	0.00	298.57	81.89	380.46	298.57	298.57	818.86	2,013.14
063	Capital District Physicians' Health Plan (CDPHP) (Capital)	0.00	304.94	93.68	398.62	304.94	304.94	936.76	2,156.53
300	Capital District Physicians' Health Plan (CDPHP) (Central)	38.10	338.88	138.14	442.73	338.88	338.88	1,038.44	2,393.96
310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)	197.09	552.27	297.26	652.44	393.35	393.35	1,198.71	2,772.11
050	EmblemHealth – HIP (Downstate)	166.58	622.67	279.20	735.29	455.71	455.71	1,292.73	3,115.56
220	EmblemHealth – HIP (Capital)	356.94	778.56	457.09	878.71	479.51	479.51	1,358.42	3,276.47
350	EmblemHealth – HIP (Hudson Valley)	357.12	1,022.19	451.18	1,116.25	457.48	457.48	1,297.64	3,127.58
067	Highmark Blue Cross Blue Shield of Western New York	0.00	323.42	88.68	412.10	323.42	323.42	886.84	2,180.53
069	Highmark Blue Shield of Northeastern New York	0.00	341.93	93.32	435.25	341.93	341.93	933.17	2,300.91
072	HMOBlue (Central New York Region)	0.00	343.27	95.95	439.22	343.27	343.27	959.50	2,332.58
160	HMOBlue (Utica Region)	0.00	386.56	100.42	486.98	386.56	386.56	1,004.18	2,550.43
059	Independent Health	0.00	325.30	90.27	415.57	325.30	325.30	902.74	2,203.93
058	MVP Health Care (Rochester)	0.00	282.70	87.09	369.79	282.70	282.70	870.86	2,001.67
060	MVP Health Care (East)	0.00	297.67	91.63	389.30	297.67	297.67	916.35	2,107.03
330	MVP Health Care (Central)	15.79	337.12	117.02	439.93	337.12	337.12	1,028.05	2,376.54
340	MVP Health Care (Mid-Hudson)	36.16	340.84	136.31	444.61	340.84	340.84	1,037.62	2,400.99
360	MVP Health Care (North)	0.00	326.68	100.12	426.80	326.68	326.68	1,001.16	2,307.89

## ENROLLEE CONTRIBUTIONS FOR RETIREES, VESTEES, DEPENDENT SURVIVORS AND ENROLLEES COVERED UNDER PREFERRED LIST PROVISIONS

The most common rates used by Participating Employers are included in this chart. Contact your former employer if your rate share is different from those shown or if you are unsure of your premium contribution.

CODE AND PLAN	SERVICE AREA	
<p><b>001</b> <b>The Empire Plan</b> (available to enrollees and their eligible dependents worldwide)</p>	<p>1-877-7-NYSHIP (1-877-769-7447) • <a href="http://www.cs.ny.gov">www.cs.ny.gov</a></p> <p><b>Medical/Surgical Program:</b> UnitedHealthcare P.O. Box 1600, Kingston, NY 12402-1600 TTY: 1-888-697-9054</p> <p><b>Hospital Program:</b> Anthem Blue Cross NYS Service Center P.O. Box 1407, Church Street Station New York, NY 10008-1407 TTY: 711</p>	<p><b>Mental Health/Substance Use Program:</b> Carelton Behavioral Health P.O. Box 1850, Hicksville, NY 11802 TTY: 1-855-643-1476</p> <p><b>Prescription Drug Program:</b> CVS Caremark P.O. Box 6590 Lee's Summit, MO 64064-6590 TTY: 711</p> <p>SilverScript Insurance Company (an affiliate of CVS Caremark) P.O. Box 6590 Lee's Summit, MO 64064-6590 TTY: 711</p>
<p><b>066</b> <b>Blue Choice</b></p>	<p>165 Court St., Rochester, NY 14647 1-800-499-1275 • TTY: 1-800-662-1220 • <a href="http://www.excellusbcbs.com">www.excellusbcbs.com</a> Medicare Blue Choice: 1-877-883-9577 Serving Livingston, Monroe, Ontario, Seneca, Wayne and Yates counties</p>	
<p><b>063</b> <b>Capital District Physicians' Health Plan (CDPHP) (Capital)</b></p>	<p>500 Patroon Creek Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 • TTY: 711 • <a href="http://www.cdphp.com/stateemployees">www.cdphp.com/stateemployees</a> Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties</p>	
<p><b>300</b> <b>Capital District Physicians' Health Plan (CDPHP) (Central)</b></p>	<p>500 Patroon Creek Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 • TTY: 711 • <a href="http://www.cdphp.com/stateemployees">www.cdphp.com/stateemployees</a> Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Broome, Chenango, Clinton, Essex, Franklin, Hamilton, Herkimer, Jefferson, Lewis, Madison, Oneida, Otsego, St. Lawrence and Tioga counties</p>	
<p><b>310</b> <b>Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)</b></p>	<p>500 Patroon Creek Blvd., Albany, NY 12206-1057 518-641-3700 or 1-800-777-2273 • TTY: 711 • <a href="http://www.cdphp.com/stateemployees">www.cdphp.com/stateemployees</a> Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Delaware, Dutchess, Orange and Ulster counties</p>	
<p><b>050</b> <b>EmblemHealth – HIP (Downstate)</b></p>	<p>EmblemHealth, 55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • <a href="http://www.emblemhealth.com">www.emblemhealth.com</a> Medicare Advantage: 1-877-344-7364 Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk and Westchester counties</p>	
<p><b>220</b> <b>EmblemHealth – HIP (Capital)</b></p>	<p>EmblemHealth, 55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • <a href="http://www.emblemhealth.com">www.emblemhealth.com</a> Medicare Advantage: 1-877-344-7364 Serving Albany, Columbia, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties</p>	
<p><b>350</b> <b>EmblemHealth – HIP (Hudson Valley)</b></p>	<p>EmblemHealth, 55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • <a href="http://www.emblemhealth.com">www.emblemhealth.com</a> Medicare Advantage: 1-877-344-7364 Serving Delaware, Dutchess, Orange, Putnam, Sullivan and Ulster counties</p>	

CODE AND PLAN	SERVICE AREA
<b>067</b> <b>Highmark Blue Cross Blue Shield of Western New York</b>	P.O. Box 80, Buffalo, NY 14240-0080 1-844-639-2441 • TTY: 711 • <a href="http://www.highmark.com/member/nyship-bcbswny">www.highmark.com/member/nyship-bcbswny</a> Medicare Senior Blue HMO: 1-800-329-2792 Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
<b>069</b> <b>Highmark Blue Shield of Northeastern New York</b>	P.O. Box 15013, Albany, NY 12212 1-844-639-2440 • TTY: 711 • <a href="http://www.highmark.com/member/nyship-blueshieldneny">www.highmark.com/member/nyship-blueshieldneny</a> Medicare Senior Blue HMO: 1-800-329-2792 Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
<b>072</b> <b>HMOBlue (Central New York Region)</b>	333 Butternut Drive, Syracuse, NY 13214-1803 1-800-499-1275 • TTY: 1-800-662-1220 • <a href="http://www.excellusbcbcs.com">www.excellusbcbcs.com</a> Medicare HMOBlue: 1-877-883-9577 Serving Broome, Cayuga, Chemung, Cortland, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
<b>160</b> <b>HMOBlue (Utica Region)</b>	333 Butternut Drive, Syracuse, NY 13214-1803 1-800-499-1275 • TTY: 1-800-662-1220 • <a href="http://www.excellusbcbcs.com">www.excellusbcbcs.com</a> Medicare HMOBlue: 1-877-883-9577 Serving Chenango, Clinton, Delaware, Essex, Franklin, Fulton, Hamilton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Otsego and St. Lawrence counties
<b>059</b> <b>Independent Health</b>	511 Farber Lakes Drive, Buffalo, NY 14221 1-800-501-3439 • TTY: 716-631-3108 • <a href="http://www.independenthealth.com">www.independenthealth.com</a> Medicare Advantage: 1-800-665-1502 • TTY: 711 Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
<b>058</b> <b>MVP Health Care (Rochester)</b>	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 1-800-662-1220 • <a href="http://www.mvphealthcare.com">www.mvphealthcare.com</a> Medicare Advantage: 1-800-209-3945 Serving Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Wyoming and Yates counties
<b>060</b> <b>MVP Health Care (East)</b>	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 1-800-662-1220 • <a href="http://www.mvphealthcare.com">www.mvphealthcare.com</a> Medicare Advantage: 1-800-209-3945 Serving Albany, Columbia, Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties
<b>330</b> <b>MVP Health Care (Central)</b>	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 1-800-662-1220 • <a href="http://www.mvphealthcare.com">www.mvphealthcare.com</a> Medicare Advantage: 1-800-209-3945 Serving Broome, Cayuga, Chenango, Cortland, Delaware, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, Tioga and Tompkins counties
<b>340</b> <b>MVP Health Care (Mid-Hudson)</b>	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 1-800-662-1220 • <a href="http://www.mvphealthcare.com">www.mvphealthcare.com</a> Medicare Advantage: 1-800-209-3945 Serving Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester counties
<b>360</b> <b>MVP Health Care (North)</b>	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 1-800-662-1220 • <a href="http://www.mvphealthcare.com">www.mvphealthcare.com</a> Medicare Advantage: 1-800-209-3945 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  
www.cs.ny.gov  
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 & Information for 2024 (PE Retirees) – November 2023*

**Your Only Notice of Health Insurance  
Rate Changes for 2024**

**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 NYSHIP Online at [www.cs.ny.gov/retirees](http://www.cs.ny.gov/retirees). Visit NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency websites. If you need an auxiliary aid or service to make benefits information available to you, please contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

♻️ 2024 Rates & Information was printed on paper containing recycled fiber using environmentally sensitive inks.

2024 Rates & Information/PE Retiree  PE0199

## EMPLOYEE BENEFITS DIVISION WEBSITE

To find the latest benefit information, go to NYSHIP Online by visiting [www.cs.ny.gov](http://www.cs.ny.gov) and click on Retirees and then Health Benefits. Select the group from which you retired and your plan type (Empire Plan or HMO), if prompted. You may also use MyNYSHIP ([www.cs.ny.gov/mynyship](http://www.cs.ny.gov/mynyship)) to view your enrollment record, change your address, order Empire Plan benefit cards, compare benefit plans and submit option transfer requests. See the *Health Insurance Choices for 2024* booklet for details.

**Note:** For a replacement Empire Plan Medicare Rx Card, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press 4 for Empire Plan Medicare Rx.

## 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). Representatives are available Monday through Friday between 9 a.m. and 4 p.m., Eastern time.