Retirement means different things to different people – traveling, a winter home, even pursuing a new career. Whatever you have planned and wherever you go in your retirement, your health benefits will be a key concern.

As an active employee, the New York State Health Insurance Program (NYSHIP) provides your health insurance coverage through The Empire Plan or a NYSHIP-approved Health Maintenance Organization (HMO). NYSHIP covers over 1.2 million State and local government employees, retirees and their families.

As a retiree, you may continue NYSHIP’s comprehensive coverage for yourself and your family, but there are things you should know about your coverage and steps you must take before you retire.

This booklet explains your health benefits in retirement and answers questions about:

- Eligibility requirements for continuing coverage
- How sick leave credit helps pay for health insurance*
- Dual annuitant sick leave credit
- Dependent survivor coverage
- Medicare reimbursement
- Deferred coverage
- Returning to work and/or continued employment

Your agency Health Benefits Administrator (HBA) can answer your questions and explain your benefits. Your HBA, located in your agency’s personnel office or in the New York State Business Services Center, is your source for benefit information as an active employee. Once you retire, the New York State Department of Civil Service Employee Benefits Division becomes your HBA and your source for benefit information.

*Judges, Justices and certain M/C employees do not earn sick leave credit.

**Benefits-eligible service means a period of employment during which you were eligible for NYSHIP coverage by paying only the employee share of premium.
Periods of employment in which you did not meet the eligibility requirements for coverage at employee share will not be counted. For example, periods when you were paying both the employer share and the employee share of the NYSHIP premium while on Leave Without Pay do not count toward the minimum service requirement.

Benefits-eligible service with public employers other than the State may count toward the minimum service requirement if that employer participated in NYSHIP. Contact the Employee Benefits Division if you have prior service with another public employer to determine if this service counts toward the minimum service requirement. The Employee Benefits Division requires documentation of this service on the employer’s letterhead. If these records are unavailable, you may be able to substitute records from the retirement system to which you belong.

Second, you must qualify for retirement as a member of a retirement system administered by New York State such as the New York State and Local Employees’ Retirement System, the New York State Teachers’ Retirement System, or the New York State and Local Police and Fire Retirement System, or any of New York State’s political subdivisions.

If you are not a member of a publicly administered retirement system or you are enrolled in an optional retirement program such as TIAA-CREF, you must satisfy one of the following:

- Meet the age requirement for pension eligibility in the New York State and Local Employees’ Retirement System retirement tier in effect when you last entered service, or
- Be qualified to receive Social Security disability payments.

Third, you must be enrolled in NYSHIP as an enrollee or dependent when you retire. For example, if you were on leave and canceled your coverage, and then retired, you may not be eligible for health coverage as a retiree.

If you have maintained continuous NYSHIP coverage as a vestee or while covered under Preferred List provisions, or as the dependent of a NYSHIP enrollee, you have met this third eligibility requirement. Also, enrollment in the State’s Opt-out Program at the time of retirement satisfies this requirement. You may not, however, continue to participate in the Opt-out Program as a retiree.

I am eligible to retire but don’t want to start collecting my pension. Can I still have retiree health coverage?

If you are eligible to retire and delay collecting your State pension, you may continue your NYSHIP coverage under retiree provisions if you meet the eligibility requirements. Ask your agency HBA about constructive retirement for health benefits purposes. With this option, you will pay the health insurance premium (if any) directly to the Employee Benefits Division. You also may use any unused sick leave credit to offset the cost of your health insurance. See pages 7 to 9.

If I end my employment before retirement age, will I still be eligible to continue NYSHIP coverage when I qualify for retirement?

To be eligible for coverage as a retiree, you must maintain continuous NYSHIP coverage from the time you leave the payroll until you are eligible to retire. Contact your agency HBA before your last day of work to see if you are eligible to continue health coverage as a vestee.

You must have the required benefits-eligible service (see pages 2 to 3) and be enrolled in NYSHIP either as an enrollee or dependent when you leave the payroll. If you are eligible to continue coverage as a vestee but do not or if you fail to make the required premium payments as a vestee, coverage for you and your dependents will be terminated permanently. You may not reenroll as a vestee at a later date, and you lose eligibility for coverage as a retiree.

As a vestee, you must pay both the State and employee shares of the premium. You will be billed monthly.

To be eligible for coverage as a retiree, you must maintain continuous NYSHIP coverage from the time you leave the payroll until you are eligible to retire. If you leave State service before you are eligible to retire and your spouse or domestic partner is eligible for NYSHIP coverage in his or her own right, continuing coverage as a dependent of your spouse or domestic partner is one way to meet this requirement. This is a less expensive alternative to full-share vestee coverage.
I am retiring because of a disability. How does this affect my eligibility for NYSHIP?

If you have been approved for a disability retirement from a New York State publicly administered retirement system, you have met the requirement of qualifying for a pension.

For a disability retirement that is not work-related, you must meet the minimum service requirement to be eligible for NYSHIP coverage as a retiree (see pages 2 to 3). For a disability retirement resulting from a work-related illness or injury, the minimum service requirement is waived. In either case, you must be enrolled in NYSHIP on the effective date of your disability retirement.

If you are not a member of a New York State publicly administered retirement system, contact your HBA regarding your eligibility to continue coverage.

To maintain NYSHIP eligibility, you must continue your health insurance coverage while you wait for the decision on your disability retirement. If you do not continue coverage, or if you fail to make the required payments, coverage may end permanently.

If you have not continued your coverage and a retroactive retirement is granted, call the Employee Benefits Division right away to ask about reinstating coverage. You must apply in writing to the Employee Benefits Division within one year of the date on the letter from your retirement system notifying you of the decision to grant your disability retirement. You also will be required to pay for coverage from the date it was terminated up to your retirement date.

This one-year deadline applies when your disability retirement was not granted retroactive to the last date you were enrolled in NYSHIP as an active employee, vestee or employee on leave. If you do not apply in writing within one year, the Division will not reinstate your coverage unless you provide medical documentation that you were unable to apply during that time.

If you also receive a Social Security disability pension, you must enroll in Medicare (see pages 12 to 16).
Will my dependent survivors be eligible for health insurance under NYSHIP when I die?

If you had a total of 10 years of service with the State and/or a public employer eligible to participate in NYSHIP, your enrolled dependent survivors will have the opportunity to continue NYSHIP coverage in the event of your death in retirement. To begin the process, your dependent survivors must send a certified copy of your death certificate to the New York State and Local Employees’ Retirement System or New York State Teachers’ Retirement System.

If you were not a member of a retirement system administered by New York State or you chose not to pay your premium by pension deduction, your dependent survivors must send a copy of your death certificate to the Employee Benefits Division.

Dependent survivor coverage, including the cost, is explained in your NYSHIP General Information Book. Make sure your family knows they must contact the Employee Benefits Division within 90 days of your death to enroll for dependent survivor coverage if you die in retirement.

After I retire, how does my dependent survivor continue NYSHIP coverage when I die?

Your dependent survivor must notify the New York State and Local Employees’ Retirement System and the Employee Benefits Division of your death (see page 26 for contact information). The Employee Benefits Division will then send information about continuing coverage to your dependent survivor. If your dependent survivor is eligible to continue coverage, an application will be included with this information. The application should be completed and returned to the Employee Benefits Division as soon as possible. Publications that explain the NYSHIP health benefits will be sent separately.

If you die in retirement, your enrolled dependents will have extended health insurance coverage for three months beyond the month in which you die. NYSHIP provides these three months of coverage at no cost.

If you choose the dual annuitant sick leave credit option when you retire and you die before your dependents, that credit would continue to reduce their premium cost. See pages 8 and 9.

If I have NYSHIP coverage as a dependent through my spouse/domestic partner, am I eligible for my own coverage as a retiree?

If you have NYSHIP coverage as a dependent through your spouse/domestic partner and otherwise meet eligibility requirements for coverage as a retiree, you may establish coverage as a retiree in your own right at any time. You may use your own sick leave credit with proper documentation.

Before you retire, ask your agency HBA for a copy of Form PS-410, State Service Sick Leave Credit Preservation. Keep this form with your important papers.

Notify the Employee Benefits Division in writing if a pending divorce or other change means you will need to reactivate your NYSHIP coverage in your own name. Attach a copy of Form PS-410. See pages 7 to 9 for additional information on using sick leave credit in retirement.

Choosing the dual annuitant sick leave credit is not a requirement for dependent survivor coverage. See pages 8 and 9.
As an active employee, your share of the NYSHIP premium is deducted from your paycheck. When you retire, you pay through deductions from your monthly retirement check or you make monthly payments directly to the Employee Benefits Division.

Your agency Health Benefits Administrator (HBA) can answer your questions and help you determine the cost of your health insurance option in retirement.

**What portion of the cost of health insurance will I pay as a retiree?**

If you retire on or after January 1, 2012, the amount you must contribute toward the cost of your health insurance coverage as a retiree will be based on your salary grade (or equivalent) at the time of retirement. Ask your agency HBA what your contribution rate will be. You may be able to use your sick leave credit to reduce your cost. See pages 7 to 9.

Although health insurance premiums generally increase annually, your sick leave credit is a fixed monthly amount and will not change. You will be billed for any balance due.

**How will I pay for my health insurance as a retiree?**

When you retire, you will pay your share of the NYSHIP premium through deductions from your monthly retirement check or by making monthly payments directly to the Employee Benefits Division.

It may take several months for the Employee Benefits Division to receive the retirement number assigned to you by the Retirement System and begin taking monthly health insurance deductions from your pension. In the interim, if you owe premiums, you will be billed directly each month. You must pay the monthly bills or risk having your health insurance canceled for nonpayment. If your coverage is canceled for nonpayment, you can later reenroll. However, in most cases, you will be subject to a three-month waiting period before your coverage becomes effective.

It may also take several months for billing to begin. At that point, you will be billed from the date your retiree health benefits went into effect through the current billing period.
What is sick leave credit?
Sick leave credit is the actuarial value of your unused sick leave calculated at the time you retire. It is then applied as a credit toward the cost of your NYSHIP premium – either The Empire Plan or a NYSHIP HMO.

Sick leave credit can be applied toward your NYSHIP premium only if you retire directly from active employment, Leave Without Pay status, Preferred List coverage or if you are approved for disability retirement retroactive to your last date of employment. Sick leave credit may not be applied toward health insurance premium costs while you are in vested status or after retiring from vested status.

To estimate the value of your sick leave credit, see page 8 or visit our web site at https://www.cs.ny.gov. From the homepage, click on Benefit Programs, follow the prompts to access NYSHIP Online, and then choose Planning to Retire? Select Sick Leave Credit and Calculator.

Employees earn sick leave each biweekly pay period if they are in full-pay status for seven out of 10 days in a biweekly pay period.* The rate at which employees earn sick leave depends on the percentage of time they work, their bargaining unit, date of hire and whether or not the employee participates in the Income Protection Plan (IPP).

Most employees can use a maximum of 200 days of unused sick leave to calculate sick leave credit. See your agency HBA for details. Using your sick leave credit for health insurance will not affect the value of your sick leave for pension purposes.

If you earn sick leave credit, you may be able to use the value of your unused sick leave to pay for all or part of the cost of your health insurance during retirement. The actuarial value of your sick leave hours is converted to a monthly dollar value.

The result is a lifetime monthly sick leave credit used to reduce your share of the monthly NYSHIP premium for as long as you are enrolled in NYSHIP. If the NYSHIP premium rises, the monthly premium you pay also may rise. Each year you can calculate the amount you will pay in the new calendar year by subtracting your monthly sick leave credit from the new monthly premium.

When you retire, if you are eligible to use sick leave credit, your agency will report your hourly rate of pay and accumulated sick leave hours to the Employee Benefits Division. You will receive a letter verifying your monthly sick leave credit and the current cost of retiree health insurance coverage. Keep this letter for your records.

*Judges, Justices and certain M/C employees do not earn sick leave credit.
If you do not receive this information, write to the Employee Benefits Division (see page 26) or call 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

How do I estimate the value of my sick leave credit?
To estimate the value of your sick leave credit, use the following formula.

\[
\text{Total Dollar Value of Sick Leave} = \frac{\text{Total Dollar Value of Sick Leave}}{\text{Life Expectancy in Months}} \times \frac{\text{Hours of Unused Sick Leave}}{\text{Hourly Rate of Pay}} = \frac{\text{Your Monthly Sick Leave Credit}}{\text{Your Lifetime Expectancy in Months}}
\]

Your monthly credit ends when you die and may not be used by your surviving dependents unless you choose the dual annuitant sick leave option on or before your retirement date.

Dual Annuitant Sick Leave Credit

What does “dual annuitant” mean?
When you retire, you may specify that you want your dependent survivors to be able to use your monthly sick leave credit toward their NYSHIP premium if you die. This is called the dual annuitant sick leave option. If you choose this option, you must do so before your retirement date. This option is available only prior to your retirement.

If you choose the dual annuitant sick leave option prior to your retirement, your sick leave credit is reduced to 70 percent of its value for as long as you live. Then, your eligible enrolled dependents who outlive you may continue to use 70 percent of your monthly credit for their NYSHIP premium.

If you do not make this choice before your retirement becomes effective, all of your sick leave credit will be used to calculate your monthly lifetime credit and will be automatically applied to your premium. Your dependent survivors will not have your sick leave credit available to offset their cost of the NYSHIP premium.

The monthly sick leave credit is available to your dependents as long as they are eligible for NYSHIP and enrolled as dependent survivors.

How do I choose dual annuitant sick leave credit?
To choose dual annuitant sick leave credit, contact your agency HBA before you retire.

You may choose dual annuitant sick leave credit whether you have Individual or Family coverage at the time you retire. To make this choice, you must complete Form PS-405, Dual Annuitant Sick Leave Credit Election, before your retirement date.

Once you elect dual annuitant sick leave credit, the election is permanent. If your dependents should lose eligibility or die before you, you will continue to receive 70 percent (reduced) sick leave credit.

Note
Having a monthly sick leave value that covers the premium in full when you retire does not guarantee free health insurance for life. While your sick leave credit remains unchanged, your NYSHIP premium will most likely increase each year.

Your agency HBA can help you with sick leave credit calculations or you can access the sick leave calculator at https://www.cs.ny.gov. Click on Benefit Programs and follow the prompts to access NYSHIP Online. Choose Planning to Retire?, then select Sick Leave Credit and Calculator.
**If I don't choose dual annuitant sick leave credit, can my dependent survivors still have health insurance?**

Yes. Your dependent survivors will be able to continue their health insurance if they meet NYSHIP eligibility requirements (see pages 2 to 3). However, without dual annuitant sick leave credit, your dependent survivors will not have sick leave credit available to apply toward their NYSHIP premium.

**How will I decide whether to choose dual or single annuitant sick leave credit?**

Circumstances such as your age, your spouse/domestic partner’s age, eligibility for retiree coverage in his or her own right and the amount of sick leave credit are different for each retiree and may affect this decision. You may want to consult with your financial advisor.

Keep in mind that choosing dual annuitant sick leave credit is not required for dependent survivor coverage, but the initial decision is irrevocable (cannot be changed).

If you have questions about the dual annuitant sick leave option, your agency HBA can help or you may call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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**Deferring Your Health Insurance**

**Can I defer the start of my retiree health coverage and use of sick leave credit until after I retire?**

When you retire, you may defer (delay) the start of your retiree health coverage and the use of your sick leave credit only if you have other health coverage. If you want to defer health coverage, you must make this choice before your retirement date. Contact your agency HBA to defer coverage.

There may be advantages to delaying the start of your NYSHIP coverage. During the period of deferment, you do not have to pay the NYSHIP premium. The monthly credit for your sick leave may be higher when you begin your retiree coverage, because it will be calculated when you are older. The actuarial table in effect at the time you defer your retiree health coverage will be used to determine your sick leave credit.

You may reenroll for NYSHIP coverage anytime by contacting the Employee Benefits Division. A waiting period will not apply if you defer your coverage prior to leaving the payroll.

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**Note**

If you are deferring your coverage prior to retirement, ask your agency HBA for Form PS-410, State Service Sick Leave Credit Preservation, and keep it in a safe place. When you start your retiree coverage, the form will document your accumulated sick leave credit that will be applied toward the cost of your NYSHIP premium.

If you die while your coverage is deferred and you had your NYSHIP Family coverage in effect at retirement, your spouse/domestic partner and any other eligible dependents may be eligible to continue NYSHIP coverage as dependent survivors. They must write to the Employee Benefits Division requesting reenrollment in NYSHIP within 90 days of your death. (See page 26 for the address.) Eligibility requirements for your spouse/domestic partner and eligible dependents to reenroll in NYSHIP are the same as if you had continued your coverage into retirement.

If you had Individual coverage in effect at retirement, your dependents will not be eligible under NYSHIP as dependent survivors.
Understanding Your NYSHIP Options

The first step in making a good choice is understanding the similarities and differences between options. There are two types of health plans available to you under the New York State Health Insurance Program (NYSHIP): The Empire Plan and NYSHIP-approved Health Maintenance Organizations (HMOs).

The Empire Plan is designed for New York State employees and retirees. The Plan provides coverage whether you receive care from The Empire Plan network providers or from non-network providers. Enrollees are not required to choose a primary care physician and do not need referrals to see specialists. However, certain services, such as hospital and skilled nursing facility admissions, mental health and substance abuse treatment, home care and certain prescription drugs require preapproval.

The Empire Plan is available to all NYSHIP enrollees regardless of where they live or work in retirement. Coverage is worldwide and is not limited to a geographic area. However, you should carefully review the list of network providers in the area in which you plan to retire. You will need to submit claim forms and pay a higher share of the cost of services if you use a non-network provider.

An HMO is a managed care system that provides comprehensive health care coverage through a network of providers within a specific geographic area. Most NYSHIP enrollees have a choice of one or more NYSHIP HMOs located in New York State. Enrollees in HMOs usually must select a participating primary care physician to provide routine medical care and to make referrals to network specialists and network hospitals when necessary.

Can I change my health insurance plan (option) in retirement?

As a retiree, you can change your NYSHIP health insurance plan (option) once during a 12-month period for any reason. Active employees may change only during the annual Option Transfer Period, unless they experience a qualifying event.

You may change your plan more than once in a 12-month period if:

- You are enrolled in a NYSHIP HMO and move permanently out of your HMO’s service area,
- You move to an area served by a NYSHIP HMO that did not serve your previous home area, or
- You add a new dependent acquired through marriage, domestic partnership, adoption or placement for adoption.

See your NYSHIP General Information Book, Empire Plan Reports/HMO Reports and Health Insurance Choices for Retirees for more information about changing your health insurance plan.

The Employee Benefits Division will mail you information about NYSHIP options each year. The information will include summaries and costs of NYSHIP plans available to you.
Canceling NYSHIP Coverage

After I retire, may I cancel NYSHIP coverage and later reenroll?

After you retire, you may cancel your NYSHIP coverage and reenroll at a later date. Under most circumstances, you will be subject to a waiting period of up to three months before your coverage again becomes effective.

What happens to my sick leave credit if I cancel my NYSHIP coverage?

Sick leave credit only applies when you are paying a NYSHIP premium. Upon reenrolling, you will receive the same monthly sick leave credit as before you canceled coverage.

Note

If you die during the period of time that your NYSHIP coverage is canceled, your dependents will not be eligible for dependent survivor coverage.
The Empire Plan and all HMOs offered under NYSHIP provide broad coverage for Medicare-eligible enrollees, but there are important differences among plans.

**The Empire Plan**

The Empire Plan coordinates hospital, medical and mental health and substance abuse benefits with Medicare. Although Medicare does not cover medical expenses for services outside the United States, Empire Plan benefits are available worldwide. See your NYSHIP General Information Book and Empire Plan Certificate for details.

**NYSHIP Health Maintenance Organizations (HMOs)**

If you are Medicare primary (Medicare pays before another insurance plan) and enrolled in a NYSHIP HMO, you will have one of the two following types of coverage:

- No Medicare benefits outside the HMO: With a Medicare Advantage plan, all Medicare and HMO benefits are provided through the plan. You must follow the HMO’s requirements and use their providers. You may not receive any benefits from Medicare or that HMO if you choose to receive care outside your HMO other than for those services as specified in the plan contract. Check plan documents for any limitations or exclusions.

- Medicare benefits available outside the HMO: With an HMO that coordinates coverage with Medicare, you can choose to receive Medicare benefits outside of your HMO. You would be responsible for Medicare’s coinsurance, deductibles and other charges. In this case, no payment will be made by the HMO other than for services provided under the HMO plan benefits. (Some HMOs provide only a benefit for emergency care received outside the HMO; others cover more.) Check plan documents for any limitations or exclusions. Most NYSHIP HMOs do not coordinate coverage with Medicare.

Also check with your HMO about benefits when you travel outside of your HMO’s service area or outside of the country.

**Non-NYSHIP HMOs**

You may receive information from Medicare and from non-NYSHIP HMOs in your area describing Medicare options available to you that are not part of NYSHIP. You may wonder whether to join one of these plans. Please be aware that your NYSHIP benefits may be significantly reduced if you join one of these plans.

If you join a non-NYSHIP Medicare Advantage plan, you may have no benefits except the benefits available through that plan.

If you cancel your NYSHIP coverage to join a non-NYSHIP Medicare Advantage plan, be aware that:

- The State will no longer reimburse you or your Medicare-eligible dependents for the Medicare Part B premium.

- Your sick leave credit will not offset your health insurance costs.

- If you wish to reenroll in NYSHIP, there is a three-month waiting period.
• If you die while you are not enrolled in NYSHIP, your dependents are not eligible for dependent survivor coverage unless deferral rules apply (see page 9).

Before you choose a Medicare Advantage plan that is not part of NYSHIP, check with the Employee Benefits Division to see how your NYSHIP benefits will be affected. In most cases, your NYSHIP coverage will be canceled; if you are the enrollee, your dependent NYSHIP coverage also will be canceled.

What is Medicare?
Medicare is the federal health insurance program for people age 65 and older, people who are disabled and have received Social Security Disability Insurance (SSDI) payments for 24 months, people who are receiving SSDI due to amyotrophic lateral sclerosis (ALS) and those who have end-stage renal disease. It is administered by the Social Security Administration for the Centers for Medicare & Medicaid Services (CMS).

Medicare has four parts:
Medicare Part A covers inpatient care in a hospital or skilled nursing facility, hospice care and home health care.

In most circumstances, there is usually no cost for Medicare Part A. There are some individuals who do not qualify for Medicare Part A at no cost. These individuals are not required to take Part A and may keep NYSHIP as their primary coverage for Medicare Part A benefits.

If Social Security tells you that you must pay for Medicare Part A, contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands) to talk with a representative.

Medicare Part B covers doctors’ services, outpatient hospital services, durable medical equipment and some other services and supplies not covered by Part A.

There is a monthly premium for Medicare Part B that is either deducted from your Social Security pension check or you pay directly if you are not collecting Social Security benefits.

Together, Parts A and B are known as the Original Medicare Plan, which is a fee-for-service plan. After retirement, NYSHIP requires you and your dependents to be enrolled in Parts A and B as soon as you are primary Medicare eligible. If you do not enroll, your NYSHIP coverage will not pay for expenses that Medicare would have covered.

Medicare Part C, or Medicare Advantage, replaces your original Medicare benefits. Most NYSHIP HMOs are Medicare Advantage plans, but not all Medicare Advantage plans are part of NYSHIP. If you enroll in a NYSHIP Medicare Advantage plan, you receive all your Medicare and your NYSHIP benefits from that plan.

If you or your dependent enrolls in a Medicare Advantage or Part D plan that is not part of NYSHIP, you may have very few or no benefits available through your NYSHIP plan. See Non-NYSHIP HMOs on page 12.

Medicare Part D is the Medicare prescription drug benefit. Medicare-primary enrollees and dependents enrolled in The Empire Plan have prescription drug coverage under Empire Plan Medicare Rx, a Medicare Part D Prescription Drug Plan with expanded coverage designed especially for NYSHIP. If you or any of your dependents are Medicare-primary, you will be automatically enrolled in Empire Plan Medicare Rx.

For more information on Empire Plan Medicare Rx, please call 1-877-769-7447, press 4 on the main menu and then the 2014 benefits option or visit the New York State Department of Civil Service web site at https://www.cs.ny.gov. From the homepage, click on Benefit Programs, then NYSHIP Online. Provide your group and select Empire Plan if prompted. Click on Current Topics and choose the link for Empire Plan Medicare Rx. Click on the link to the SilverScript web site on the following page.

If you are enrolled in a NYSHIP Medicare Advantage HMO, you will be enrolled in that HMO’s Medicare Advantage Plan when you reach age 65 or are otherwise eligible for primary Medicare benefits (you must be enrolled in Medicare Parts A and B to continue this coverage). Your NYSHIP Medicare Advantage HMO provides your Medicare Part D prescription drug coverage.
You can be enrolled in only one Medicare Part D plan at a time. Therefore, enrolling in a Medicare Part D plan outside of your NYSHIP coverage may drastically reduce your benefits overall. For example:

- If you are enrolled in The Empire Plan with prescription drug coverage through Empire Plan Medicare Rx and then enroll in another Medicare Part D plan, your Empire Plan coverage will be terminated. This means you and your covered dependents will have no coverage for hospital, medical/surgical, mental health and substance abuse or prescription drugs.

- If you are enrolled in a NYSHIP Medicare Advantage HMO and then enroll in a Medicare D plan outside of NYSHIP, Medicare will terminate your enrollment in the NYSHIP HMO.

If you receive prescription drug coverage through a union Employee Benefit Fund, contact the fund for more information about Medicare Part D.

If you receive a letter from the Social Security Administration that says you are eligible for the Medicare Part D Low Income Subsidy, please call the Employee Benefits Division (see page 26 for contact information).

For more complete information on the impact of Medicare on your NYSHIP benefits, please read the information we send you about Medicare Part D prescription drug coverage.

If I’m enrolled in NYSHIP, why do I have to enroll in Medicare too?

NYSHIP requires all enrollees to be enrolled in Medicare Parts A and B when first eligible for Medicare coverage that is primary to NYSHIP. The combination of coverages under Medicare Parts A and B and NYSHIP protects you.

As an active employee, if you or your dependents are eligible for Medicare, it is usually secondary to (pays after) NYSHIP coverage. Medicare enrollment is not required unless primary Medicare eligibility is due to end-stage renal disease or you have a domestic partner/same-sex spouse* who is age 65 or over. When you retire, Medicare Parts A and B become primary coverage (pay first) for you and/or your dependents, in most cases, as soon as you become eligible for Medicare benefits.

Medicare Parts A and B become primary to your NYSHIP coverage as soon as you, as a NYSHIP retiree, vestee, dependent survivor, or Preferred List enrollee, become eligible for Medicare unless you or your dependent is in a coordination period due to end-stage renal disease. If you do not enroll in Part B, The Empire Plan or your NYSHIP HMO (non-Medicare Advantage) will not pay for any medical expenses that Medicare would have covered. If you do not enroll in Medicare Parts A and B, you will not be eligible for NYSHIP coverage under The Empire Plan or a NYSHIP Medicare Advantage HMO.

* Note: The Department of Civil Service is aware of the Supreme Court’s ruling in Windsor vs. U.S., which found Section 3 of the Defense of Marriage Act to be unconstitutional. While we anticipate guidance regarding the impact of the decision on NYSHIP, the information contained herein is accurate as of the date of publication. Upon receipt of federal guidance, we will implement changes as soon as practicable.
The same rules apply to your dependents covered under NYSHIP. Failure to enroll in Medicare could reduce or terminate the benefits available under NYSHIP.

**When and how do I enroll in Medicare?**

Be sure to have your Medicare benefits in effect according to NYSHIP rules. If you are receiving Social Security benefits, you automatically are enrolled in Parts A and B starting the first day of the month you turn 65 or become eligible as a result of disability. **Do not decline enrollment in Medicare Part A or Part B.**

Retirees or dependents who are eligible for Medicare due to disability prior to age 65 must enroll in Medicare Part A and Part B and send the Employee Benefits Division a copy of their Medicare card.

If you are not receiving Social Security payments, it is **your responsibility to enroll** in Medicare Parts A and B for coverage **primary** to NYSHIP, even if you also have coverage as an active employee through another employer’s group plan.

Contact Social Security for enrollment information. You can apply for Medicare online at www.ssa.gov or by calling Social Security at 1-800-772-1213.

When you retire, NYSHIP becomes secondary to Medicare as soon as you are eligible for primary Medicare benefits. If you fail to enroll in Medicare or are still in a waiting period for Medicare to go into effect, you will be responsible for medical expenses that Medicare would have covered if you had enrolled when first eligible.

**Therefore, since Medicare will be your primary coverage, you and your covered dependents must have Medicare Parts A and B in effect by the first day of the month in which each of you reaches age 65 or otherwise became eligible for primary Medicare benefits.** Or, if the birthday falls on the first of the month, Medicare Parts A and B must be in effect on the first day of the preceding month.

For example, if your 65th birthday is July 1, 2014, your Medicare effective date would be June 1, 2014. Also, you and your covered dependents must have Medicare Parts A and B in effect before reaching age 65 if Medicare-primary eligible because of disability or end-stage renal disease.

If you are enrolled in a NYSHIP HMO that offers a Medicare Advantage plan, upon becoming eligible for primary Medicare you and/or your covered dependents should automatically be enrolled in that Medicare Advantage plan if Medicare Part A and Part B are in effect. Check with the Medicare Advantage plan if you need to sign an enrollment application.

If you have questions about NYSHIP and your Medicare benefits, please see your **NYSHIP General Information Book, Medicare & NYSHIP**, other NYSHIP documents and your agency Health Benefits Administrator. Or, call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

**Will New York State reimburse me for my Medicare Part B premium?**

Yes. Because NYSHIP requires you to join Medicare Part B once you are eligible for Medicare-primary coverage, NYSHIP reimburses you for the standard Medicare Part B premium.

Medicare enrollees with a Modified Adjusted Gross Income (MAGI) above specified amounts must pay an Income-Related Monthly Adjustment Amount (IRMAA) in addition to the standard cost of Medicare Part B. If you are required to pay more than the standard premium for your Medicare Part B coverage, watch for information from the Employee Benefits Division regarding IRMAA reimbursement that will be mailed to you, usually in January.

If you and your dependents are enrolled in Medicare, each of you pays for your Part B coverage through Social Security deductions or direct payment if you are not receiving Social Security benefits.

New York State adds reimbursement for each primary Medicare-eligible person covered under your NYSHIP enrollment to your State pension check each month.

If you are paying for NYSHIP coverage by making direct payments each month to the Employee Benefits Division, reimbursement for the standard cost is applied as a credit that reduces your monthly premium. If your Medicare credit is greater than your monthly insurance premium, you will receive a quarterly refund check from the Office of the State Comptroller.
If you or your dependent becomes eligible for primary Medicare due to age, reimbursement should begin automatically. If you or your dependent becomes eligible for primary Medicare due to disability, please send a copy of the Medicare card to the Employee Benefits Division.

Your NYSHIP premium does not change because you are enrolled in Medicare.

For more information on how Medicare affects NYSHIP benefits, call the Employee Benefits Division.

**Should I buy additional coverage to supplement my NYSHIP coverage?**

Generally, additional coverage will not increase the benefits available to you. In fact, some types of coverage, such as non-NYSHIP Medicare Advantage plans and Medicare Prescription Drug plans, may actually decrease your benefits since they will replace your NYSHIP benefits.

For example, if you are enrolled in a NYSHIP HMO Medicare Advantage plan, Medicare rules require your disenrollment from your NYSHIP HMO if you enroll in another Medicare Advantage or Medicare Part D plan.

Also, if you are enrolled in The Empire Plan, enrollment in other Medicare Part D prescription drug coverage will terminate your Empire Plan Medicare Rx coverage. As a result, all Empire Plan benefits will be canceled.

Enrollment in a freestanding Medicare Part D plan leaves you with only drug benefits and your traditional Medicare Part A and Part B coverage. So, be sure to understand the impact that other coverage may have on your NYSHIP coverage.

If you have questions, please call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).
How can I continue my dental and vision benefits after retirement?

If you receive dental and vision benefits through the State plan, you can continue them through the federal Consolidated Omnibus Budget Reconciliation Act (COBRA). Individuals or covered dependents eligible for COBRA may continue, for 36 months, certain benefits at group rates when coverage would otherwise end.

Vision coverage is available only through COBRA continuation of coverage for 36 months when you retire. Dental coverage is available through COBRA or the group direct pay dental plan for New York State retirees.

GHI administers the Direct Pay Dental Plan offered to New York State retirees. The benefits offered under this Plan are not the same benefits offered under the Preferred Dental Plan for active employees or the COBRA Plan offered to retirees. You should automatically receive an enrollment form and summary of benefits after you retire. If you do not, call GHI at 1-800-947-0101.

Employees who receive dental and vision benefits through a union Employee Benefit Fund may be eligible to continue coverage through that Fund under COBRA. These employees are also eligible for the direct pay dental plan at the end of the COBRA period. Contact your union Employee Benefit Fund for information.

You should receive an application for COBRA continuation of your dental and vision coverage automatically within 30 days of retiring. If you don’t receive one, write to the Employee Benefits Division. Send your name, Social Security number, address, telephone number with area code and reason for requesting the application to:

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

Employees represented by the Civil Service Employees Association (CSEA), District Council 37 (DC-37) and United University Professions (UUP) should call their union Employee Benefit Fund.

When COBRA coverage ends after 36 months, can I continue my dental coverage?

You should receive a Direct Pay Dental Plan enrollment form at the end of the COBRA period. If you do not receive the form and you choose to continue dental coverage after your COBRA coverage expires, call GHI at 1-800-947-0101 to request one.

If you wish to enroll in the Direct Pay Dental Plan, you must do so when you retire or at the end of your COBRA coverage. These are your only opportunities to enroll.

Note

Dental and vision benefits are not part of your NYSHIP health benefits and do not continue automatically. Sick leave credit cannot be used to reduce the premium for dental and vision benefits.
If I am enrolled in the State’s long term care program, can I continue it after retirement?

If you purchased long term care insurance through NYPERL, the New York State Public Employee and Retiree Long Term Care Insurance Plan, your long term care insurance will continue without interruption after retirement and without any change in benefits as long as you pay your premium and have not exhausted your lifetime benefit amount. If you pay your long term care premium through payroll deduction, you will need to change your method of payment. If you have questions, contact NYPERL toll free at 1-866-474-5824.

If I had an Income Protection Plan (IPP), will it continue after retirement?

If you are not receiving IPP benefits when you retire, your coverage under the Income Protection Plan ends when you retire. Eligibility ends on your last day on the payroll as an active employee.

If you are receiving IPP benefits when you retire, you will continue to receive benefits in accordance with the Income Protection Plan rules.

If I am enrolled in the M/C Life Insurance Plan, can I continue it after retirement?

You may continue your M/C Life Insurance as a retiree if you:

- Retire as a member of a New York State publicly administered retirement system,
- Are eligible to retire from a New York State publicly administered retirement system, but choose to defer receipt of your pension when you separate from service, or
- Are not a member of a New York State publicly administered retirement system, but on the date you separate from service you meet the age and service requirements of the retirement plan appropriate for you (if you had joined the retirement system when you were first employed).

If you are enrolled in the M/C Life Insurance Plan, you may choose to continue in the group program or convert to a standard direct-pay policy. If you choose to remain in the group program, you may continue both personal and dependent life insurance in retirement, subject to the age-related life insurance reductions. Your agency Health Benefits Administrator will give you information about continuing coverage or converting to a standard direct-pay policy.

If you are not eligible to continue participation in the M/C Life Insurance Plan, your life insurance coverage will terminate on the last day of the coverage period for which a contribution was made. At this time, you may be eligible to convert to a standard direct-pay policy with the carrier.

For more information, see your M/C Life booklet, request a copy from your personnel office or visit our web site at https://www.cs.ny.gov. Click on Employees, then on State Government Employees. Under Health Insurance and other Employee Benefits, select Life Insurance.
If you have access to the internet, visiting our web site is a great way to stay current with your NYSHIP benefits in retirement and with changes as they occur.

Check out NYSHIP Online, the New York State Department of Civil Service Employee Benefits Division web site, at https://www.cs.ny.gov.

For retirement information, select Benefit Programs and follow the prompts to access your current group health benefits on NYSHIP Online.

On the NYSHIP Online homepage, select Planning to Retire? for a convenient list of links to important resources similar to what is in this booklet, including:

- Eligibility for health insurance when you retire
- Deferring coverage
- Sick leave credit and calculator
- Dual annuitant sick leave credit
- Medicare for retirees
Planning to Retire?

Are you planning to retire soon? If so, congratulations! This section includes publications, contact information and links to important resources that will help you prepare for retirement.

Remember to:

- Read your New York State Health Insurance Program (NYSHIP) materials.
- Check the requirements for continuing your health insurance in retirement.
- Talk to your agency Health Benefits Administrator.
- Inquire about a pre-retirement seminar.

NYSHIP General Information Book:

Your NYSHIP General Information Book is available online.

In these sections, you can access many Empire Plan publications.
Contact your agency
Health Benefits Administrator

Make sure you meet the minimum service requirements for continuing benefits in retirement. For health coverage, be especially sure to check any part-time or local government service that may count as qualifying service if you need it.

If you do not meet the requirements to continue coverage, COBRA or a direct-pay policy will allow you to continue health benefits for a limited time period. Read the chapters about COBRA Continuation of Coverage and Changing from NYSHIP to a Direct-Pay Conversion Contract in your NYSHIP General Information Book. Talk with your agency Health Benefits Administrator if you have questions.

• Ask if there is a pre-retirement seminar you can attend.
• Make sure the information on your enrollment record, such as dates of birth, spelling of names, and addresses, is accurate and up to date.
• Discuss the dual annuitant sick leave credit (through which your sick leave credit can be applied toward your surviving dependent’s premium). If you have accrued sick leave.
• If you meet the requirements but do not want your health insurance to continue after you retire, notify your agency Health Benefits Administrator. Be sure to discuss deferred health insurance coverage as an alternative to cancellation.
• Ask for the latest publications about health insurance and other benefits information available to retirees, including Retiree Health Insurance Choices.

Contact your Social Security Administration office

If you or a dependent is already age 65 or over, call your Social Security Administration office three months before you retire to enroll in Medicare Parts A and B. You must have Medicare Parts A and B in effect when you retire. (Medicare becomes primary to NYSHIP on the first day of the month following a “runout” period of 28 days after the last day of the last payroll period for which you were paid.)

After you retire, when you or a dependent reaches age 65 and is newly eligible for Medicare, NYSHIP requires you to have Medicare Parts A and B in effect on the first day of the month in which you reach 65, or the first day of the previous month, if your birthday falls on the first day of the month. Plan to sign up three months before turning 65.

Regardless of age, Medicare Parts A and B provide coverage that is primary to NYSHIP when you retire if you or your dependent is qualified to receive Social Security Disability Insurance (SSDI) after 24 months, or is receiving SSDI due to amyotrophic lateral sclerosis (ALS), or develops end-stage renal disease after the 30-month coordination period.

You must enroll in Medicare Parts A and B when first eligible for primary Medicare benefits. You will be reimbursed monthly for the premium you pay.
If you are moving when you retire

Before you retire, notify your agency Health Benefits Administrator (HBA) of any address or phone number change. Check with your agency HBA to see if you need to change your health insurance option. You can also make certain enrollment changes, address changes or change your health insurance option through MyNYSHIP Self-Service at https://www.cs.ny.gov/mynship, a secure portion of the Employee Benefits Division's homepage, NYSHIP Online. However, you must register and receive an activation code before you will be able to make any changes.

After you retire, to report certain enrollment changes, address changes or to change your health insurance option, go to MyNYSHIP Self-Service at https://www.cs.ny.gov/mynship. Or, write to:

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

Be sure to sign your request and include your name, address and your Social Security number or Empire Plan identification number.

Note: If you or your dependents are Medicare-eligible, Medicare requires your residential street address to be on your enrollment file. NYSHIP can accept a post office box as a general mailing address for NYSHIP material, but you must also provide the street address of your permanent residence for enrollment in Empire Plan Medicare Rx or a Medicare Advantage HMO.

Resources

Talk to your agency Health Benefits Administrator. After you retire, the Employee Benefits Division will serve as your agency Health Benefits Administrator. To speak to a representative, call 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands) regular business days between 9 a.m. and 4 p.m. Eastern time. Be prepared to give your name, address, Social Security number and date of birth.

Medicare, which is administered by the Social Security Administration, can be reached at 1-800-MEDICARE (1-800-633-4227), or at the Medicare web site at www.medicare.gov for medical benefits and claims information. Call Social Security at 1-800-772-1213 to enroll in Medicare.

The Department of Civil Service web site, https://www.cs.ny.gov, has current benefit information. Click on Benefit Programs, then NYSHIP Online.

The NYSHIP General Information Book and Empire Plan Certificate for Retirees, Vestees, Dependent Survivors and Enrollees covered under Preferred List Provisions provides details on NYSHIP and coordination of benefits with Medicare.

The NYSHIP General Information Book for Retirees, Vestees, Dependent Survivors and Enrollees covered under Preferred List Provisions and enrolled in NYSHIP-approved Health Maintenance Organizations and your HMO contract explain plan coverage.

The Planning for Retirement DVD is available from your agency Health Benefits Administrator.

The Planning Your Successful Retirement videos provide highlights of key information for New York State executive branch employees who are planning to retire. The videos are posted on the Governor’s Office of Employee Relations (GOER) Work-Life Services web site at www.worklife.ny.gov/preretirement/videos/index.html.

Welcome to EBD helps you stay in touch with the Employee Benefits Division after you retire.

Retiree Health Insurance Choices describes all NYSHIP options.

NYSHIP Rates and Information for New York State Retirees lists the monthly premiums for NYSHIP health insurance coverage.

On the Road with The Empire Plan is a handy guide to your Empire Plan benefits when traveling.

Back to Work for New York State is for State retirees who return to work for New York State and want to understand their health insurance status.

The Medicare & NYSHIP booklet and companion video explain how NYSHIP and Medicare work together to provide health benefits.
After you retire, the Employee Benefits Division (EBD) will serve as your personnel office to answer your health insurance questions and make enrollment changes. EBD works to keep you informed. However, you are responsible for reading and keeping track of the information we send to you.

**Will I be told of changes and receive news about my health insurance?**

NYSHIP publications such as *Empire Plan Reports* or *NYSHIP Health Maintenance Organizations Reports* as well as other important benefit information is mailed directly to retiree homes. Important certificate amendments and changes are often contained in these reports. EBD also mails enrollees option transfer materials including premium rates and *Health Insurance Choices* (to change your health insurance plan), the retiree benefit statement and other special announcements.

Although EBD mails option transfer materials in the fall when the next year’s premium rates are announced, retirees can change options at anytime, as long as it is only once during a 12-month period.

**To receive NYSHIP mailings, be sure we have your current address and notify EBD of any changes that affect your enrollment records.**

EBD also posts employee benefit information, announcements, meetings and option transfer details on our NYSHIP Online web site at https://www.cs.ny.gov. Click on Benefit Programs, then NYSHIP Online.

**How does EBD protect my privacy?**

The Employee Benefits Division safeguards your personal health information. The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) requirements affect every aspect of the New York State Health Insurance Program.

If, after you retire, someone contacts us on your behalf, we will require additional information before releasing your protected health information. You will have to submit a signed authorization form, or be on the line to provide verbal permission to speak with the caller, before we can release any information.

HIPAA details and the Division’s authorization form are available on the New York State Department of Civil Service web site at https://www.cs.ny.gov. Click on Benefit Programs then NYSHIP Online. At the bottom of the screen, choose HIPAA Privacy Information.

If you have any questions or concerns, please call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).
• COBRA (Continuation of Coverage)
The federal Consolidated Omnibus Budget Reconciliation Act, which entitles an individual or covered dependents to continue, for a limited period of time, certain benefits at group rates when coverage would otherwise end.

• dependent survivor
Your dependents enrolled in NYSHIP at the time of your death become your dependent survivors.

• Dual Annuitant Sick Leave Option
This option allows your dependent survivors to use your sick leave credit toward their NYSHIP premium. If you want this option, you must choose it before your retirement date. Your election reduces your sick leave credit by 30 percent.

• Empire Plan Medicare Rx
A Medicare Part D Prescription Drug Plan with expanded coverage designed especially for NYSHIP.

• Employee Benefits Division (EBD)
The Employee Benefits Division, New York State Department of Civil Service, administers the New York State Health Insurance Program (NYSHIP). Call 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands) for NYSHIP information.

• fee-for-service
A method of billing for health care services. A provider charges a fee each time you receive a service. The Empire Plan is a fee-for-service plan.

• Health Maintenance Organization (HMO)
A managed care delivery system organized to deliver health care services in a geographic area. An HMO provides a predetermined set of benefits through a network of selected physicians, laboratories and hospitals for a prepaid premium. Except for emergency services, you and your enrolled dependents may have coverage for services received only from your HMO’s network.

• HIPAA
Under the Health Insurance Portability and Accountability Act of 1996, health plans such as The Empire Plan are required to protect the access to protected health information as well as the confidentiality of this information.

• IRMAA
Medicare enrollees with a modified adjusted gross income (MAGI) in excess of specified amounts are subject to an Income-Related Monthly Adjustment Amount (IRMAA) to be paid in addition to the base cost of Medicare Part B.

• MAGI
Modified adjusted gross income (MAGI) is the total of your adjusted gross income (income from taxable sources less tax deductions) and your tax-exempt income.

• Medicare
A federal health insurance program that covers certain people who are age 65 or older, disabled persons under 65 or those who have end-stage renal disease (permanent kidney failure). Medicare is directed by the federal Centers for Medicare & Medicaid Services (CMS) and administered by the Social Security Administration.

• Medicare Advantage plan
A health plan, such as a Medicare managed care plan or fee-for-service plan offered by a private company and approved by Medicare. The Medicare Advantage plan agrees to accept a fixed monthly payment for each Medicare enrollee. In exchange, the plan provides or pays for medical care needed by the enrollee. If you join a Medicare Advantage plan, you are replacing your original Medicare coverage (Parts A and B) with benefits offered by that plan. These benefits are set in accordance with Medicare’s guidelines for benefits offered under a Medicare Advantage plan. Most Medicare Advantage plans include Medicare Part D drug coverage. The benefits under these HMOs are set in accordance with Medicare’s guidelines for a Medicare Advantage plan.
• **Medicare reimbursement**
  Social Security deducts the Medicare Part B from your monthly Social Security check or bills you for Medicare Part B. New York State reimburses you for the Part B premium base amount. This does not include late enrollment penalties.

• **New York State Health Insurance Program (NYSHIP)**
  NYSHIP covers over 1.2 million public employees, retirees and their dependents. It is one of the largest group health insurance programs in the country. The Program provides health care benefits through The Empire Plan and NYSHIP-approved HMOs.

• **option**
  A health insurance plan offered through NYSHIP. Options include The Empire Plan and NYSHIP-approved HMOs within specific geographic areas. The Opt-out Program is also considered a NYSHIP option for eligible employee groups.

• **Participating Agency**
  A city, town, municipality or school district in New York State that participates in NYSHIP.

• **Participating Employer**
  A government agency in New York State such as the Thruway Authority or Metropolitan Transportation Authority that is maintained and financed from special administrative funds and participates in NYSHIP.

• **pension eligible**
  Entitled to collect a pension from a publicly administered retirement system such as the New York State and Local Employees’ Retirement System, the New York State Teachers’ Retirement System or the New York State and Local Police and Fire Retirement System.

• **plan primary/Medicare-primary**
  A health plan is primary when it is responsible for paying health benefits before any other group health coverage. Medicare becomes primary to NYSHIP (if you are not actively employed by New York State) when you turn 65, become disabled and are receiving Social Security Disability Insurance (SSDI) for 24 months or receiving SSDI due to amyotrophic lateral sclerosis (ALS) or have end-stage renal disease and have completed the 30-month coordination period. Read NYSHIP plan documents for details.

• **retiree**
  A person who has been enrolled in NYSHIP as an employee and whose health coverage continues after the end of active service under NYSHIP retiree eligibility requirements. An employee must be covered by NYSHIP as an enrollee or dependent on the date of retirement for NYSHIP coverage to continue.

• **sick leave credit**
  The monthly actuarial value of your unused sick leave calculated at the time you retire, which is then applied as a credit toward your share of the cost of your NYSHIP premium.

• **vestee**
  A person who (1) has withdrawn from State service; (2) is vested as a member of a retirement system administered by the State or one of its political subdivisions; (3) has met the minimum service requirement established by the State for continuing health insurance in retirement; (4) is not pension eligible. If you are a member of an Optional Retirement Program such as TIAA-CREF, you must satisfy the 10-year service requirement with New York State that applies to enrollees in a State-administered retirement system.
If You Need to Call or Write

All NYSHIP Retirees

Employee Benefits Division
518-457-5754 or
1-800-833-4344
(U.S., Canada, Puerto Rico, Virgin Islands)
New York State Department of Civil Service
Albany, NY 12239
https://www.cs.ny.gov

Social Security
1-800-772-1213
TTY 1-800-325-0778
Call to enroll in Medicare. Under NYSHIP rules, you/your dependents must be enrolled in Medicare Parts A and B as soon as you/your dependents become eligible for primary coverage under Medicare.
www.ssa.gov

Medicare
1-800-MEDICARE (633-4227)
TTY 1-877-486-2048
Call for Medicare benefits and claims information.
www.medicare.gov

Retirement Systems
Call about retirement checks and retirement system benefits.

NYS and Local Employees’ Retirement System
518-474-7736 (Albany area)
1-866-805-0990
www.osc.state.ny.us

NYS Teachers’ Retirement System
1-800-782-0289 (Recorded information) or
518-447-2666 (Albany area)
1-800-356-3128
www.nystrs.org

TIAA-CREF
1-800-842-2733
212-490-9000 (Collect outside U.S.)
www.tiaa-cref.org

NYS and Local Police and Fire Retirement System
518-474-7736 (Albany area)
1-866-805-0990
www.osc.state.ny.us

Empire Plan Enrollees

The Empire Plan
1-877-7-NYSHIP (1-877-769-7447)
For enrollee services, precertification and provider relations.
https://www.cs.ny.gov

Medical/Surgical Program
UnitedHealthcare
TTY 1-888-697-9054

Hospital Program
Empire BlueCross BlueShield
TTY 1-800-241-6894

Prescription Drug Program
CVS Caremark
TTY 1-800-863-5488

Empire Plan Medicare Rx
1-877-7-NYSHIP (1-877-769-7447)
TTY 1-866-236-1069
For Medicare-primary enrollees and dependents only.
http://www.cs.ny.gov/empireplanmedicarerx

Mental Health and Substance Abuse Program
ValueOptions
TTY 1-855-643-1476
HMO Enrollees

If you are in a NYSHIP HMO, please refer to your HMO materials for current phone numbers and addresses. Or see our web site, https://www.cs.ny.gov. From the homepage, click on Benefit Programs and follow the prompts to access NYSHIP Online. Then choose Health Benefits & Option Transfer. Select Rates and Health Plan Choices. Scroll to Choices for 2014 and locate Plans by County.

Aetna

Customer Service
1-800-323-9930
TTY – 1-800-654-5984
99 Park Avenue, New York, NY 10016
www.aetna.com

Blue Choice

Member Services
585-454-4810 or 1-800-462-0108
TTY – 1-877-398-2282
165 Court Street, Rochester, NY 14647
www.excellusbcbs.com

BlueCross BlueShield of Western New York

For information, call the nearest Member Services Office:
Buffalo
716-887-8840 or 1-877-576-6440
Olean
716-376-6000 or 1-800-887-8130
Jamestown
716-484-1188 or 1-800-944-2880
TTY – 1-888-249-2583
PO Box 80, Buffalo, NY 14240-0080
www.bcbswny.com

Capital District Physicians’ Health Plan, Inc. (CDPHP)

Member Services
518-641-3700 or 1-800-777-2273
TTY – 1-877-261-1164
500 Patroon Creek Boulevard, Albany, NY 12206-1057
www.cdphp.com

Empire BlueCross BlueShield HMO

1-800-453-0113
TTY – 1-800-241-6894
11 Corporate Woods Boulevard
PO Box 11800, Albany, NY 12211-0800
www.empireblue.com

GHI HMO

1-877-244-4466
TTY – 1-888-447-4833
55 Water Street, New York, NY 10041 or
PO Box 2844, New York, NY 10016
www.emblemhealth.com

HIP Health Plan of New York

1-877-861-0175
TTY – 1-888-447-4833
55 Water Street, New York, NY 10041
www.emblemhealth.com

HMO Blue

Excellus BlueCross BlueShield, Central New York Region
1-800-447-6269
TTY – 1-877-398-2275
333 Butternut Drive, Syracuse, NY 13214-1803
www.excellusbcbs.com

Excellus BlueCross BlueShield, Utica Region
1-800-722-7884
TTY – 1-877-398-2275
12 Rhoads Drive, Utica, NY 13502
www.excellusbcbs.com

Independent Health

Customer Service
1-800-501-3439
TTY – 716-631-3108
511 Farber Lakes Drive, Buffalo, NY 14221
www.independenthealth.com

MVP Health Care

Customer Service
1-888-MVP-MBRS (687-6277)
TTY – 1-800-662-1220
PO Box 2207, 625 State Street, Schenectady, NY 12301-2207
www.mvphealthcare.com
You can enjoy a happy retirement if you plan ahead. With advance planning and informed decisions, you will create a successful and satisfying life.

This booklet is designed to help you with your retirement planning. Keep it as a handy reference and resource in your retirement.

**Good luck!**

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.ny.gov). Check the web site 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 the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

This document is for information purposes only and does not contain a complete description of your benefits or imply Empire Plan coverage. Read your *Empire Plan Certificate* and *Amendments* and *Empire Plan Reports* for complete information.