

EMPIRE

P L REPORT A N

JANUARY 2007

NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP)
FOR NEW YORK STATE AND PARTICIPATING EMPLOYER
RETIREES, VESTEES, DEPENDENT SURVIVORS
And ENROLLEES covered under PREFERRED LIST PROVISIONS
And for their enrolled Dependents
and for COBRA Enrollees with their Empire Plan Benefits



**Read this Report
for important information
about benefit changes.**

The Empire Plan Benefit Changes Effective January 1, 2007

The Empire Plan Hospital Benefits Program

\$60 Copayment for Emergency Care
Beginning January 1, 2007, your copayment for emergency care in a hospital emergency room is \$60. The \$60 copayment covers use of the facility for emergency care and services of the attending emergency room physician and providers who administer or interpret radiological exams, laboratory tests, electrocardiogram and pathology services.

You will not have to pay the \$60 copayment if you are treated in the emergency room and then admitted at that time as an inpatient.

\$18 Copayment for Physical Therapy
Beginning January 1, 2007, your copayment is \$18 for each visit to the outpatient department of a network hospital or hospital extension clinic for physical therapy when covered under the Hospital Benefits Program. Please see your *Empire Plan Certificate* for more information.

SAVE THIS REPORT

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- NYSHIP General Information Book and Empire Plan Certificate

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SPECIAL SECTION

The Empire Plan Copayment Changes Effective January 1, 2007

Benefits	Copayment
Hospital Benefits Program	
Emergency Room	\$60
Physical Therapy in Network Hospital Outpatient Department	\$18
Participating Provider Program	
Office Visit/Office Surgery/Radiology/Diagnostic Laboratory Tests	\$18
Managed Physical Network Program Services by MPN Providers	\$18
Mental Health and Substance Abuse Program	
Outpatient Mental Health and Substance Abuse Visit with ValueOptions Network Providers	\$18
Hospital Emergency Room	\$60

Benefit Changes continued on page 2

The Empire Plan Medical/Surgical Benefits Program

\$18 Copayment

Beginning January 1, 2007, you pay an \$18 copayment for services by Empire Plan participating providers that are subject to copayments. Such services include office visits, office surgery, radiology services, diagnostic laboratory services, cardiac rehabilitation center visits, urgent care center visits and contraceptive drugs and devices dispensed in a doctor's office. Your copayment for services by Managed Physical Network (MPN) providers is also \$18 as of January 1, 2007.

Basic Medical

Annual Deductible: \$335

Coinsurance Maximum: \$1,610

For calendar year 2007, The Empire Plan Basic Medical Program annual deductible for medical services performed and supplies prescribed by non-participating providers is \$335 for you, \$335 for your enrolled spouse/domestic partner and \$335 for all covered dependent children combined.

You must meet the deductible before United HealthCare can pay Basic Medical benefits for your claims. The Basic Medical annual deductible cannot be combined with the Managed Physical Medicine Program annual deductible for non-network services or with the Mental Health and Substance Abuse Program annual deductibles for non-network services.

The annual coinsurance maximum (out-of-pocket expenses) under the

Basic Medical Program is \$1,610 in 2007. After you and your covered dependents, combined, reach the coinsurance maximum, United HealthCare will reimburse you 100 percent of the reasonable and customary amount, or 100 percent of the billed amount, whichever is less, for covered services. You will still be responsible for any charges above the reasonable and customary amount and for any penalties under the benefits management programs.

These changes are due to an increase in the Consumer Price Index.

HPV Immunization

The human papilloma virus (HPV) vaccine for the prevention of cervical cancer is a covered pediatric immunization for females up to age 19 years under The Empire Plan Participating Provider and Basic Medical Programs. The HPV vaccine is a covered immunization for females 19 through 26 years under the Participating Provider Program. This benefit was effective June 29, 2006.

The Empire Plan Mental Health and Substance Abuse Program

\$18 Copayment for Outpatient Mental Health and Substance Abuse Treatment

Beginning January 1, 2007, you pay an \$18 copayment for each outpatient visit to a ValueOptions network provider for mental health treatment. Also beginning January 1, 2007, the copayment for an outpatient substance abuse visit is \$18. To qualify for benefits, all covered services must be certified as medically necessary by ValueOptions.

\$60 Copayment for Emergency Care for Mental Health/Substance Abuse Treatment

Effective January 1, 2007, your copayment for emergency care in a hospital emergency room is \$60. You will not have to pay this \$60 copayment if you are treated in the emergency room and then admitted at that time as an inpatient. When you receive medically necessary covered services from a non-network provider in a certified emergency, the Program will provide network coverage until you can be transferred to a network facility.

Notice: 2007 Preferred Drug List Updates

Please note the following updates to the 2007 Empire Plan Preferred Drug List (PDL) that was included with your January 1, 2007 *Empire Plan At A Glance*. The changes are effective on January 1, 2007 except as noted.

Plan B*, Nitro-Bid and Viokase (formerly listed as preferred brand-name drugs) are non-preferred brand-name drugs with the highest level of copayment.

Locoid (formerly listed as a preferred brand-name drug) is a generic drug with the lowest level of copayment.

Effective April 1, 2007, Ketek will be a non-preferred brand-name drug rather than a preferred brand-name drug.

Be sure to check our web site (www.cs.state.ny.us) for the most current version of the PDL. Choose Benefit Programs on the home page, then NYSHIP Online and choose your group, if prompted. Then select Health Benefits & Option Transfer to find the PDL listed alphabetically and in therapeutic class order.

If you have questions regarding the above information, or have specific questions about your prescriptions, coverage or copayments, please call The Empire Plan Prescription Drug Program at 1-877-7-NYSHIP (1-877-769-7447).

*for enrollees and covered dependents under 18 years of age

Depression Management Program

The Empire Plan now offers the Depression Management Program. If you or your dependents have received recent treatment for depression, you may be invited to participate in this program. Participation is voluntary, free of charge and confidential. If you agree to participate, you will receive information to help you understand your condition. You will also be offered educational materials and other services.

If you have questions about depression or if you or a dependent would like to see a provider, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose ValueOptions.

The Depression Management Program began October 1, 2006 and is available to Empire Plan enrollees through ValueOptions.

Medicare

Medicare Parts A and B— You Must Enroll

NYSHIP requires you and your covered dependents to be enrolled in Medicare Parts A and B when first eligible for primary Medicare coverage under NYSHIP, even if you also have coverage through another employer's group plan.

You must be enrolled in Medicare Parts A and B and entitled to receive Medicare benefits by the first day of the month in which you reach age 65 (if your birthday is the first of the month, by the first day of the month before), or before age 65 if you are disabled, or have end-stage renal disease. (Call the Employee Benefits Division to ask when Medicare becomes primary.)

As soon as you become eligible for Medicare, your NYSHIP coverage will pay secondary to Medicare Parts A and B, even if you fail to enroll in Medicare or are in a waiting period for Medicare to go into effect. Plan benefits may change.

If you and your dependents are not enrolled in Medicare Parts A and B when you are first eligible to enroll, you will be responsible for the full cost of medical services that Medicare would have covered.

How to Enroll in Medicare

To enroll in Medicare, visit your local Social Security office or call Social Security at 1-800-772-1213. Information about applying for Medicare is also available on the web at www.ssa.gov. Teletypewriter (TTY) is available for callers using a TTY device because of a hearing or speech disability: 1-800-325-0778.

If you do not enroll in Medicare when you are first eligible, you must enroll during the next General Enrollment Period between January 1 and March 31. Your coverage will begin July 1 of the same year. You will pay more for Medicare as a penalty for late enrollment.

Medicare Part B Premium Reimbursement

The base cost for the Medicare Part B premium is \$93.50 per month in 2007, a 5.6 percent increase from \$88.50 per month in 2006.

If you or your dependent is Medicare primary, NYSHIP reimburses you for the base cost of the Part B premium unless you receive reimbursement from another source. The same automatic reimbursement applies to spouses who become 65 years old after January 1, 2000.

The reimbursement is not automatic for spouses who became 65 years old before January 1, 2000. The reimbursement also is not automatic for your domestic partner or for any enrollee or covered dependent who is under age 65 and eligible for Medicare due to a disability, end-stage renal disease, or amyotrophic lateral sclerosis (ALS). You must notify the Employee Benefits Division and send a photocopy of the Medicare card to begin the reimbursement.

Medicare Part B Premium Surcharge

Due to a 2003 Federal law, a surcharge for higher-income people is added to the Medicare Part B base premium effective January 1, 2007. Individuals who earn more than \$80,000 and married couples who earn more than \$160,000 are subject to this additional cost. The Social Security Administration computes the surcharge for 2007 with income data from 2005 Internal Revenue Service tax returns.

Please note that NYSHIP does not reimburse the Medicare Part B premium surcharge. NYSHIP reimburses only the Medicare Part B base premium, as explained above.

Medicare Part D Prescription Drug Coverage

The prescription drug benefits provided under your NYSHIP coverage, in most cases, give you better coverage and lower out-of-pocket costs than the coverage under a Medicare prescription drug plan. As a NYSHIP enrollee or covered dependent, you should consider joining a Medicare prescription drug plan only if

you are eligible for extra help under the Medicare Part D Low Income Subsidy. If you enroll in a Medicare prescription drug plan, your Empire Plan drug benefits will change.

If you have questions about Medicare Part D and NYSHIP coverage, please call the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

If You Enroll in a Medicare Part D Prescription Drug Plan

If you or a covered dependent is eligible for Medicare-primary coverage and have enrolled in a Medicare Part D prescription drug plan, you must use your Medicare Part D prescription drug program card first, not your Empire Plan Benefit Card. (*If you have prescription drug benefits through a union Employee Benefit Fund, contact the fund for information about Medicare Part D.*)

If you try to use your Empire Plan Benefit Card at a retail pharmacy, the pharmacist will be advised that you have alternate insurance, which is your Medicare Part D drug plan. Any out-of-pocket expenses not covered by your Medicare Part D plan, such as deductibles, copayments and charges for non-covered drugs, can be submitted to The Empire Plan for secondary coverage by using the Medicare Part D Secondary Claim Form.

The Empire Plan Prescription Drug Program mail service pharmacy does not accept Medicare Part D prescription drug plan coverage. Any prescription sent to the Caremark mail service pharmacy for a Medicare-primary Empire Plan enrollee or dependent who is also enrolled in a Medicare Part D drug plan will be rejected and returned.

The Medicare Part D Secondary Claim Form is available on the New York State Department of Civil Service web site, www.cs.state.ny.us. The form is also available by calling The Empire Plan Prescription Drug Program at 1-877-7-NYSHIP (1-877-769-7447). When you call, be sure to ask for the Medicare Part D claim form.

Choosing a Participating Provider

The Empire Plan is a unique program that allows you to receive medical/surgical care from participating providers or from non-participating providers. By choosing a participating provider, you receive covered services at little or no cost and you don't have to file a claim. For certain services, you must call before you receive services. Participating providers are providers who have an agreement in effect under The Empire Plan. They have agreed to bill United HealthCare and to accept your copayment, for services subject to a copayment, plus payment directly from the Plan as payment-in-full for covered services.

Participating Provider Program

The Empire Plan Participating Provider Program offers a network of over 175,000 physicians and other providers located throughout New York State and in many other states as well. You have the freedom to choose any participating provider without a referral. There is, however, no guarantee that a participating provider will always be available to you.

Providers in the network include: doctors, speech therapists, speech-language pathologists, audiologists, podiatrists, laboratories, ambulatory surgical centers, urgent care centers, freestanding cardiac rehabilitation centers and Centers of Excellence. Certified nurse midwives may also be available through participating doctors. Always ask your provider if he or she participates before you receive services. When you use a participating provider, you pay only the applicable copayment.

Ask for a Participating Provider

The Empire Plan does not require that a participating provider refer you to a participating laboratory, radiologist, specialist or center. It is your responsibility to request a participating provider for other services. Explain to your doctor that your out-of-pocket expenses are usually higher if you don't use a participating lab or if a non-participating radiologist reads your X-ray. Please be aware, too, that providers with multiple locations may not be Empire Plan participating providers in all locations.

It is your responsibility to determine whether a provider is an Empire Plan provider. Remember: in Arizona, Connecticut, Florida, New Jersey, North

Carolina and South Carolina, ask if the physician is part of United HealthCare's Options Preferred Provider Organization (PPO). In all other states including New York, and for providers other than physicians in these six states, ask if the provider participates in The Empire Plan.

Participating Provider Directory

We mailed the 2006 *Empire Plan Participating Provider Directory* to retired enrollees last September through October. If you did not receive your Directory, or if you need a Directory for a different address, call 1-877-7-NYSHIP (1-877-769-7447) toll free and choose United HealthCare.



Remember: Always ask if the provider participates in The Empire Plan for New York State government employees before you receive services.

Finding Participating Network Providers

To find an Empire Plan participating network provider, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447).

Also, you can find a list of providers on the New York State Department of Civil Service web site at www.cs.state.ny.us. Click on Benefit Programs and then on NYSHIP Online. Select your group if prompted, and then click on Find a Provider.

Basic Medical Benefits

If you use a non-participating provider, benefits for covered medical services are payable under the Basic Medical portion of the Plan, subject to deductible and coinsurance. (See your *Empire Plan Certificate* for details on the Basic Medical Program.)

Quest No Longer Participating Lab

Quest Diagnostics is no longer a participating provider of laboratory services for The Empire Plan Medical Program as of January 1, 2007.

Beginning January 1, 2007, Laboratory Corporation of America (LabCorp) is the only national participating provider of laboratory services for The Empire Plan Medical Program. In addition to LabCorp, other regional and local laboratory providers participate in The Empire Plan.

To find an Empire Plan participating lab, call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and choose United HealthCare, go to www.empireplanlablocator.com or go to the New York State Department of Civil Service web site, www.cs.state.ny.us. Click on Benefit Programs, then NYSHIP Online. Select your group if prompted, and then click on Find a Provider and then Laboratories.

The Empire Plan Carriers and Programs

To reach any of The Empire Plan carriers, call toll free **1-877-7-NYSHIP (1-877-769-7447)**.

The one number is your first step to Empire Plan information. Check the list below to know which carrier to select. When you call 1-877-7-NYSHIP, listen carefully to your choices and press or say your selection at any time during the message. Follow the instructions and you'll automatically be connected to the appropriate carrier.

The Empire Plan Hospital Benefits Program *Empire BlueCross BlueShield, New York State Service Center, P.O. Box 1407, Church Street Station, New York, NY 10008-1407. Web site: www.empireblue.com. Call for information regarding hospital and related services.*



Benefits Management Program for Pre-Admission Certification If The Empire Plan is your primary coverage, you must call Empire BlueCross BlueShield before a maternity or scheduled hospital admission, within 48 hours after an emergency or urgent hospital admission, and before admission or transfer to a skilled nursing facility (includes rehabilitation facilities).



Centers of Excellence for Transplants Program You must call Empire BlueCross BlueShield before a hospital admission for the following transplant surgeries: bone marrow, peripheral stem cell, cord blood stem cell, heart, heart-lung, kidney, liver, lung and simultaneous kidney-pancreas. Call for information about Centers of Excellence.

The Empire Plan Medical/Surgical Benefits Program *United HealthCare Insurance Company of New York, P.O. Box 1600, Kingston, NY 12402-1600. Web site: www.myuhc.com. Call for information on benefits under Participating Provider, Basic Medical Provider Discount and Basic Medical Programs, predetermination of benefits, claims and participating providers.*

Managed Physical Medicine Program/MPN Call United HealthCare for information on benefits and to find MPN network providers for chiropractic treatment and physical therapy. If you do not use MPN network providers, you will receive a significantly lower level of benefits.



Benefits Management Program for Prospective Procedure Review of MRI If The Empire Plan is your primary coverage, you must call United HealthCare before having an elective (scheduled) Magnetic Resonance Imaging (MRI).



Home Care Advocacy Program (HCAP) You must call United HealthCare to arrange for paid-in-full home care services, enteral formulas and/or durable medical equipment/supplies. If you do not follow HCAP requirements, you will receive a significantly lower level of benefits. You must also call United HealthCare for HCAP approval of an external mastectomy prosthesis costing \$1,000 or more.



Infertility Benefits You must call United HealthCare for prior authorization for the following Qualified Procedures, regardless of provider: Assisted Reproductive Technology (ART) procedures including in vitro fertilization and embryo placement, Gamete Intra-Fallopian Transfer (GIFT), Zygote Intra-Fallopian Transfer (ZIFT), Intracytoplasmic Sperm Injection (ICSI) for the treatment of male infertility, assisted hatching and microsurgical sperm aspiration and extraction procedures; sperm, egg and/or inseminated egg procurement and processing and banking of sperm and inseminated eggs. Call United HealthCare for information about infertility benefits and Centers of Excellence.



Centers of Excellence for Cancer Program You must call United HealthCare to participate in The Empire Plan Centers of Excellence for Cancer Program.

The Empire Plan Mental Health and Substance Abuse Program *ValueOptions (administrator for GHI), P.O. Box 778, Troy, NY 12181-0778. You must call ValueOptions before beginning any treatment for mental health*



or substance abuse, including alcoholism. If you do not follow ValueOptions requirements, you will receive a significantly lower level of benefits. In a life-threatening situation, go to the emergency room. Call within 48 hours of inpatient admission.

The Empire Plan Prescription Drug Program *Empire BlueCross BlueShield (jointly administered with Caremark). Appeals, grievances, prior authorization documentation, general correspondence: The Empire Plan Prescription Drug Program, P.O. Box 11826, Albany, NY 12211. Claim forms from retail pharmacies: The Empire Plan Prescription Drug Program, P.O. Box 52071, Phoenix, AZ 85072-2071. Mail Service Pharmacy: Caremark, P.O. Box 3223, Wilkes-Barre, PA 18773-3223. For the most current list of prior authorization drugs, call The Empire Plan or go to www.cs.state.ny.us.*

The Empire Plan NurseLineSM Call for health information and support, 24 hours a day, seven days a week. To listen to the Health Information Library, enter PIN number 335 and a four-digit topic code from The Empire Plan NurseLine brochure.

Teletypewriter (TTY) numbers for callers when using a TTY device because of a hearing or speech disability:

- Empire BlueCross BlueShield**..... **TTY only: 1-800-241-6894**
- United HealthCare**..... **TTY only: 1-888-697-9054**
- ValueOptions** **TTY only: 1-800-334-1897**
- The Empire Plan Prescription Drug Program**..... **TTY only: 1-800-863-5488**

Reminders

The Empire Plan At A Glance and Copayment Cards

We sent you the 2007 *Empire Plan At A Glance* along with 2007 Empire Plan Copayment Cards and the 2007 Empire Plan Preferred Drug List in a separate mailing earlier this year. *The Empire Plan At A Glance* offers a brief description of your Empire Plan benefits; the Copayment Cards provide a handy reference for coverage costs. If you need more cards, or another copy of the *At A Glance*, call the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

Rehabilitative Care in a Skilled Nursing Facility

If The Empire Plan is your primary* coverage, The Empire Plan provides skilled nursing facility benefits, which include physical, occupational and speech therapy. Benefits are subject to the requirements of The Empire Plan Benefits Management Program. See your *Empire Plan Certificate* for other requirements and covered services.

If Medicare is your primary* coverage, The Empire Plan does not provide any skilled nursing facility benefits, even short-term rehabilitative care. Medicare covers certain skilled care services in a skilled nursing facility for up to 100 days. For information, call Medicare at 1-800-MEDICARE (1-800-633-4227) or see Medicare's web site, www.medicare.gov.

The Empire Plan does cover certain rehabilitative care outside a skilled nursing facility whether The Empire Plan is your primary coverage or not. This care includes physical therapy in a hospital's outpatient department, speech therapy from a participating provider and cardiac rehabilitation. Your *Empire Plan Certificate* has details.

* Pays health benefits before any other group health insurance

Dependent Survivor Coverage

Retirees of Participating Employers: Ask your agency Health Benefits Administrator if your agency offers dependent survivor coverage.

NYSHIP provides benefits for enrolled dependent survivors of employees, retirees, vestees and enrollees covered under Preferred List provisions. Survivors begin the process by sending a copy of the death certificate to the New York State Employees' Retirement System or to the Employee Benefits Division (if not a member of a retirement system administered by New York State). Your *NYSHIP General Information Book* and *Empire Plan Reports* have detailed information about eligibility and cost. Please note that if your spouse remarries or your domestic partner acquires another domestic partner, eligibility for continued coverage ends.

Health Insurance Fraud

Health insurance fraud is costly and illegal. The Employee Benefits Division will investigate any cases of suspected fraud and/or abuse of NYSHIP benefits. Report lost or stolen benefit cards. Notify the Employee Benefits Division whenever your or your dependents' eligibility changes. Your *NYSHIP General Information Book* has information on your responsibilities under NYSHIP.

Protect Your Empire Plan Benefits

1. Never sign blank insurance claim forms.
2. Ask your medical providers in advance what they will charge. Be sure you understand what you will be expected to pay out of pocket.
3. Carefully review your insurer's explanation of benefits statement (EOB). Call your insurer and provider if you have questions.
4. Do not do business with door-to-door or telephone salespeople who tell you their service or medical equipment is free.

5. Give your insurance/Medicare identification number only to those who have provided you with medical services.
6. Keep accurate records of all health care appointments.

If you're aware of hospital or provider fraud or abuse, call Empire BlueCross BlueShield at 1-800-IC-FRAUD (1-800-423-7283) or call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and choose United HealthCare.

We've Moved

The New York State Department of Civil Service Employee Benefits Division moved from The State Campus to downtown Albany in July 2006. We are now located in the Alfred E. Smith State Office Building, 80 South Swan Street, corner of Washington Avenue just across from the State Capitol.

Our phone numbers have not changed. Retirees who live in the Albany area can call the Division at 518-457-5754; retirees who live elsewhere in the U.S., Canada, Puerto Rico or the Virgin Islands can use the toll-free number, 1-800-833-4344.

Please phone ahead if you are coming to our offices to meet with Employee Benefits Division representatives to discuss your health insurance benefits. That way we can plan for your arrival, offer directions and give you parking information. Our downtown Albany location does not have a free parking lot.

Please remember to bring photo identification, such as a driver's license, which is required for entry to the building. In addition, bring any documents that may assist us in addressing your questions and concerns.

NYSHIP

Online www.cs.state.ny.us

NYSHIP Online has been redesigned to provide you with more targeted information about your NYSHIP benefits. Visit the New York State Department of Civil Service web site at www.cs.state.ny.us and click on Benefit Programs, then NYSHIP Online. Be sure to choose the benefit section for Retirees.

If you don't have access to the internet, your local library may offer computers for your use.

Annual Notice of Mastectomy and Reconstructive Surgery Benefit

The Empire Plan covers inpatient hospital care for lymph node dissection, lumpectomy and mastectomy for treatment of breast cancer for as long as the physician and patient determine hospitalization is medically necessary. The Plan covers all stages of reconstructive breast surgery following mastectomy,

including surgery of the other breast to produce a symmetrical appearance. The Plan also covers treatment for complications of mastectomy, including lymphedema. Prostheses and mastectomy bras are covered. Call United HealthCare toll free at 1-877-7-NYSHIP (1-877-769-7447)

if you have questions about your coverage for implants, breast forms or other prostheses related to breast cancer treatment.

Empire Plan Benefits Management Program requirements apply. See your *Empire Plan Certificate* and *Empire Plan Reports*.

State of New York
Department of Civil Service
Employee Benefits Division
Albany, New York 12239
www.cs.state.ny.us

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

Retiree Empire Plan Report – January 2007

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 (www.cs.state.ny.us). Click on Benefit Programs, then NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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