

# **NYSHIP HMO Report**

**November 2020 • Participating Employers** 

New York State Health Insurance Program (NYSHIP) for Active Employees, Retirees, Vestees and Dependent Survivors enrolled in a NYSHIP Health Maintenance Organization (HMO) through Participating Employers (PE), their enrolled Dependents and for COBRA Enrollees with their NYSHIP benefits and Young Adult Option Enrollees

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### What's New

This *NYSHIP HMO Report* details the changes to your coverage under the New York State Health Insurance Program (NYSHIP).

This Report includes information about:

- Domestic Partner Form Update (Page 3)
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## **COVID-19 Information**

## **COVID-19 Testing and Mental Health Services for Essential Workers**

COVID-19 diagnostic testing is available to all individuals who reside or work in New York State. For up-to-date information on COVID-19, including guidance on testing and how to find a test site near you, visit the NYS Department of Health's website at https://coronavirus.health.ny.gov/home. You can also call the NYS COVID-19 Hotline at 1-888-364-3065 for questions regarding eligibility and testing.

In compliance with NYS and federal mandates, COVID-19 testing is available at no cost to you through your HMO, provided you follow plan requirements. Check with your HMO and your primary care physician (PCP) to confirm whether your plan requires your provider to authorize screening or diagnostic COVID-19 testing and if testing and other services related to diagnosing COVID-19 will be paid in full.

Recognizing that the emotional and psychological well-being of essential workers is critically important in the continuing fight against COVID-19, the NYS Department of Financial Services (DFS) promulgated an emergency regulation to address the mental health needs of this population. In accordance with these requirements, all out-of-pocket costs, including copayments, deductibles and coinsurance, are waived for in-network mental health services for New York State's frontline essential workers.



**Note:** These mandates are subject to expiration dependent upon the authorizing law or regulation.

For more information on mental health services for essential workers and to confirm the waiver is still in effect, see the DFS' guidance at www.dfs.ny.gov/industry\_guidance/circular\_letters/cl2020\_10. If you have questions about this benefit, please contact your HMO.

### **NYSHIP Changes**

#### **Domestic Partner Form**

The Employee Benefits Division (EBD) recently updated the *NYSHIP Domestic Partner Enrollment Application* (PS-425) form with new instructions and a checklist of acceptable proofs. This form has been updated to more clearly explain the application process and requirements for adding an enrollee's domestic partner to coverage.

Ask your Health Benefits Administrator (HBA) if your employer offers coverage to domestic partners. For retirees, contact the EBD to find out if your former employer offers coverage to domestic partners. If your employer (or former employer for retirees) does not offer coverage to domestic partners, your domestic partner is not eligible to be covered as your dependent under NYSHIP.

To enroll a domestic partner, complete and return the *Domestic Partner Enrollment Application* (PS-425) form and submit the applicable proofs. If you previously had a domestic partner, you will be subject to a one-year waiting period from the termination date of your last domestic partner's coverage before a new one can be enrolled in NYSHIP.

Under Internal Revenue Service (IRS) rules, the fair market value cost of coverage for a domestic partner may be taxable. This amount, referred to as imputed income, is considered by the IRS to be additional income for the enrollee. Check with your HBA (EBD for retirees) to find out how imputed income is reported and for an approximation of the fair market value for domestic partner coverage. You may also ask a tax consultant how enrolling a domestic partner will affect your taxes.

**Note:** If your domestic partner's status as a federally qualified dependent changes (they newly qualify or no longer qualify), you must notify your HBA (EBD for retirees) and submit a signed and completed Dependent Tax Affidavit for Domestic Partner Enrollment in NYSHIP (PS-425.3) form.



NYSHIP dependent coverage for your domestic partner will end on the date your domestic partnership ends or when the domestic partnership requirements are no longer met (when you are no longer financially interdependent or no longer live together). You must complete and submit a *Termination of Domestic Partnership for NYSHIP* (PS-425.4) form within 30 days of the date the relationship ends or can no longer be documented.

To access the domestic partner forms, visit www.cs.ny.gov/employee-benefits. Choose PE and HMO Enrollee and from the NYSHIP Online homepage, select Forms. If you need assistance selecting or completing a form, contact your HBA. For retirees, call EBD at 518-457-5754 or 1-800-833-4344 Monday through Friday from 9 a.m. to 4 p.m. Eastern time.



### **Updated Forms**

The Employee Benefits Division recently revised, renamed and rebranded many of its forms to simplify them and make them more user friendly. The updated forms are as follows:

- NYSHIP Domestic Partner Application (PS-425)
   Updated October 2019 (See Domestic Partner Coverage on page 3 for details.)
- NYSHIP Statement of Dependence for "Other" Children (PS-457) – Updated April 2020 (formerly called Statement of Dependence for Participation in the Health Insurance Program)
- NYSHIP Sick Leave Credit Option Election Form (PS-405) – Updated June 2020 (formerly called Dual Annuitant Sick Leave Credit Election)\*
- NYSHIP Health Insurance Deferral Election Form (PS-406.2) – Updated June 2020 (formerly called Enrollment Form for Employees Eligible to Defer Health Insurance Coverage and Sick Leave Credit Calculation Indefinitely in Retirement)
- NYSHIP Sick Leave Credit Preservation Form (PS-410) – Updated June 2020 (formerly called State Service Sick Leave Credit Preservation For New York State Health Insurance Program)\*
- NYSHIP Statement of Disability for Dependents (PS-451) – Updated September 2020 (formerly called Statement of Disability Dependent 19 Years of Age or Older)
- \* Not all Participating Employers offer sick leave credit. Please contact your Health Benefits Administrator for eligibility.

 Health Insurance Transaction Form for NYS & PE Employees (PS-404) – Updated September 2020

Please make sure you are using the most current forms. You can access all forms at www.cs.ny.gov/employee-benefits. Choose PE and HMO Enrollee, if prompted. From the NYSHIP Online homepage, select Forms and scroll to the desired one. See your *General Information Book* for information on when you may be required to complete and submit a form along with any required proofs. If you need assistance selecting or completing a form, contact your Health Benefits Administrator. For retirees, call the Employee Benefits Division for assistance at 518-457-5754 or 1-800-833-4344 Monday through Friday from 9 a.m. to 4 p.m. Eastern time.

### **Enrolling "Other" Children**

The NYSHIP Statement of Dependence for "Other" Children (PS-457) form has recently been updated to clarify eligibility and document requirements to enroll an "other" child (a child who is not your natural-born child, an adopted child, a stepchild or a child of a domestic partner) in NYSHIP coverage. Note: Contact your Health Benefits Administrator (the Employee Benefits Division for retirees) to see if your employer offers coverage to domestic partners. NYSHIP allows enrollees to cover eligible dependents by enrolling in Family coverage or adding eligible dependents to existing Family coverage.

You may cover "other" children who live with you and are financially dependent on you. The child must reside permanently in your home and receive more than 50 percent of financial support from you before they are age 19 in order to qualify. Assumption of legal responsibility for the child in place of a parent is no longer listed as a requirement.

To enroll an "other" child, you must file form PS-457 (and file again every two years after enrollment), verify eligibility and provide documentation. You also will need to provide a copy of the dependent's birth certificate along with a completed *Health Insurance Transaction Form for NYS & PE Employees* (PS-404).

You must provide documentation to certify that you provide more than 50 percent of financial support if the "other" child is under age 19. For information on acceptable forms of proof, see form PS-457.

#### "Other" Children Age 19 or Older

If enrolling an "other" child age 19 or older, you are now required to submit proof of residence, rather than proof of financial support. However, the eligibility requirements have not changed.

To recertify that a dependent age 19 or older is still an "other" child, you will need to submit form PS-457, provide a copy of the dependent's birth certificate, provide proof of the dependent's residence and submit form PS-404.

You can access both forms at www.cs.ny.gov/ employee-benefits. Choose PE and HMO Enrollee, if prompted. From the NYSHIP Online homepage, select Forms and scroll to the appropriate one.

## New NYSHIP General Information Book

The revised and newly updated 2020 NYSHIP *General Information Book (GIB)* for Participating Employers was mailed to enrollee homes in mid-June. This updated *GIB* applies to active employees and retirees, vestees and dependent survivors enrolled in NYSHIP through participating employers. It replaced the old *GIB* dated 2016, which should have been recycled once you received your new copy.

The *GIB* explains your rights and responsibilities as an enrollee in NYSHIP, including rules and requirements that affect eligibility, enrollment and costs. It also details how Medicare eligibility affects your coverage, as well as your rights for continuation coverage under COBRA. Be sure to review the new version and keep with your health insurance records for reference.

You can access your *GIB* online at www.cs.ny.gov/ employee-benefits. (Retirees select Click here for NYSHIP Online for RETIREES.) Choose PE and HMO Enrollee, if prompted. From the NYSHIP Online homepage, select Health Benefits & Option Transfer and then NYSHIP General Information Book.

## **Keep Up with Vaccinations and Preventive Care Visits**

The COVID-19 pandemic has changed how many of us go about our daily lives. But even during uncertain times, it is important that you do not postpone yearly preventive care visits and vaccinations.

#### Children

Keeping children up to date on vaccinations protects them from preventable diseases like measles, mumps and polio along with seasonal diseases like influenza (flu). An annual wellness exam can help ensure your child receives the correct vaccinations. The exam also allows a doctor to assess your child's growth and development and detect any health issues early.

#### **Adults**

Scheduling an annual wellness exam can help you avoid potentially serious health conditions, such as high blood pressure and diabetes, and obtain early diagnosis and treatment. Your doctor can also advise which cancer screenings, such as a mammogram and/or colonoscopy, you should schedule and update your influenza and herpes zoster (shingles) vaccinations, if needed.

#### **Coverage for Preventive Care Services**

When you or your covered dependent meets established criteria (such as age, gender and risk factors) for certain preventive care services, those services are covered by your plan at no cost from in-network providers. Contact your HMO or speak with your primary care physician about personalized recommendations. Please visit your HMO's website for general information about preventive care services.

### Reminders



# **Keep Your Enrollment Record Up to Date**

It is important for you to keep us up to date with changes in your life to ensure you receive timely and appropriate information about your health insurance coverage.

Inform your Health Benefits Administrator (HBA) (retirees should inform the Employee Benefits Division [EBD]) in writing of any changes to your enrollment record (address, adding or removing dependents, marital status changes) in a timely manner. **Note:** If you are divorced or your marriage has been annulled, your former spouse is not eligible for coverage as a dependent as of the date of the divorce, even if a court orders you to maintain coverage. Your HBA is usually located in your personnel office.

Retirees can report an address change by calling EBD at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands). Representatives are available Monday through Friday from 9 a.m. to 4 p.m. Eastern time. For all other changes, retirees should write to EBD at: New York State Department of Civil Service Employee Benefits Division Albany, NY 12239

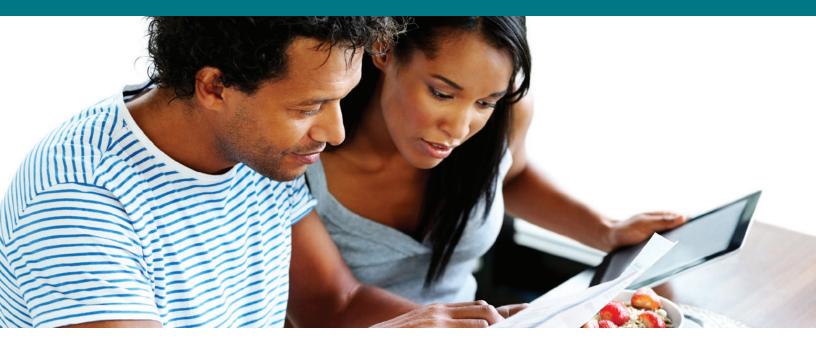
Be sure to sign your request and include the last four digits of your Social Security number, your address and your telephone number, including area code.

Retirees may also make certain changes, such as their address, by going to MyNYSHIP Enrollee Self-Service at www.cs.ny.gov/mynyship, a secure portion of NYSHIP Online.\* See your NYSHIP General Information Book for more information on enrollment changes and applicable deadlines.

\* **Note:** Active enrollees do not have access to MyNYSHIP.

#### **Ineligible Dependents**

If you fail to inform your HBA (EBD for retirees) of dependent eligibility changes, you may be responsible for repaying all health insurance claims for ineligible dependents as early as the date they became ineligible. Knowingly withholding information regarding the ineligibility of dependents may constitute fraud and may be turned over to the appropriate enforcement agencies for investigation.



### **Summary of Benefits and Coverage**

The Summary of Benefits and Coverage (SBC) is a standardized comparison document required by the Patient Protection and Affordable Care Act. It is designed to improve health insurance information so you can better understand your coverage.

To view the SBC for a NYSHIP HMO, visit www.cs.ny.gov/sbc and choose your group. If you do not have internet access, contact the HMO directly to request a copy.

### **NYSHIP Online Resources**

On NYSHIP Online you will find the most up-to-date information about your health care coverage along with recent publications that explain your benefits. To help boost your health care benefits knowledge, a new Resources tab has been added to the NYSHIP Online homepage. There you will find frequently asked questions, terms you should know, assistance on how to read your billing statement and other helpful information. This tab will be updated regularly.

To access NYSHIP Online, go to www.cs.ny.gov/ employee-benefits. Choose PE and HMO enrollee. If you are looking for publications about your benefits, select Using Your Benefits from the NYSHIP Online homepage and then choose Publications.

The NYSHIP Health Maintenance Organizations Report is published by the Employee Benefits Division of the New York State Department of Civil Service. The Employee Benefits Division administers the New York State Health Insurance Program (NYSHIP). NYSHIP provides your health insurance benefits.



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#### **Change Service Requested**

Please do not send mail or correspondence to the return address. See address information on Page 7.

#### **SAVE THIS DOCUMENT**



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

PE HMO Report – November 2020

It is the policy of the New York State Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on NYSHIP Online at www.cs.ny.gov/employee-benefits. Visit NYSHIP Online for timely information that meets universal accessibility standards adopted by New York State for NYS agency websites. If you need an auxiliary aid or service to make benefits information available to you, please contact your Health Benefits Administrator. New York State and Participating Employer COBRA Enrollees: Contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

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## New Online Survivors Benefit Resource

NYSHIP has created an online checklist to assist your dependent survivors in determining their eligibility to continue their enrollment in NYSHIP as a dependent survivor after your death.

You can access the Health Benefits Checklist for Survivors of Employees of the State of New York and Participating Employers at www.cs.ny.gov/ employee-benefits. Choose PE and HMO Enrollee, and from the NYSHIP Online homepage select the Resources tab. Scroll to Dependent Survivor Information and select the link. Additional resources on survivor benefits are also available on the Department of Civil Service website at www.cs.ny.gov/pio/publications.cfm and on NYSHIP Online.