Choose Your Health Insurance Plan for 2017 by December 16, 2016

The Option Transfer Period is here – the time to choose the health insurance option you want for 2017. The New York State Health Insurance Program (NYSHIP) offers you the choice of The Empire Plan or a NYSHIP-approved Health Maintenance Organization (HMO) serving the area where you live or work. You may also be able to opt-out of coverage for the 2017 plan year for an incentive payment (see page 8).

Except under very defined circumstances, you cannot change plans outside the annual Option Transfer Period, which ends December 16, 2016.

To change your health insurance plan during the Option Transfer Period, see your Health Benefits Administrator (HBA) as soon as possible. Ask for the Health Insurance Transaction Form PS-404. Return the completed form to your HBA by December 16, 2016. Or, change your option online using MyNYSHIP. Go to www.cs.ny.gov/employee-benefits. Select your group if prompted, and then click on MyNYSHIP Employee Self-Service. Or, you can go directly to www.cs.ny.gov/mynyship.

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

No action is required if you wish to keep your current health insurance option and still qualify for that plan. (See the note at the top of page 4).
KEEP YOUR INFORMATION UP TO DATE

Notify your HBA when changes in your family, marital or employment status affect your coverage. Be sure to keep your personal information updated such as your name, address and phone number. When any of these changes occur, please act promptly as deadlines may apply. See your NYSHIP General Information Book for details.

RETIRING OR LEAVING STATE SERVICE IN 2017?

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

Choices Explains Your Current Plan and Other Available Plans

If you are considering changing your health insurance plan for 2017 or wish to review your current plan, ask your HBA (usually located in the personnel office of the Business Services Center) for a copy of Health Insurance Choices for 2017, your guide to NYSHIP options. Or, find Choices and other option transfer publications on our website at www.cs.ny.gov/employee-benefits. Select your group and plan if prompted, and then click on Health Benefits & Option Transfer. Choose Rates and Health Plan Choices for the most up-to-date option transfer information.

If there are any copayment or benefit changes for 2017, your current plan will notify you directly. If you have questions about The Empire Plan, call toll free 1-877-7-NYSHIP (1-877-769-7447). Select the Medical Program and then the appropriate prompt for option transfer benefit questions.

If you have questions about NYSHIP HMOs, call the HMOs directly. (See pages 6 and 7 for telephone numbers). Be sure you understand how your benefits will be affected if you change plans. You are choosing a benefit package for yourself and your covered dependents for the entire 2017 program year. Changing plans may result in substantially different coverage and cost.

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

Summary of Benefits and Coverage

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

To view a copy of the SBC for The Empire Plan or a NYSHIP HMO, visit www.cs.ny.gov/sbc. If you do not have internet access, call 1-877-7-NYSHIP (1-877-769-7447) and select the Medical Program to request a copy for The Empire Plan. If you need an SBC for a NYSHIP HMO, contact the HMO.
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<td><strong>December 29, 2016</strong> Triple Lag-Payroll Employees</td>
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New York State Health Insurance Program 2017 Rates

Enrollee Contributions for Employees of New York State

Note: To enroll in an HMO, you must live or work in the HMO’s service area. If you no longer live or work in the NYSHIP service area of the HMO in which you are enrolled, you must change to another plan. Service areas may change from year to year. Please check pages 6-7 for NYSHIP service area information.

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<tr>
<th>Page in Choices</th>
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Biweekly Costs Schedule

For Employees in titles allocated or equated to Salary Grade 9 and below; for UUP Employees with annualized salaries equal to $41,756 or less, the State will pay 88 percent of the cost of the premium for enrollee coverage and 73 percent for the additional cost of dependent coverage.

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

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

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

Your Biweekly Premium Contribution

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

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

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

Note: This information does not apply to Leave Without Pay, COBRA and Young Adult Option (“Direct Pay”) enrollees. Direct Pay enrollees will be notified of their rates separately.
### Code | Plan and Service Area
---|---
**001** | **The Empire Plan**  
(available to enrollees and their eligible dependents worldwide)  
1-877-7-NYSHIP (1-877-769-7447)  
www.cs.ny.gov  
Medical Program: UnitedHealthcare  
P.O. Box 1600, Kingston, NY 12402-1600  
TTY: 1-888-697-9054  
Hospital Program: Empire BlueCross BlueShield  
NYS Service Center, P.O. Box 1407, Church Street Station, New York, NY 10008-1407  
TTY: 1-800-241-6894  
Mental Health/Substance Abuse Program: Beacon Health Options, Inc.  
P.O. Box 1800, Latham, NY 12110  
TTY: 1-855-643-1476  
Prescription Drug Program: CVS Caremark, Inc.  
P.O. Box 6590, Lee’s Summit, MO 64064-6590  
TTY: 1-800-863-5488
---|---
**066** | **Blue Choice**  
165 Court St., Rochester, NY 14647  
1-800-499-1475  
TTY: 1-800-421-1220  
www.excellusbcbs.com  
Serving Livingston, Monroe, Ontario, Seneca, Wayne and Yates counties
---|---
**067** | **BlueCross BlueShield of Western New York**  
P.O. Box 80, Buffalo, NY 14240-0800  
716-887-8840 or 1-877-576-6440  
TTY: 711  
www.bcbswny.com  
Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
---|---
**063** | **Capital District Physicians’ Health Plan (CDPHP) (Capital)**  
500 Patroon Creek Blvd., Albany, NY 12206-1057  
518-641-3700 or 1-800-777-2273  
TTY: 1-877-261-1164  
www.cdpheap.com  
Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties
---|---
**300** | **Capital District Physicians’ Health Plan (CDPHP) (Central)**  
500 Patroon Creek Blvd., Albany, NY 12206-1057  
518-641-3700 or 1-800-777-2273  
TTY: 1-877-261-1164  
www.cdpheap.com  
Serving Broome, Chenango, Essex, Hamilton, Herkimer, Madison, Oneida, Otsego and Tioga counties
---|---
**310** | **Capital District Physicians’ Health Plan (CDPHP) (Hudson Valley)**  
500 Patroon Creek Blvd., Albany, NY 12206-1057  
518-641-3700 or 1-800-777-2273  
TTY: 1-877-261-1164  
www.cdpheap.com  
Serving Delaware, Dutchess, Orange and Ulster counties
---|---
**280** | **Empire BlueCross BlueShield HMO (Upstate)**  
11 Corporate Woods Blvd., P.O. Box 11800, Albany, NY 12211-0800  
1-800-453-0113  
TTY: 1-800-241-6894  
www.empireblue.com  
Serving Albany, Clinton, Columbia, Delaware, Essex, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties
---|---
**290** | **Empire BlueCross BlueShield HMO (Downstate)**  
11 Corporate Woods Blvd., P.O. Box 11800, Albany, NY 12211-0800  
1-800-453-0113  
TTY: 1-800-241-6894  
www.empireblue.com  
Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk and Westchester counties
---|---
**320** | **Empire BlueCross BlueShield HMO (Mid-Hudson)**  
11 Corporate Woods Blvd., P.O. Box 11800, Albany, NY 12211-0800  
1-800-453-0113  
TTY: 1-800-241-6894  
www.empireblue.com  
Serving Dutchess, Orange, Putnam, Sullivan and Ulster counties
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| 050   | HIP Health Plan of New York (Downstate)  
55 Water St., New York, NY 10041  
1-800-447-8255  
TTY: 1-888-447-4833  
www.emblemhealth.com  
Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk and Westchester counties                                                                 |
| 220   | HIP Health Plan of New York (Capital)  
55 Water St., New York, NY 10041  
1-800-447-8255  
TTY: 1-877-208-7920  
www.emblemhealth.com  
Serving Albany, Columbia, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties                                                                 |
| 350   | HIP Health Plan of New York (Hudson Valley)  
55 Water St., New York, NY 10041  
1-800-447-8255  
TTY: 1-877-208-7920  
www.emblemhealth.com  
Serving Delaware, Dutchess, Orange, Putnam, Sullivan and Ulster counties                                                                 |
| 072   | HMOBlue (Central New York Region)  
333 Butternut Dr., Syracuse, NY 13214-1803  
1-800-499-1275  
TTY: 1-800-421-1220  
www.excellusbcbs.com  
Serving Broome, Cayuga, Chemung, Cortland, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties                                                                                                                                 |
| 160   | HMOBlue (Utica Region)  
12 Rhoads Dr., Utica, NY 13502  
1-800-499-1275  
TTY: 1-800-421-1220  
www.excellusbcbs.com  
Serving Chenango, Clinton, Delaware, Essex, Franklin, Fulton, Hamilton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Otsego and St. Lawrence counties                                                                                                                                 |
| 059   | Independent Health  
511 Farber Lakes Dr., Buffalo, NY 14221  
1-800-501-3439  
TTY: 716-631-3108  
www.independenthealth.com  
Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties                                                                 |
| 058   | MVP Health Care (Rochester)  
P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207  
1-888-MVP-MBRS (1-888-687-6277)  
TTY: 1-800-662-1220  
www.mvphealthcare.com  
Serving Genesee, Livingston, Monroe, Ontario, Orleans, Seneca, Steuben, Wayne, Wyoming and Yates counties                                                                 |
| 060   | MVP Health Care (East)  
P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207  
1-888-MVP-MBRS (1-888-687-6277)  
TTY: 1-800-662-1220  
www.mvphealthcare.com  
| 330   | MVP Health Care (Central)  
P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207  
1-888-MVP-MBRS (1-888-687-6277)  
TTY: 1-800-662-1220  
www.mvphealthcare.com  
Serving Broome, Cayuga, Chenango, Cortland, Delaware, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, Tioga and Tompkins counties                                                                 |
| 340   | MVP Health Care (Mid-Hudson)  
P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207  
1-888-MVP-MBRS (1-888-687-6277)  
TTY: 1-800-662-1220  
www.mvphealthcare.com  
Serving Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester counties                                                                 |
| 360   | MVP Health Care (North)  
P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207  
1-888-MVP-MBRS (1-888-687-6277)  
TTY: 1-800-662-1220  
www.mvphealthcare.com  
Serving Clinton, Essex, Franklin and St. Lawrence counties                                                                 |

**Active 2017 Rates & Deadlines**  7
Changing Plans Outside the Option Transfer Period

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

Opt-Out Program for 2017

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

Enrollment in the Opt-out Program does not continue automatically from year to year. If you are enrolled in the Opt-out Program for 2016, to be eligible to continue receiving incentive payments in 2017, you must reenroll during the Option Transfer Period and attest to having other coverage for the coming plan year.

If you are interested in participating in the Opt-out Program for 2017, see your HBA.