



Planning for Retirement

for Employees of
Participating Employers

May 2022

Important Information
for Employees of NYSHIP
Participating Employers (PEs)

**Health Insurance
Coverage and
Related Benefits
in Retirement**



NEW
YORK
STATE

NYSHIP

New York State
Health Insurance Program

New York State
Department of Civil Service
Employee Benefits Division



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Health Insurance Eligibility

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 interest.

The New York State Health Insurance Program (NYSHIP) provides active employees with 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 of a NYSHIP Participating Employer (PE), you may be able to continue NYSHIP’s coverage for yourself and your eligible dependents, but there are requirements you must meet 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*
- Single and dual annuitant sick leave credit
- Dependent survivor coverage
- Medicare and your NYSHIP coverage
- Medicare Part B premium reimbursement
- Deferring coverage
- Returning to work and/or continued employment

Your Health Benefits Administrator (HBA) is your source for benefit information as an active employee and can answer any questions you may have. Once you retire, the New York State Department of Civil Service Employee Benefits Division (EBD) becomes your HBA and your source for benefit information.

* Not all PEs offer sick leave credit. Please check with your agency for eligibility.

Can I continue my NYSHIP coverage when I retire?

You can continue your coverage as a New York State retiree if you meet all of the eligibility requirements.

What are the eligibility requirements to continue my NYSHIP coverage after I retire?

There are three criteria that you must meet to continue NYSHIP coverage as a State retiree:

First, you must be in a class or category of employee that is eligible for coverage in retirement. Your employer may or may not offer you NYSHIP coverage in retirement. Contact your HBA to find out if you are in a class or category of employment to be eligible to continue NYSHIP coverage in retirement.

If your employer extends retiree coverage to your class, you must satisfy the service requirement of the employer from which you are retiring. NYSHIP requires at least five years of benefits-eligible service. The service does not need to be continuous.

If you were most recently hired with your employer on or after April 1, 1975, your agency may elect, administratively or through collective bargaining, to establish a service requirement greater than five years. This requirement may apply to all employees, or to one or more classes or categories of employees.

If you were last hired before April 1, 1975, you must have had at least five years of NYSHIP benefits-eligible State service or at least five years of combined NYSHIP benefits-eligible service with the State and one or more Participating Employers and/or Participating Agencies.

Periods of employment in which you did not meet the eligibility requirements for coverage at the 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 other public employers may count toward the minimum service requirement if that employer currently participates in NYSHIP or participated at the time the service was earned. Contact your Health Benefits Administrator if you have prior service with another public employer to determine if this service counts toward the minimum service requirement.

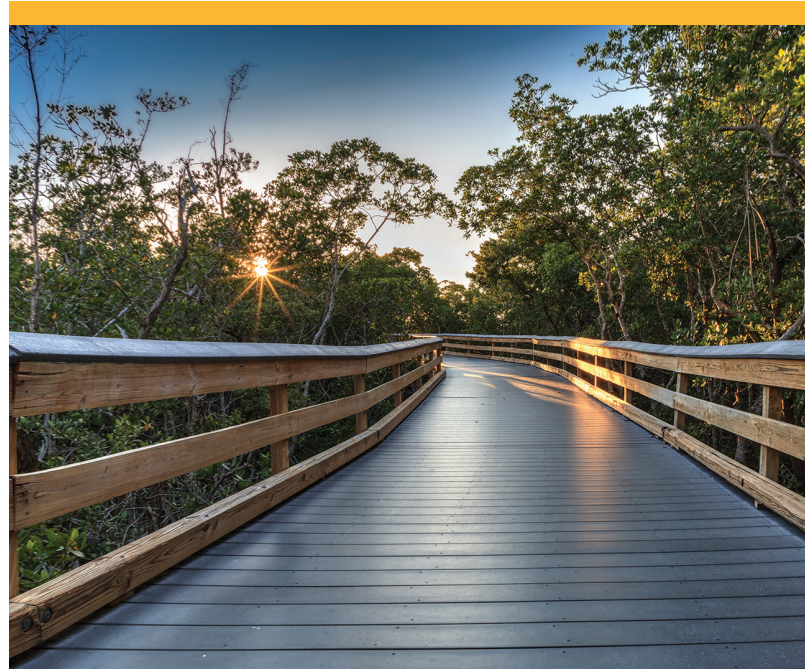
Documentation of this service is required. If these records are unavailable, you may be able to substitute records from the retirement system to which you belong. You must have a minimum of one year of service in a benefits-eligible position with the employer you are retiring from.

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 Retirement System (NYSLRS), which comprises the Employees' Retirement System (ERS) and the Police and Fire Retirement System (PFRS), or the New York State Teachers' 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 the State University of New York Optional Retirement Program with a plan sponsor such as TIAA, you must satisfy **one** of the following:

- Meet the age requirement for pension eligibility in the New York State and Local 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 at the time of your retirement. 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 are not yet enrolled in NYSHIP, you will most likely be required to satisfy a late enrollment waiting period. This means that if you wish to be eligible as a retiree, you must apply for coverage at least three months prior to your retirement date.

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 a Buyout Program at the time of retirement satisfies this requirement.

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

If you meet the eligibility requirements to retire and delay collecting your State pension, you may continue your NYSHIP coverage under retiree provisions. Ask your 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. If you are eligible, you may also take any unused sick leave to offset the cost of your health insurance. See pages 5–7.

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 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 page 2) 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 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 employer and employee shares of the premium. You will be billed monthly by EBD.

Will my dependent survivors be eligible for health insurance under NYSHIP when I die?

If you had at least 10 years of service with a New York State public employer, your enrolled dependents will have the opportunity to continue NYSHIP coverage in the event of your death. 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 in dependent survivor coverage.



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 their 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.



If your dependent survivor spouse remarries, they are no longer eligible for NYSHIP coverage. This also applies if your domestic partner who is a dependent survivor marries or acquires another partner. However, any children enrolled in NYSHIP will continue to be eligible for coverage for as long as they meet the dependent eligibility requirements.

How does my dependent survivor continue NYSHIP coverage when I die?

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.

Your dependent survivor must notify the New York State and Local Retirement System or the New York State Teachers' Retirement System and the Employee Benefits Division of your death (see page 23 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 NYSHIP health benefits will be sent separately.

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 6–7.

Note: Not all PEs offer the dual annuitant option.

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. **Note:** Not all PEs offer sick leave credit.

Before you retire, ask your HBA for a copy of Form PS-410, *NYSHIP 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 5–7 for additional information on using sick leave credit in retirement.

Paying for Health Insurance

If you owe a premium as an active employee, the premium is collected by your employer, typically through payroll deductions. When you retire, you pay through deductions from your monthly retirement check or you make monthly payments directly to the Employee Benefits Division. Your 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?

Ask your HBA what your premium will be. You may be able to use your sick leave credit to reduce your cost. See pages 5–7.

Although health insurance premiums generally increase annually, your sick leave credit is a fixed monthly amount that will not change.

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

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

Once your eligibility for retiree benefits has been confirmed, the Employee Benefits Division will 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 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. Typically, retroactive premium deductions will be recouped in increments of up to \$750, if applicable.

Sick Leave Credit*

What is sick leave credit?

Sick leave credit is the dollar value of your unused sick leave calculated at the time you retire.** It is then applied as a credit to reduce the cost of your NYSHIP premium — either The Empire Plan or a NYSHIP HMO.

If you are eligible for sick leave credit, it 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 the following or visit NYSHIP Online at www.cs.ny.gov/employee-benefits. Choose your group and plan, if prompted. From the NYSHIP Online homepage, select Planning to Retire? and click on the Sick Leave Credit Calculator.

*Not all PEs offer sick leave credit. Please check with your agency for eligibility.

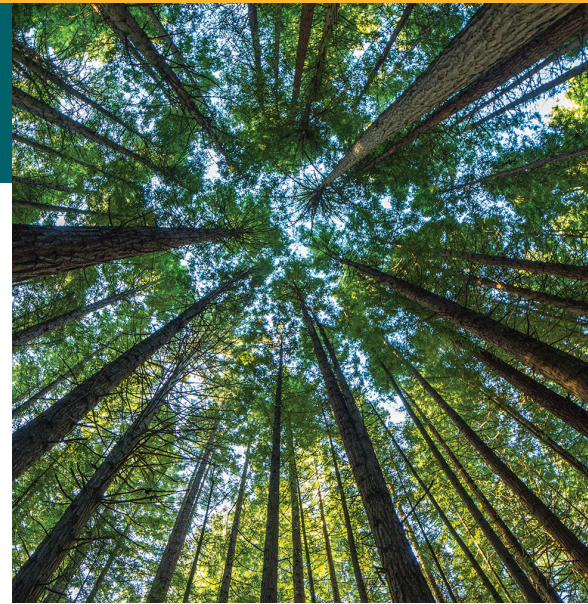
**Your age on your actual retirement date is used to calculate sick leave credit.



After you retire, sick leave credit can benefit you in two ways:

1. Reduces the cost of your NYSHIP premium.
2. Increases your pension as service credit.

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.



Most employees can use a maximum of 200 days of unused sick leave to calculate sick leave credit. See your 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 value of your unused sick leave is converted to a monthly dollar value, which results in 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 may also 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.

If you are eligible to use sick leave credit when you retire, 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.**

If you do not receive this information, write to the Employee Benefits Division (see page 23) 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.

$$\begin{array}{l} \text{Hours of Unused Sick Leave} \times \text{Hourly Rate of Pay} = \text{Total Dollar Value of Sick Leave} \\ \text{Total Dollar Value of Sick Leave} \div \text{Life Expectancy in Months} = \text{Your Monthly Sick Leave Credit} \end{array}$$

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.

Your HBA can help you with sick leave credit calculations, or you can access the online sick leave calculator at www.cs.ny.gov/employee-benefits.

Choosing How to Use Your Sick Leave Credit

When you retire, you may choose to use the full value of your sick leave credit to reduce your monthly premium. This is called the *single annuitant sick leave* option. If you choose this option the full dollar value (100%) of your monthly sick leave credit will be applied to your monthly health insurance premium until either you cancel your retiree health coverage or you die. Your single annuitant sick leave is NOT transferable to your surviving dependent(s) to offset the cost of their NYSHIP premiums for dependent survivor coverage.



Choosing the dual annuitant sick leave option is not a requirement for dependent survivor coverage.

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

The *dual annuitant sick leave* option, if offered by your agency, is also available. This option allows your dependent survivors to continue to use your monthly sick leave credit to reduce their monthly NYSHIP premium if you die. If you choose this option, you must do so **before** your retirement date. This option is only available prior to your retirement.

If you choose the dual annuitant sick leave option, your sick leave credit is reduced to 70 percent of its full dollar value for as long as you live and continues as long as your covered dependents are eligible for dependent survivor coverage. Your eligible enrolled dependents who outlive you may continue to use the same 70 percent monthly credit to reduce their NYSHIP premium.

If you do not elect dual annuitant sick leave credit before your retirement becomes effective, the single annuitant option will automatically be applied to your premium. Your dependent survivors will not be able to use your sick leave credit to offset the cost of their NYSHIP premiums.

How do I choose dual annuitant sick leave credit?

To choose dual annuitant sick leave credit, contact your 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, *NYSHIP Sick Leave Credit Option Election Form* **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.

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 2–3). However, without dual annuitant sick leave credit, your dependent survivors will not have your sick leave credit available to reduce 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 their 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 cannot be changed.

If you have questions about the dual annuitant sick leave option, your 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).

Deferring Your Health Insurance

If I have met the requirements to continue my coverage as a retiree, can I defer the start of my retiree health coverage and use of sick leave credit until after I retire?

If you are enrolled in health coverage and have met the minimum service requirement at the time 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 HBA to defer coverage. **Note:** Not all PE agencies allow their employees to defer health insurance 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 at any time by contacting the Employee Benefits Division. A waiting period will not apply if you defer your coverage prior to leaving the payroll.

If you die while your coverage is deferred and you had NYSHIP **Family** coverage in effect at the time of retirement, your 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 23 for the address.) Eligibility requirements for your 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 the time of retirement, your dependents will not be eligible under NYSHIP as dependent survivors.

Choosing Your Health Plan in Retirement

Understanding Your NYSHIP Options

The first step toward making an informed 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). **Note:** Not all PE agencies offer HMOs.

The Empire Plan provides coverage whether you receive care from Empire Plan network providers or non-network providers. Enrollees are not required to choose a primary care physician and do not need referrals to see specialists. However, services such as hospital and skilled nursing facility admissions, certain mental health and substance use treatment, home care and certain prescription drugs require prior authorization.

The Empire Plan is available to all NYSHIP enrollees regardless of where they live in retirement. Coverage is worldwide and is not limited to a geographic area. However, you should 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. NYSHIP enrollees have a choice of one or more NYSHIP HMOs located in New York State. HMO enrollees 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.

You may enroll (or continue enrollment) in any NYSHIP HMO that serves the area where you live in retirement. If you are enrolled in a NYSHIP HMO and no longer live in its service area, you must change to another plan. If you are Medicare-primary and enroll in a NYSHIP Medicare Advantage HMO, in most cases, you **must live** in the HMO's service area. Check with your HMO if you have questions.

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 you or your dependent 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 benefit 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 is reinstated.

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.

NYSHIP and Medicare

Note: The following information applies to you and your covered dependents.

The Empire Plan and all NYSHIP HMOs 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 use benefits with Medicare. Although Medicare does not cover medical expenses for services outside the United States, Empire Plan benefits are available worldwide. If you will be residing outside the United States, The Empire Plan is your only available coverage through NYSHIP. See your *NYSHIP General Information Book* and *Empire Plan Certificate* for details.

If you die during the period of time that your NYSHIP coverage is canceled, your dependents will not be eligible for dependent survivor coverage.



NYSHIP Health Maintenance Organizations (HMOs)

If you are Medicare-primary (Medicare pays before NYSHIP) and enrolled in a NYSHIP HMO, you will have no Medicare benefits outside the HMO service area. 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.

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 will be significantly reduced or canceled if you do.

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 may be a three-month waiting period.
- If you die while you are not enrolled in NYSHIP, your dependents will not be eligible for dependent survivor coverage unless deferral rules apply (see page 8).



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, NYSHIP coverage will also be canceled for your dependent(s) on the plan.

What is Medicare?

Medicare is the federal health insurance program for people aged 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 (ESRD). It is administered by the Social Security Administration and the Centers for Medicare and 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 no cost for Medicare Part A.

If Social Security tells you that you are not eligible for or 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.

You will be required to pay a monthly premium for Medicare Part B. The premium will either be deducted from your Social Security pension check or paid directly to Social Security Administration if you are not yet collecting Social Security benefits.

Together, Parts A and B are known as original Medicare, which is a fee-for-service plan. NYSHIP supplements this coverage and requires you and your eligible dependents to be enrolled in both Part A and Part B when Medicare is primary to NYSHIP.

Medicare Advantage Plans (MAPs), formerly known as Medicare Part C plans, combine your NYSHIP HMO coverage and your Medicare benefits. All NYSHIP HMOs provide Medicare Advantage coverage to Medicare-primary enrollees and dependents. If you enroll in a NYSHIP Medicare Advantage Plan, you will receive all your Medicare and your NYSHIP benefits through that plan. If you enroll in the MAP and you have dependents who are not yet Medicare-primary, they will continue with regular HMO coverage until they become eligible for Medicare.

If you or your dependent enrolls in a Medicare Advantage or Part D plan that is not part of NYSHIP, your coverage may be terminated. See Non-NYSHIP HMOs on page 10.

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 administered by SilverScript Insurance Company 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 or visit NYSHIP Online at www.cs.ny.gov/employee-benefits. Click on Find a Provider, then scroll down to the Prescription Drug Program. Click on the link to the Empire Plan Prescription Drug Program website and then select SilverScript, the Empire Plan Medicare Rx plan administrator.

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 NYSHIP will terminate your NYSHIP coverage. 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 NYSHIP coverage for hospital, medical/surgical, mental health and substance use or prescription drugs. You will still have your existing Medicare Parts A and B in place.

* Enrollment in almost any other Medicare plan, even one that does not include a Part D plan, will result in your being disenrolled from The Empire Plan or a Medicare Advantage HMO.

- If you are enrolled in a NYSHIP Medicare Advantage HMO and then enroll in a Medicare Part 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.

Individuals with limited income and resources are eligible for prescription drug benefits at no cost or a reduced cost under the Medicare Part D Low Income Subsidy. If you are eligible or have been approved for Extra Help from the Medicare Part D Low Income Subsidy, and you are enrolled in The Empire Plan or a NYSHIP HMO, you may be reimbursed for some or all of your Medicare Part D premium.

Contact the Employee Benefits Division for more information (see page 23 for contact information). If you have questions about Extra Help or how to apply, call Social Security at 1-800-772-1213 or visit www.ssa.gov.

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.

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 and our *Medicare & NYSHIP* booklet.

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 coverage 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 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 and/or they become eligible for Medicare benefits.

As a retiree, Medicare becomes primary to your NYSHIP coverage as soon as you 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 will not pay for any medical expenses that Medicare would have covered. If you are not enrolled in Medicare Parts A and B, your coverage under a NYSHIP HMO will terminate.

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 (and your dependent's) Medicare benefits in effect according to NYSHIP rules. If you are collecting Social Security benefits, you are automatically 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 and your dependents 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 or your dependents 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 had you enrolled when first eligible.

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, 2022, your Medicare effective date would be June 1, 2022. 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, 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 to find out 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 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 enroll in Medicare Part B once you are eligible for Medicare-primary coverage, NYSHIP reimburses you for the standard Medicare Part B premium unless you receive reimbursement from another source.

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, NYSHIP will reimburse this also. Watch for information from the Employee Benefits Division regarding IRMAA reimbursement that will be mailed to you after you retire. The IRMAA notice and application are available on our website, www.cs.ny.gov/employee-benefits under the Medicare section of NYSHIP Online. However, please note that NYSHIP will not reimburse you for any IRMAA costs associated with Medicare Part D.

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 collecting Social Security benefits yet.

New York State adds standard Part B premium reimbursement for each primary Medicare-eligible person covered under your NYSHIP enrollment to your State pension check each month, unless you or your dependent receives reimbursement from another source or if your Medicare premium is being paid by another entity on your behalf.

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 NYS 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 in order to receive reimbursement.

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 terminate your NYSHIP benefits.

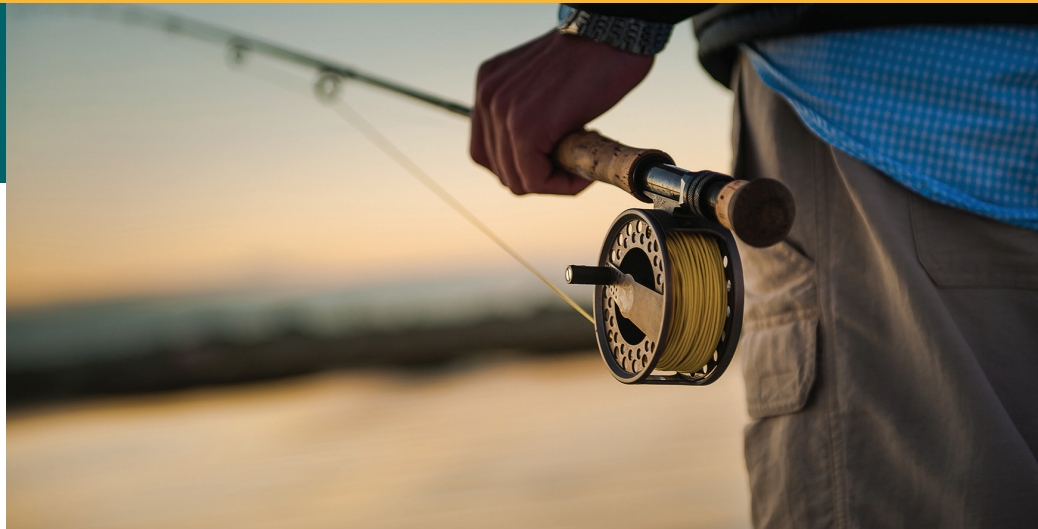
For example:

- If you are enrolled in The Empire Plan with prescription drug coverage through Empire Plan Medicare Rx and then enroll in a Medicare Part D or Medicare Advantage Plan (MAP) outside of NYSHIP, the Centers for Medicare and Medicaid Services (CMS) will terminate your Empire Plan Medicare Rx coverage. This means you and your covered dependents will be terminated from The Empire Plan and will have no Empire Plan coverage for hospital, medical/surgical, mental health and substance use or prescription drugs.
- If you are enrolled in a NYSHIP Medicare Advantage HMO and then enroll in a Medicare Part D or other Medicare plan outside of NYSHIP, CMS will terminate your enrollment in the NYSHIP HMO.

Be sure you understand how enrolling in additional Medicare coverage will affect your overall benefits. 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).



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.



Other Benefits*

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 under the Consolidated Omnibus Budget Reconciliation Act (COBRA). Individuals or covered dependents eligible for COBRA may continue certain benefits at group rates for up to 36 months when coverage would otherwise end. You must apply for COBRA continuation within 60 days of the date you lose your group coverage.

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

EmblemHealth 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 EmblemHealth 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:

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

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 want to continue dental coverage after your COBRA coverage expires, call EmblemHealth 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.

* Not all PEs offer NYSHIP dental and/or vision benefits. Please check with your agency for eligibility.

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 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 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 NYSHIP Online at www.cs.ny.gov. Click on State Employees, then on Resources and select Life Insurance.



Your Next Steps

Contact Your Health Benefits Administrator

Make sure you meet the minimum service requirements for continuing benefits in retirement. 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 as a retiree or a vestee, COBRA or a direct-pay conversion 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 Health Benefits Administrator if you have questions.

- Make sure the information on your enrollment record, such as dates of birth and spelling of names and addresses, is accurate and up to date.
- Discuss the sick leave credit options if offered by your employer (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 HBA. Be sure to discuss deferred health insurance coverage as an alternative to cancellation. **Note:** Not all agencies allow their employees to defer health insurance coverage.
- 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, or under the age of 65 and eligible for Medicare due to a disability, 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.

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 or if you or your dependent has received Social Security Disability Insurance (SSDI) for 24 months, or is receiving SSDI due to amyotrophic lateral sclerosis (ALS), or develops end-stage renal disease (ESRD) and has completed the 30-month coordination period.

You and your dependents must enroll in Medicare Parts A and B when first eligible for primary Medicare benefits.



If you are moving when you retire

Before you retire, notify your Health Benefits Administrator of any mailing address, email address or phone number change. Check with your HBA to see if your change in address requires that you change your health insurance option. As a retiree, you will have access to MyNYSHIP where you can make certain enrollment changes, address changes or change your health insurance option through MyNYSHIP Self-Service at www.cs.ny.gov/mynyship, a secure portion of the Employee Benefits Division's homepage, NYSHIP Online. Registration using a personal NY.gov ID is required.

For more information and instructions, visit www.cs.ny.gov/mynyship/welcome. 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 Health Benefits Administrator. After you retire, the Employee Benefits Division will serve as your HBA. To speak to a representative, call 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands) during regular business days between 9 a.m. and 4 p.m. Eastern time. Be prepared to provide 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 website 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 website, www.cs.ny.gov, has current benefit information. Scroll down to Benefit Programs, then click on NYSHIP Online.
- The *NYSHIP General Information Book for Participating Employers* includes information about eligibility, enrollment and other NYSHIP rules and policies.
- The *Empire Plan Certificate* or your HMO contract provides details on your NYSHIP health insurance coverage and coordination of benefits with Medicare.
- *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 Retirees of Participating Employers* lists the monthly premiums for NYSHIP health insurance coverage for most PE retirees.
- *On the Road with The Empire Plan* is a handy guide to your Empire Plan benefits when traveling.
- The *Medicare & NYSHIP* booklet explains how NYSHIP and Medicare work together to provide health benefits.

After You Retire

After you retire, the Employee Benefits Division (EBD) will serve as your personnel office to answer your health insurance questions and help you make enrollment changes. EBD works to keep you informed; however, you are responsible for reading and keeping track of the information sent to you.

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

NYSHIP publications, such as *Empire Plan Reports*, *NYSHIP HMO Reports* and other important benefit-related documents, are mailed directly to retiree homes. Important information 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) as well as 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 any time, 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 record.

EBD also posts employee benefit information, announcements, meetings and option transfer details on NYSHIP Online at www.cs.ny.gov. Scroll down to Benefit Programs, then click on NYSHIP Online.

How does EBD protect my privacy?

EBD 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 NYSHIP Online at www.cs.ny.gov. Click on State Employees, then Health Benefits. At the bottom of the page, 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).



Important Terms to Know

COBRA (Continuation of Coverage)

The Consolidated Omnibus Budget Reconciliation Act (COBRA), 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 to reduce 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 of the 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.

*Not all PEs offer. Please check with your agency for eligibility.

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 and Part D.

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 amyotrophic lateral sclerosis (ALS) or end-stage renal disease (permanent kidney failure). Medicare is directed by the federal Centers for Medicare and Medicaid Services (CMS) and administered by the Social Security Administration (SSA).

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. Many 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 your cost of the Part B standard 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.

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 or 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 Retirement System (NYSLRS), which comprises the Employees' Retirement System (ERS) and the Police and Fire Retirement System (PFRS), or the New York State Teachers' Retirement System or any of New York State's political subdivisions.

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 your NYSHIP Participating Employer) 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 dollar 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. You must maintain continuous NYSHIP coverage until you are eligible to collect a pension.

*Not all PEs offer. Please check with your agency for eligibility.

Contact Information

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

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.

New York State and Local Retirement System (Employees' Retirement System and the Police and Fire 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

Empire Plan Enrollees:

The Empire Plan

1-877-7-NYSHIP

(1-877-769-7447)

For enrollee services, precertification and provider relations.

www.cs.ny.gov

Medical/Surgical Program

UnitedHealthcare

TTY – 1-888-697-9054

Hospital Program

Empire BlueCross

TTY – 1-800-241-6894

Prescription Drug Program

CVS Caremark

TTY – 711

Empire Plan Medicare Rx

1-877-7-NYSHIP

(1-877-769-7447)

TTY – 711

For Medicare-primary enrollees and dependents only.

<http://EmpirePlanRxProgram.SilverScript.com>

Mental Health and Substance Use Program

Beacon Health Options, Inc.

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 website, www.cs.ny.gov. From the homepage, scroll down to Benefit Programs and click on NYSHIP Online. Then choose Health Benefits & Option Transfer. Select Rates and Health Plan Choices and then NYSHIP Plan Comparison. Scroll to Choices and locate Plans by County to locate the Plans by County listing.

Blue Choice

Member Services

1-800-499-1275
TTY – 1-800-662-1220
165 Court Street
Rochester, NY 14647
www.excellusbcbs.com

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

Member Services

518-641-3700 or 1-800-777-2273
TTY – 711
500 Patroon Creek Boulevard
Albany, NY 12206-1057
www.cdphp.com

EmblemHealth

1-800-447-8255
TTY – 1-888-447-4833
55 Water Street
New York, NY 10041
www.emblemhealth.com

Highmark Blue Cross Blue Shield of Western New York

1-877-576-6440
TTY – 711
P.O. Box 80
Buffalo, NY 14240-0080
www.bcbswny.com/nyship

Highmark Blue Shield of Northeastern New York

1-800-888-1238
TTY – 711
P.O. Box 15013
Albany, NY 12212
www.bsneny.com

HMOBlue

Excellus BlueCross BlueShield Central New York Region

1-800-499-1275
TTY – 1-800-662-1220
333 Butternut Drive
Syracuse, NY 13214-1803
www.excellusbcbs.com

Excellus BlueCross BlueShield Utica Region

1-800-499-1275
TTY – 1-800-662-1220
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 Healthcare

Customer Service

1-888-MVP-MBRS (687-6277)
TTY – 1-800-662-1220
P.O. Box 2207
625 State Street
Schenectady, NY 12301-2207
www.mvphealthcare.com

A Website for You

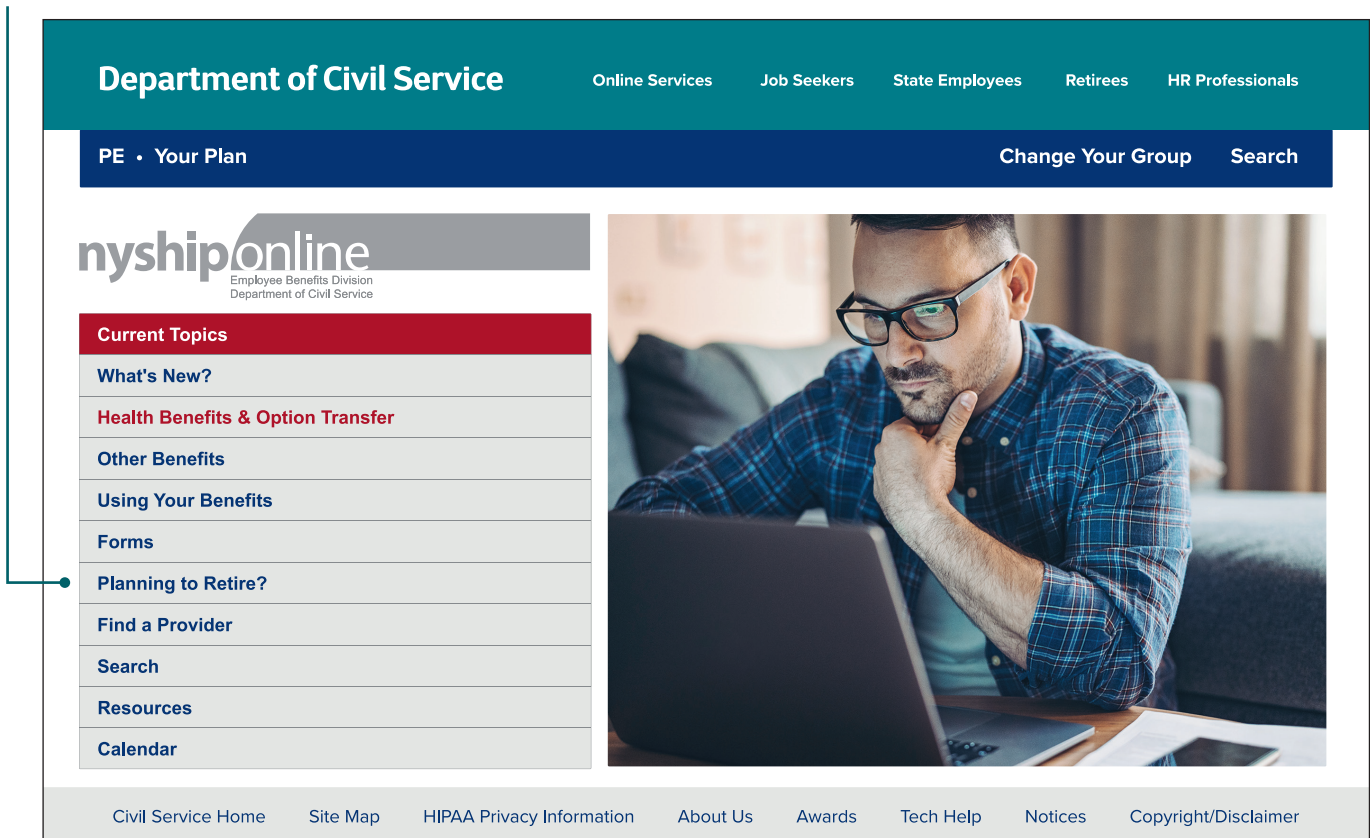
Visiting our website is a great way to stay current with your NYSHIP benefits in retirement and with changes as they occur.

Check out NYSHIP Online, the New York State Department of Civil Service Employee Benefits Division website, at www.cs.ny.gov/employee-benefits.

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

From the NYSHIP Online homepage, select Planning to Retire?





Happy Retirement

Enjoying your retirement will be much easier if you are not worrying about how to cover medical expenses. With advance planning and informed decisions, you can plan a clear path to a healthy and full retirement.

Keep this booklet as a handy reference and resource in your retirement.

Wishing you a happy and healthy retirement!

Planning for Retirement for Employees of Participating Employers 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 through The Empire Plan or a NYSHIP-approved Health Maintenance Organization.



NYSHIP
New York State
Health Insurance Program

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

This document is for informational purposes only and does not contain a complete description of your benefits or imply NYSHIP coverage. Read your Plan materials for complete information.

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

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