## **Death of Enrollee - Survivor Coverage**

Death of Enrollee with Individual Coverage

In the event of the death of an employee or retiree enrolled with Individual Coverage, coverage will end on the date of death. A credit will be issued if any premium payments have been submitted for the month(s) after the month in which death occurred.

- 2. Death of Enrollee with Family Coverage
  - a. Extended Benefits Period
    - In the event of the death of an employee or retiree enrolled with Family Coverage, the coverage of any surviving dependent(s) will be continued for an Extended Benefits Period of three months following the month in which the enrollee's death occurred.
      - (a) The extended benefit period continues through the last day of the third month following the month in which the death occurred.
      - (b) If the deceased enrollee contributed to the cost of their health insurance coverage, the enrolled dependents will continue to receive coverage without additional charge to the survivors or the agency for three months beyond the month in which the enrollee died.
      - (c) Any claims for medical expenses incurred by the dependent survivor(s) during the three-month Extended Benefits Period must be submitted using the health insurance identification number of the deceased employee or retiree.
- 3. Dependent Survivor Coverage
  - a. Eligibility
    - If the deceased employee or retiree had completed at least ten (10) years of active service prior to his or her death, the surviving dependent(s) is eligible to continue Dependent Survivor Coverage under the New York State Health Insurance Program after the three-month Extended Coverage Period.

Qualifying service includes service with the Participating Agency, the State of New York, or any political subdivisions of New York State eligible to participate in the New York State Health Insurance Program.

Note: It is recommended that Participating Agencies inform dependents of their options within the required time frames.

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If a dependent survivor is eligible for coverage in the New York State Health Insurance Program as an employee or retiree of a State Agency, Participating Employer or Participating Agency, he or she may elect to continue NYSHIP coverage through their employer. Such employee or retiree should contact the Health Benefits Administrator of his or her employer.

If coverage as an active employee ends, the enrollee may re-enroll under Dependent Survivor Coverage. The enrollee is eligible for Dependent Survivor Coverage provided no break in coverage under NYSHIP occurred.

3) If the death of an active employee resulted from a work-incurred injury, the surviving dependent(s) may be eligible to continue Dependent Survivor Coverage under the New York State Health Insurance Program regardless of the length of the deceased employee's service.

To be eligible for such coverage, the survivor(s) must be entitled to accidental death benefits payable by a retirement system or pension plan administered by New York State or civil division thereof, or be entitled to death benefits provided under the Workers' Compensation Law. If an application has been submitted for such benefits, coverage in NYSHIP may be continued pending a determination by the appropriate retirement system, pension plan or Workers' Compensation insurer provided the same is diligently pursued by the applicant.

- 4) If eligible under 1), 2), or 3) above:
  - (a) The enrolled spouse of a deceased enrollee continues eligibility for coverage for as long as he or she remains unmarried.
  - (b) The enrolled dependent children of a deceased enrollee continue eligibility for coverage for as long as they would have qualified as dependents had the enrollee lived. (See Section 2.2)

Note: The enrollee must have had Family Coverage in effect at the time of death. The survivor cannot add new dependents, except for the following: an unborn child (child of deceased enrollee that has yet to be born); a dependent between the ages of 19-25 who returns to full-time student status, a child in the process of adoption.

5) If *not* eligible for Dependent Survivor Coverage:

The dependent survivor(s) may be eligible for continuation of coverage through either: the New York State Health Insurance Program under the federal COBRA Continuation of Coverage Law (See COBRA Section 3.12), or through a direct-pay conversion contract with the Empire Plan's hospital or medical program insurer.

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## b. Cost

- 1. The cost of Dependent Survivor Coverage is paid entirely by the survivor(s) unless the Participating Agency elects administratively or through collective negotiations to any of the following variations:
  - (a) If the dependent survivor(s) is eligible for Dependent Survivor Coverage under a.1) above (i.e., the deceased employee or retiree had at least 10 years of service):
    - (1) The surviving spouse of an active employee may pay 25% of the full cost of Dependent coverage;

or

(2) The surviving spouse of an enrollee who retires after April 1, 1979, with at least ten (10) years of service and who subsequently dies may pay an amount equal to 25% of the full cost of Dependent coverage.

<u>Note</u>: The 25% of Dependent coverage rate under (1) or (2) above will apply whether the surviving spouse is enrolled for Individual or Family coverage.

If there is no surviving spouse or the surviving spouse under (1) or (2) above loses his or her eligibility for coverage as a result of marriage or dies, any dependent children, still eligible, may continue coverage under the New York State Health Insurance Program by paying the full cost of such coverage.

(b) If the dependent survivor(s) is eligible for Dependent Survivor Coverage under a.3) above (i.e., the death of an active employee resulted from a work-incurred injury), the Participating Agency may pay the full cost of coverage for the dependent survivor(s).

## c. Dependent Survivor Enrollment

- An eligible dependent survivor who wishes to continue coverage under the New York State Health Insurance Program must make application to the Participating Agency's Health Benefits Administrator for the coverage within 90 days of the death of the enrollee. The dependent survivor(s) will retain the enrollee's original effective date of coverage.
- 2) When the dependent survivors are required to pay the cost of coverage and only two dependents are eligible for Dependent Survivor Coverage, two Individual enrollments may be established rather than a Family enrollment.

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- 3) The dependent survivor(s) will be issued new health insurance identification cards with a new alternate identification number.
- d. Option Transfer Between Employer-Sponsored Plans
  - Enrollees with Dependent Survivor Coverage have the same rights as other classes or categories of enrollees to transfer between plans sponsored by a Participating Agency which offers enrollees the choice of health insurance coverage in the Empire Plan or in one or more Health Maintenance Organizations. A transfer may be made either during an annual transfer Period or based on a permanent change of residence (see Section 3.3).
  - If a dependent survivor who is enrolled in an alternate health plan sponsored by the Participating Agency subsequently makes an application for coverage in the Empire Plan, such person must have met the criteria of a dependent survivor under the New York State Health Insurance Program and must have had continuous coverage under one of the Employer-Sponsored Plans since the death of the employee or retiree.

If such person described under 2) above is eligible to transfer to Dependent Survivor Coverage under the New York State Health Insurance Program, contact the Employee Benefits Division.

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