
When You **RETIRE**



For upcoming NYSHIP retirees and their covered dependents | Participating Employers

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YOUR UPCOMING RETIREMENT

Retirement means change—including for your health insurance coverage through the New York State Health Insurance Program (NYSHIP).

By carefully reading through this publication, you’ll be able to ensure continued health benefits for you and your family—and retire with peace of mind.

- This publication is **designed for NYSHIP enrollees planning to retire from Participating Employer service**. However, be sure your dependents also understand the information within and take any action required to maintain NYSHIP coverage.
- This publication discusses retiree health coverage through NYSHIP. Requirements to receive a pension are different. Consult with your applicable retirement system.
- If you work for **New York State or a Participating Agency**, your benefits may be different. Contact your employer for information.
- Do not depend on Social Security, Medicare, another health plan or another employer for information relating to NYSHIP. They may be unfamiliar with NYSHIP’s retirement coverage and requirements.
- If you are diagnosed with end-stage renal disease (ESRD), several important rules apply. Contact the Employee Benefits Division (EBD) and refer to your *General Information Book* or the *End-Stage Renal Disease and NYSHIP* flyer. Both are available at nyship.ny.gov.
- Many rules for retirees and their dependents also apply to vestees, dependent survivors, preferred list enrollees and their dependents. Review the retiree *General Information Book* or call EBD to discuss coverage.
- If you return to State or Participating Employer service after retirement, your NYSHIP coverage may change. See *Your Coverage in Retirement* if entering State service.
- For information about disability retirement, see *Disability Retirement and Your NYSHIP Coverage*.



EBD: Your New Health Benefits Resource

Your agency's health benefits administrator (HBA) currently provides you information about your coverage and processes changes to your enrollment record as an employee.

After you retire, EBD becomes your new HBA. Read more about EBD on page 13 and reach out with any questions about specific situations.

NYSHIP PLAN OPTIONS

If you are a benefits-eligible employee of a Participating Employer, you are likely enrolled in NYSHIP through The Empire Plan or a NYSHIP health maintenance organization (HMO).

These plan options will still be available to you after retirement—if you take the necessary steps before then.

See the retiree *Health Insurance Choices* for detailed information on these options.



TO-DO LIST

For a checklist of things you must do before retirement, turn to page 15.

CHECK YOUR MAIL

Once EBD has been notified of your retirement, you should receive the following items in the mail.

- **Pending Retiree Letter.** This letter from EBD confirms that we have been notified of your retirement. It provides information on retiree coverage eligibility, payment, Medicare and other requirements. It also provides information on continuing dental and vision coverage. It does *not* confirm eligibility for NYSHIP retiree coverage.
- **“Dear Retiree” Letter.** If you're confirmed to be eligible for retiree coverage, you'll receive this letter with details about your benefits and your new monthly premium cost (offset by your sick leave credit if applicable; see page 10).
- **COBRA Application.** This application will allow you to temporarily continue your New York State dental and vision benefits into retirement (see page 4). The application must be returned by the response date provided.
- **Other Important Notices.** Watch your mail for important notices from the Department of Civil Service, as this information may affect your NYSHIP enrollment.



WHEN YOU RETIRE

Continued NYSHIP Coverage Requirements

If your employer offers you NYSHIP retiree coverage, to begin that coverage, you must meet several requirements.

1. **You must meet your employer's minimum service time requirement.**

Participating Employers will determine whether and how they will accept prior service with other public employers towards the minimum.

At least one year of the total must be with the employer from which you retire.

2. **You must qualify for retirement as a member of a retirement system administered by New York State or its political subdivisions.**

Most benefits-eligible workers qualify for retirement (i.e., a State pension) with the New York State and Local Retirement System (NYSLRS). Generally, you must have **worked for at least five years and be at least 55 years old or receive a disability retirement.**

If you are *not* a member of a publicly administered retirement system (or you are enrolled in the SUNY Optional Retirement Program), at least one of the following must be true:

- a. You meet the age requirement for pension eligibility in the NYSLRS retirement tier in effect when you last entered service
- b. You qualify to receive Social Security disability payments

If you do not yet meet the age requirement to be eligible for a pension, you may be able to separate from service as a vestee or dependent (see page 12).

3. **You must have NYSHIP coverage** at the time of your retirement.

Most people with a Participating Employer satisfy this requirement through enrollment in their own right as an active employee. If your employer offers an alternative health insurance plan or an opt-out or buyout plan, ask your HBA whether these alternative options satisfy the requirement to have NYSHIP coverage at the time of your retirement.

Others, including those who are not old enough to qualify for a pension, satisfy this requirement through coverage as a vestee (see page 12), as a dependent of another enrollee or under preferred list provisions.

If you go on leave, cancel your NYSHIP coverage and then retire, *you will not meet this requirement* (as coverage will not be in place at the time of your retirement).

If you are not yet in NYSHIP and would like to become eligible for retiree coverage, apply for employee coverage **at least 11 weeks before retiring** (as you will be subject to a late enrollment waiting period before coverage begins). If you leave payroll before that coverage begins, you will not be eligible for retiree coverage. Contact your HBA to apply.

► **In addition, if eligible for Medicare, you must be enrolled.***

Read more about Medicare eligibility on page 5.

If you meet all these requirements, NYSHIP coverage will continue for you and your covered dependents when you retire. If you do not meet all these requirements, *your NYSHIP coverage will end after you leave payroll.*

If you return to work as a benefits-eligible employee and then retire again, you will again be eligible for retiree coverage if you meet all these requirements.

CHANGING YOUR PLAN

If you want to change your NYSHIP plan when you retire, you may do so. In fact, as a NYSHIP retiree, you may change your plan once every 12 months for any reason. You do not need to wait for Open Enrollment at the end of the year (like when you were working).

You may also change your plan anytime a qualifying event occurs. Qualifying events are limited to the following:

- You are enrolled in a NYSHIP HMO and move permanently out of its service area
- You move to an area served by a NYSHIP HMO that did not serve your previous home area
- You add a new dependent through marriage, domestic partnership, adoption or placement for adoption

A dependent losing NYSHIP eligibility is not a qualifying event to change your plan.

To change your plan, submit a completed *NYSHIP Health Insurance Transaction Form (PS-404R)* to EBD or make a request online using MyNYSHIP. Do so as early as possible prior to the effective coverage date you are requesting. The requested date of effective coverage must be the first of a month.

Annual deductibles for certain out-of-network benefits are for the calendar year. These are not prorated. If you change plans midyear, you will have to meet the full deductible amount.

* If you have a NYSHIP HMO, you must be enrolled in both Medicare Parts A and B if eligible. If you have The Empire Plan, it is possible to enroll in only Part A or Part B, but this is *strongly discouraged*.

Dental and Vision

If you have dental and vision coverage administered by New York State, consult your HBA to determine when your benefits will end.

To avoid losing dental and vision coverage, eligible individuals or dependents may continue benefits through COBRA at group rates for up to 36 months. You should receive a COBRA application within 30 days of when EBD is notified of your retirement. You must apply for COBRA continuation by the response date on the application (typically within 60 days of the date you lose group coverage).

A group direct-pay dental plan with Anthem is also available for Participating Employer retirees. You must apply when you retire or at the end of COBRA coverage. To learn more, visit [anthem.com/ny/individual-and-family/dental-insurance](https://www.anthem.com/ny/individual-and-family/dental-insurance).

Continued New York State vision coverage is only available through COBRA.

If you receive dental and vision coverage through a union employee benefit fund, your benefits may be different. Contact your employee benefit fund before you retire to learn if you are eligible for COBRA continuation and the direct-pay dental plan.

MEDICARE AND RETIREE COVERAGE

One of the biggest upcoming changes to your coverage has to do with **how NYSHIP and Medicare work together**. (See page 8 for an overview of Medicare.)

- Until you retire, **NYSHIP will remain primary for you and your covered dependents**. This is true for almost everyone, regardless of Medicare eligibility (see exceptions on the next page).
- Upon your retirement, anyone on your NYSHIP plan who is *already Medicare-eligible* will become Medicare-primary on the first of the month after two pay periods have passed (usually 28 days).
- After your retirement, when you or your covered dependents become Medicare-eligible, **Medicare will become primary and NYSHIP will become secondary for that person** (except for someone in an ESRD coordination period).



Becoming Medicare-Eligible

Most people become Medicare-eligible the month they turn 65. If your birthday is on the first of the month, you will become eligible the first of the month prior.

You can also become eligible the first of the month after:

- Receiving Social Security Disability Insurance (SSDI) benefits for 24 months
- Receiving any SSDI benefits for amyotrophic lateral sclerosis (ALS)
- Completing a three-month Medicare waiting period after beginning dialysis for ESRD

For information on the ESRD waiting period and subsequent coordination period, see the *End-Stage Renal Disease and NYSHIP* flyer at nyship.ny.gov.

Contact the Social Security Administration about eligibility if you have a limited work history and/or are not a U.S. citizen.

EXCEPTIONS FOR ESRD PATIENTS AND DOMESTIC PARTNERS

ESRD patients and domestic partners can become eligible earlier. ESRD patients must also typically go through a waiting and coordination period before being Medicare-primary. Contact EBD if you or a covered dependent are diagnosed with ESRD.

For more information, refer to your *General Information Book* or the *End-Stage Renal Disease and NYSHIP* flyer. Both are available at nyship.ny.gov.

NYSHIP Does Not Cover Medicare's Portion

After Medicare becomes primary for a person, it pays for their medical care first (i.e., before NYSHIP).

NYSHIP *will not cover* the portion of claims that Medicare will—or would—pay. For example:

- If you or your dependent **have The Empire Plan but lack Medicare Part A or Part B**, The Empire Plan will not cover the portion of medical expenses that Medicare would have paid. This can be up to 80% of your bill.

* If you have a NYSHIP HMO, you must be enrolled in both Medicare Parts A and B if eligible. If you have The Empire Plan, it is possible to enroll in only Part A or Part B, but this is *strongly discouraged*.



For a more comprehensive look, read our companion publication *Medicare and NYSHIP*.

- If you or your dependent **use a provider that does not accept Medicare**, The Empire Plan may cover the service, but it will subtract what Medicare would have paid the provider. You will be responsible for the remainder.

Enroll in Medicare To Keep NYSHIP

Once you or your dependents become **Medicare-eligible** during your retirement (and therefore Medicare-primary), **you/they must enroll in Medicare to keep NYSHIP coverage.*** Enrollment in a non-NYSHIP Medicare Advantage (Part C) or Part D plan will terminate NYSHIP coverage.

If not having Medicare causes you (the retiree) to be disenrolled, your dependents will also have their coverage terminated.



AFTER YOUR RETIREMENT, you and your dependents will generally be **Medicare-primary** when each of you is Medicare-eligible.

Enrollment at Age 65

Most people eligible at age 65 will need to apply for Medicare coverage on their own. See the chart to the right to determine if you and/or your dependent will need to apply or if enrollment will be done automatically.

If you or your dependent(s) are already eligible for Medicare but not enrolled, apply as early as three months before you retire to ensure full coverage.

When you apply, tell the Social Security Administration that you did not sign up when initially eligible because you had employer group health coverage through NYSHIP. To avoid Medicare's late enrollment penalty, you will have to complete a CMS-L564 form with your HBA.

Do not delay signing up, as Medicare coverage may take several months to become effective. If you do not sign up within eight months of retirement, you will have to wait until the next general enrollment period and must pay a lifelong late enrollment penalty that NYSHIP will not reimburse.

Enroll at ssa.gov/medicare/sign-up, by calling the Social Security Administration at 1-800-772-1213 (TTY: 1-800-325-0778) or by visiting your local Social Security Administration office.

Four months before turning 65, will you *already be receiving monthly Social Security benefits*?

IF YES

You will automatically be enrolled in Medicare when you turn 65. You will be mailed a Medicare card ahead of your 65th birthday.

IF NO

You must reach out to the Social Security Administration to enroll in Medicare when you turn 65. Do so as early as three months before your birthday but *no later than one month before* (or you may have a gap in coverage).

If your birthday is on the first of the month, you may apply for Medicare (and must have Medicare in place) one month earlier than normal. After you enroll, you will be mailed a Medicare card.

For more details, visit ssa.gov/medicare/plan/when-to-sign-up.

NON-NYSHIP PLANS









After becoming Medicare-eligible, you and your dependents may receive advertisements and offers from non-NYSHIP Medicare Advantage (Part C) and Part D plans.

If you enroll in one of these plans, **NYSHIP coverage for you and your dependents will be terminated** (regardless of whether they have Medicare). If your dependent enrolls in one of these plans, only their coverage will be terminated.

If you or your dependents have other coverage in addition to NYSHIP, ask the other plan if it will be enrolling you or your dependents in another Medicare Advantage or Part D plan. This would also result in termination of NYSHIP coverage.

Medicare and NYSHIP Coverage During Your Retirement

WHEN YOU OR YOUR DEPENDENTS BECOME MEDICARE-ELIGIBLE

ENROLLED IN PART A	ENROLLED IN PART B	COVERED BY THE EMPIRE PLAN	COVERED BY A NYSHIP HMO
		<ul style="list-style-type: none"> You are fully covered by the combination of Medicare and NYSHIP. 	
		<ul style="list-style-type: none"> You are fully covered for Part A expenses by the combination of Medicare and NYSHIP. You are responsible for Part B expenses Medicare would have paid were you enrolled (about 80%). NYSHIP covers the remainder. 	<ul style="list-style-type: none"> Your NYSHIP coverage is terminated. NYSHIP HMOs require enrollment in Part A and Part B to transition you to their Medicare Advantage plans. You are responsible for the Part A expenses Medicare does not pay. You are responsible for all Part B expenses.
		<ul style="list-style-type: none"> You are responsible for Part A expenses Medicare would have paid were you enrolled (about 80%). NYSHIP covers the remainder. You are fully covered for Part B expenses by the combination of Medicare and NYSHIP. 	<ul style="list-style-type: none"> Your NYSHIP coverage is terminated. NYSHIP HMOs require enrollment in Part A and Part B to transition you to their Medicare Advantage plans. You are responsible for all Part A expenses. You are responsible for the Part B expenses Medicare does not pay.
		<ul style="list-style-type: none"> Your NYSHIP coverage is terminated. You are responsible for all Part A and Part B expenses. 	

If any of the above situations cause you (the retiree) to be disenrolled, **your dependents will also have their coverage terminated.**

Medicare at a Glance

	WHAT IT COVERS	WHEN YOU TURN 65	WHAT YOU PAY
MEDICARE PART A	Inpatient care in a hospital or skilled nursing facility, hospice care and home health care	If you are receiving monthly Social Security benefits <i>at least four months</i> before turning 65, you are enrolled automatically. Otherwise, you will need to apply for coverage.*	There is usually no premium for Part A. If you are required to pay for Part A, please contact EBD to discuss your options. Some coverage limits apply.
MEDICARE PART B	Services from a health care professional, outpatient hospital services, durable medical equipment and some other services and supplies Part A does not cover	If you are receiving monthly Social Security benefits <i>at least four months</i> before turning 65, you are enrolled automatically. Otherwise, you will need to apply for coverage.	A monthly premium will be deducted from your Social Security benefit check or billed directly. After you retire, NYSHIP will reimburse you for the Part B premium through your pension check, a premium reduction or a quarterly refund check. If you and/or your dependent are reimbursed from another source, contact EBD. Part B typically covers 80% of applicable bills.
MEDICARE PART C <small>Also known as Medicare Advantage</small>	Replaces your Part A and Part B coverage through an HMO (optional); see the current retiree edition of <i>Health Insurance Choices</i> for plans in your area	If you have a NYSHIP HMO, you and your Medicare-covered dependents will automatically be enrolled in its Medicare Advantage plan <i>after your retirement</i> (if you are enrolled in Parts A and B). ESRD patients are an exception; call EBD or see the <i>End-Stage Renal Disease and NYSHIP</i> flyer.	You will pay monthly premiums to NYSHIP. Coverage amounts vary by plan; all service areas are in New York State.
MEDICARE PART D <small>You need Part A and/or Part B to sign up for Part D.</small>	Prescription drugs	If you have The Empire Plan and are enrolled in Medicare, you are automatically enrolled in Empire Plan Medicare Rx, a Part D plan currently administered by SilverScript. If you have a NYSHIP HMO, its Medicare Advantage plan will provide your Part D coverage.	Your premium for Part D coverage is part of your overall NYSHIP premium. You may be able to receive Part D reimbursement from Medicare's Extra Help Program (also known as Low Income Subsidy). Contact the Social Security Administration. Copayments apply.



* If you are *ineligible* for premium-free Part A, you may contact the Social Security Administration to enroll with a premium. Or you may contact NYSHIP to have NYSHIP-primary coverage for your Part A expenses.



PAYING FOR YOUR COVERAGE

As a retiree, you will be billed for your NYSHIP premium monthly rather than biweekly.

Premium payments will be deducted from your pension check if you receive one. Otherwise, your premiums will be billed directly.

It may take some time for EBD to confirm your eligibility for NYSHIP retiree benefits. During this time, your NYSHIP coverage will continue, but billing will be temporarily deferred and you will accumulate premium amounts due. Once your eligibility is confirmed, EBD will either bill you directly for these premiums in the interim or deduct up to \$999 per month from your pension check after you qualify until your arrears are satisfied.

Each month of retiree coverage is billed one month in advance. Retirees are not eligible to participate in the Pre-Tax Contribution Program (PTCP).

Sick Leave Credit

Sick leave credit is the actuarial value of your unused sick leave. If your employer offers sick leave credit, it is calculated at the time you retire and automatically applied to offset the cost of your NYSHIP premium. If you defer coverage, your credit is calculated at the time you end deferment and enroll as a NYSHIP retiree.

Although premiums are subject to change annually, your sick leave credit will not change.

If you enroll in NYSHIP coverage as a vestee, you forfeit your opportunity to convert any sick leave to a credit—both during and after vestee status.

To receive an estimate of your sick leave credit, speak with your HBA.

SICK LEAVE CREDIT ANNUITANT OPTIONS

An annuitant is a person receiving the premium offset of your sick leave credit. Your employer may offer you the choice between a single and dual annuitant option. The option you choose determines the percentage value of your sick leave credit and its expiration.

- 1. Single Annuitant Option.** This option applies the *full actuarial value* of your sick leave credit to reduce your premiums. However, your sick leave credit will not transfer to your covered dependents after your death, meaning they won't be able to use it to offset their own premiums if they enroll in dependent survivor coverage.
- 2. Dual Annuitant Option.** This option allows you to use *70% of the actuarial value* of your sick leave credit to reduce your premiums. While this provides a smaller monthly reduction, it ensures your dependent survivors can still use the credit (at 70% actuarial value) toward their premiums after your death. The credit continues as long as your dependents remain eligible for dependent survivor coverage.

If you do not expect to have covered dependents at the time of your death (due to their age-related ineligibility or otherwise), consider this option carefully before you choose it.

You will automatically be enrolled in the single annuitant option unless you choose the dual annuitant option by submitting the *NYSHIP Sick Leave Credit Option Election Form (PS-405)* to your HBA prior to your last day on payroll. Make a copy of the signed election form for your records. **This decision cannot be changed.**

Be sure to tell your dependents which annuitant option you pick. Choosing the dual annuitant option is not a requirement for dependent survivor coverage.



Read more about dependent survivor coverage in your *General Information Book* or the *Dependent Survivor Checklist*.

OTHER RULES

Enrollees cannot use their dependents' sick leave credit to offset their own premiums. If your dependent has earned their own sick leave credit, **they must enroll in their own NYSHIP coverage upon their retirement to use it.**

If your dependent leaves benefits-eligible service before you and continues dependent status, they must preserve their sick leave credit through the *NYSHIP Health Insurance Deferral Election Form (PS-406.2)* and *NYSHIP Sick Leave Credit Preservation Form (PS-410)* before they leave payroll.

Value of Your Sick Leave Credit

	FOR YOU	FOR YOUR DEPENDENT SURVIVORS
Single Annuitant Option	100%	0%
Dual Annuitant Option	70%	70%

SPECIAL CONSIDERATIONS

Here are some special situations and what they mean for your NYSHIP coverage.

Deferring Your NYSHIP Retiree Coverage

If you are eligible for NYSHIP retiree coverage, and you have other employer-sponsored coverage, you may defer the start of your retiree coverage.

To defer coverage, submit the *NYSHIP Health Insurance Deferral Election Form (PS-406.2)* to your HBA. If you have sick leave credit you wish to preserve, you must also submit the *NYSHIP Sick Leave Credit Preservation Form (PS-410)*. Both forms must be submitted before you leave payroll.

You may end retiree coverage deferral at any time by sending a signed letter to EBD with your requested reinstatement date. That date must be the first of an upcoming month (unless you provide proof of loss of other coverage within 30 days of the event date).

When reinstated, your sick leave credit premium offset will be recalculated to a higher amount using your new life expectancy and the same actuarial table in effect when you began deferral.

If you defer coverage, your dependents are only eligible for dependent survivor coverage if you had Family coverage in effect at the time of your deferral.

Deferring Your Pension

If you defer collecting your pension from NYSLRS or an optional retirement plan, you can still qualify for NYSHIP retiree benefits. This is referred to as “constructive retirement.” Your premium will be billed by EBD directly.

Leaving Benefits-Eligible Service Early

If you leave benefits-eligible service before retirement age (i.e., pension eligibility) for non-disability reasons, you may be able to keep your NYSHIP coverage by becoming a **vestee or dependent** (if eligible).

- **Vestees** are billed for both the employer and employee shares of the premium and permanently forfeit their sick leave credit. If eligible for vestee coverage, you will receive an application in the mail; if you fail to apply, you cannot enroll later. If your vestee coverage is terminated (either voluntarily or by failing to pay premiums), you cannot resume it. You can only regain NYSHIP coverage by returning to a benefits-eligible position or as a dependent.
- If your spouse or domestic partner is eligible for NYSHIP coverage in their own right, you may continue coverage as their **dependent**.

Once you reach retirement age, you may only become a NYSHIP retiree **if you maintained continuous NYSHIP coverage as a vestee or dependent**. If you are a vestee, you will automatically be enrolled as a retiree when eligible. If you are a dependent, you will have to contact your HBA.



EBD

After you retire, the Department of Civil Service Employee Benefits Division (EBD) will become your HBA. EBD will continue to send you information to keep you informed of important coverage changes.

For information about your personal health benefits (e.g., if a procedure will be covered, how much a copay will be), contact The Empire Plan or your HMO.

How To Contact EBD

- Call 518-457-5754 or 1-800-833-4344.
- Send mail to:
New York State Department of Civil Service,
Employee Benefits Division, Albany, NY 12239.
- Securely fax documents to 518-485-5590.

For certain transactions, you will need to print and mail us a completed form. Forms are available at nyship.ny.gov.

Other transactions require you to mail us a letter. All letters must include:

- Your full name
- Your address
- The last four digits of your Social Security number
- A clear explanation of the transaction
- Your dated signature

If you need someone to contact EBD on your behalf, you must submit the *NYSHIP Authorization for Release of Protected Health Information* (EBD-543) for us to share information about your health insurance status or records.



Consultations

You may call EBD to schedule a phone or video consultation to discuss your health coverage. Please have ready any documents that can assist us in addressing your concerns.

When You Should Contact EBD

Contact EBD for any of the following.

- **If your address changes:** Call EBD, visit MyNYSHIP or submit the *NYSHIP Change of Address Form* (PS-850).
- **If your telephone number or name changes:** Call EBD or mail a signed letter.
- **If you need to correct an error on your enrollment record:** Mail a signed letter with appropriate supporting documentation.
- **If you need to add or remove a dependent:** Submit the *NYSHIP Health Insurance Transaction Form* (PS-404R). If the child has a disability, you must also submit the *NYSHIP Statement of Disability for Dependents* (PS-451) with your dependent child's physician. If your dependent child served in the military between 19 and 25 and is a full-time student, submit proof of service and student status for a reduction in their effective age for the purposes of dependent eligibility (up to four years).
- **If someone on your plan becomes eligible for Medicare for non-age reasons:** Call EBD or mail a signed letter.

- **If you want to change your plan:** Submit a completed *NYSHIP Health Insurance Transaction Form* (PS-404R), mail us a signed letter or submit a request on MyNYSHIP.
- **If you want to cancel your coverage:** Submit a completed *NYSHIP Health Insurance Transaction Form* (PS-404R).
- **If you need to report a divorce or death:** Mail a signed letter with a copy of the divorce decree or death certificate.

In the event of your death, your family should notify EBD to receive information about how to continue NYSHIP coverage for themselves. Be sure your dependents have access to your NYSHIP information and know how to contact EBD.

If you want to check the status of a claim, call The Empire Plan at 1-877-769-7447 or contact your NYSHIP HMO.

Accessibility

- **If you need help in another language:** Call EBD and tell the representative which language you need translated. A confidential conference call will begin for you, the EBD representative and a trained interpreter.
- **If you are visually impaired:** Large-print publications are available upon request for NYSHIP retirees with a disability. Call or write to EBD to request these materials.



CHECKLIST

Before You Retire

- If you aren't currently enrolled in NYSHIP or another plan offered by your employer, enroll at least 11 weeks before retirement.
- Contact your HBA to discuss:
 - Any upcoming changes to your home and email addresses
 - Continuing dental, vision and life insurance benefits
 - Applying time with another public employer to the service requirement
 - Deferring NYSHIP coverage in retirement
 - HMO coverage (if you plan on moving)
- If you are not yet eligible for NYSHIP retiree benefits, review your eligibility to continue coverage as a vestee or dependent.
- Make sure EBD has your home address to be enrolled in a Medicare Advantage (Part C) and/or Part D plan with NYSHIP. Medicare requires home addresses, not a PO box.
- If you want to enroll in the dual annuitant sick leave credit option, submit the *NYSHIP Sick Leave Credit Option Election Form (PS-405)*.

If eligible for Medicare, be sure you and your dependents are enrolled to avoid NYSHIP cancellation or a drastic reduction in overall benefits. If enrolling because of your upcoming retirement, you will have to complete a CMS-L564 form with your HBA to avoid Medicare's late enrollment fee. Send documentation to EBD if you are not eligible for premium-free Medicare Part A or Medicare as a whole.



After You Retire

- Watch your mail for any bills from EBD. Keep your payments up to date until your pension deductions begin.
- Contact EBD if you want to change your health plan.
- Contact EBD if you change your address.
- Carefully consider before you enroll in a non-NYSHIP Medicare Advantage or Part D plan. If you do, your NYSHIP coverage will be terminated.
- Submit your COBRA application to temporarily continue your New York State dental and vision benefits into retirement (see page 4). The application must be returned by the response date provided.



IMPORTANT TERMS

ANNUITANT

In the context of NYSHIP, a person receiving the premium offset of your sick leave credit.

BENEFITS-ELIGIBLE SERVICE

A period of employment during which you were eligible for NYSHIP coverage by paying only the employee share of premium. This is usually someone who works half-time or more.

COBRA

A federal law offering temporary health benefits to those who lose their coverage.

DEPENDENT SURVIVOR

The status of your covered dependents after your death. They may be able to continue NYSHIP coverage.

DUAL ANNUITANT OPTION

A sick leave credit option allowing you to use 70% of the actuarial value of your sick leave credit to reduce your premiums. While this provides a smaller monthly reduction, it ensures your dependent survivors can still use the credit toward their premiums after your death. The credit continues as long as your dependents remain eligible for dependent survivor coverage.

EMPIRE PLAN MEDICARE RX

A Medicare Part D prescription drug plan with expanded coverage for Empire Plan enrollees (currently administered by SilverScript).

EMPLOYEE BENEFITS DIVISION (EBD)

The Department of Civil Service administrator of the New York State Health Insurance Program (NYSHIP). It serves as your HBA after your retirement.

HEALTH BENEFITS ADMINISTRATOR (HBA)

Designated administrators for an agency that process enrollment in and answer questions about NYSHIP. After your retirement, EBD is your HBA.

HEALTH MAINTENANCE ORGANIZATION (HMO)

An organization delivering health care services only in a specific geographic area and only through a select network (except for emergency services or urgently needed care). NYSHIP has several HMO options that may serve as alternatives to The Empire Plan.

MEDICARE

A federal health insurance program that covers most people who are age 65 or older, people receiving SSDI for at least 24 months, and those with amyotrophic lateral sclerosis (ALS) or end-stage renal disease (ESRD).



MEDICARE ADVANTAGE (PART C) PLAN

A health plan offered by a private company and approved by Medicare to replace your Part A and Part B coverage. Many include Part D coverage as well.

NYSHIP ENROLLEE

The person whose current or former employment entitles them and their dependents to NYSHIP benefits. Covered dependents are not referred to as enrollees.

PARTICIPATING AGENCY

A city, town, municipality, school district or other local government entity 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) maintained and financed from special or administrative funds and participating in NYSHIP.

PLAN OPTION

A health insurance plan offered through NYSHIP. Options include The Empire Plan and NYSHIP-approved HMOs.

PRIMARY

Covers health benefits first. For example, if you are Medicare-primary, Medicare will pay for your health bills and NYSHIP will cover the balance. After your retirement, you and your dependents will generally be Medicare-primary when Medicare-eligible.

RETIREE

A person retired from active employment who has met the requirements to continue health coverage under NYSHIP. Enrollees with NYSHIP COBRA coverage and vestees are not considered retirees.

SICK LEAVE CREDIT

The monthly actuarial value of your unused sick leave calculated at the time you retire, which is applied to offset your share of the NYSHIP premium.

VESTED

Having worked long enough in benefits-eligible service to be eligible for retirement benefits.

VESTEE

A NYSHIP enrollee who meets all of the following criteria:

1. Has withdrawn from benefits-eligible 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 their employer for continuing health insurance in retirement
4. Is not yet pension-eligible (due to age or otherwise)

A vestee is not considered a NYSHIP retiree, although their health benefits are the same.

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Department of Civil Service
New York State Health Insurance Program

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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.

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