



GENERAL INFORMATION

This bulletin explains what you have to do to continue medical, dental, vision, and/or M/C life Insurance coverage while on Leave without Pay (LWOP). It also explains what to do if you want to suspend or cancel your coverage and how to reinstate coverage when you return from leave. Contact your agency HBA to make your choice to continue, cancel, or suspend medical, dental and/or vision coverage by completing the PS-404, or if you have any questions regarding your coverage while on leave.

MEDICAL COVERAGE

Your medical coverage is automatically continued while in LWOP status, but you must pay the appropriate premium. The premium rate depends on the type of leave you are on and may be Employee-share, Employee plus Employer Share (Full Share), or no cost (i.e. waiver of premium). You should contact your agency with questions regarding your leave status. You will be billed for medical coverage during LWOP status. Your first bill should arrive in approximately 2-4 weeks after you go on LWOP and will include all premiums due from your start date in LWOP status through the current coverage period. You will be billed monthly for any premiums due. If you wish to suspend or cancel your coverage while on LWOP, contact your agency HBA and complete the PS-404 form.

WAIVER OF PREMIUM (EMPIRE PLAN ONLY)

If you are totally disabled for at least six biweekly pay periods, you may qualify for a waiver of the medical health insurance premium while on LWOP if you are enrolled in the Empire Plan. A Waiver of Premium is not automatic. Contact your Health Benefits Administrator for information about this benefit and the PS-452 Waiver of Premium application. You must continue to remit premium payments until you are notified that your application is approved.

DENTAL & VISION

Your State administered dental/vision coverage will continue if you are in Employee Share LWOP status but is automatically terminated once you enter a Full Share LWOP status. If you wish to continue your dental and/or vision coverage while on LWOP, you should notify your agency HBA and complete form PS-404. You will be billed monthly for dental and/or vision coverage. If you also choose to continue health insurance, the dental and/or vision coverage premium charge will be included on the health insurance billing statement. Employees represented by CSEA, DC-37, or UUP should contact their Employee Benefit Fund for information regarding their dental and vision coverage.

M/C LIFE INSURANCE

Your State administered M/C life insurance coverage automatically continues while in LWOP status. You are responsible for paying the cost of the premiums. This amount will be billed monthly. If you also choose to continue health insurance, the M/C life insurance premium charge will be included on the health insurance billing statement.

IF YOU ARE IN LWOP STATUS FOR 28 DAYS or LESS

Unless you canceled or suspended your coverage prior to going on LWOP, a mandatory payment of one or two premium deductions will be taken from your paycheck(s). Contact your HBA with questions regarding the exact amount of your payroll deduction.

CONSIDER THE CONSEQUENCES

If you voluntarily suspend or cancel your coverage, or your coverage is cancelled for non-payment of premiums, there may be serious repercussions. If you separate from State service while your coverage is suspended or cancelled, you may not be able to continue your coverage for you and your dependents as a retiree, vestee, and dependent survivor or under COBRA provisions.

REINSTATEMENT OF COVERAGE WHEN RETURNING TO THE PAYROLL

If your Medical, Dental and/or Vision coverage is suspended or cancelled for non-payment, your coverage will be reinstated automatically when you return to the payroll. The Medical and Vision coverage will be effective the first day of the second payroll period following the payroll period during which you return to work. Dental coverage will be effective the first day of the month that you return to payroll.

If your Medical, Dental and/or Vision coverage is voluntarily cancelled, or your M/C Life insurance coverage is cancelled for any reason, your coverage will not be reinstated automatically when you return to the payroll. You may request reinstatement of your coverage but may be subject to late enrollment provisions. The Medical coverage will be effective the first day of the fifth payroll period following the payroll period during which you apply for coverage. Dental and Vision coverage will be effective on the date of request.

Reactivation of M/C Life Insurance coverage requires submission of proof of insurability to MetLife including a Statement of Health. M/C Life Insurance coverage will be effective first day of the payroll period following the date of MetLife's approval provided you are actively at work on that day. If you are not actively at work, coverage will take effect on the first day of the payroll period after you return to work.

RETIREMENT WHILE ON LEAVE WITHOUT PAY

Normal Retirement

To maintain NYSHIP eligibility in retirement, you must be enrolled in NYSHIP as of the date of your retirement benefit effective date and satisfy the requirements for retiring as a member of a retirement system. For more information, refer to your General Information Book or contact your agency health benefits administrator (HBA).

Disability Retirement

To maintain NYSHIP eligibility, you should continue your health insurance coverage while you wait for the decision on your disability retirement application. If you do not continue, you must apply in writing for reinstatement of your NYSHIP coverage within **60** days of the date on the letter from the retirement system announcing the decision to grant your **ordinary** or **work-related disability retirement**. Include with your request a copy of the decision from the retirement system. If coverage is reinstated due to your receipt of an **ordinary disability retirement**, you will be required to pay premiums retroactively. If coverage is reinstated due to your receipt of a **work-related disability retirement**, you will be given the option to pay premiums retroactively: from the time of cancellation by paying all missed full share and retiree payments through the current date; or beginning with the retirement date by paying all missed retiree payments; or beginning with retirement payments on a current basis. Reinstatement is only available through application to EBD.

Your General Information Book provides additional information regarding medical coverage during LWOP

NOTE: All references to continuation of medical, dental, vision, and M/C life insurance coverage contained in this bulletin apply only to the State Programs administered by the Employee Benefits Division. These are the NYS Health Insurance Program, the NYS Preferred Dental Plan the NYS Vision Care Plan and the M/C Life Insurance Plan. If you are covered under a prescription drug, and/or a dental, and/or vision care insurance program sponsored by an Employee Benefit Fund (CSEA, DC-37 or UUP), you should discuss your eligibility to continue these coverages, as well as the cost and method of remitting payment due with your personnel office, or the office of the organization which administers the program. Premiums billed by the Employee Benefits Division for continuation of medical, dental, vision, and/or life insurance do not include amounts due for benefits administered by a union Benefit Fund.