



**Department of
Civil Service**

2018 Annual Webinar for Participating Employers

Prepared for use by the Department of Civil Service, Employee Benefits Division representatives only.

Agenda

- Financial Update
- Benefit Changes
- Federal Health Care Reform Update
- Benefits Administration
- Questions & Answers





Financial Update

Ron Kuiken – Assistant Director of Financial Management

Topics

- Premium Development
- Projected 2018 Empire Plan Experience
- Projected 2019 Rate Renewal Information
- NYSHIP Billing Statement Change

Premium Development - Goals

- Lowest Premium
- Rate Stability
- Timely Approval



Empire Plan Rate Components

- Hospital +
 - Medical +
 - MHSA +
 - Rx Drug +
 - Medicare Part B+
 - Administrative Expense =
 - **Gross Rates**
- Dividends
 - Interest
 - = Net Rate**

Cost Components

Key Components

- Base Period (2018) Incurred Claims x
- Trend Factor =
- Rate Period Incurred Claims +
- Retention (Administrative Fee/Other) +
- Margin =
- Gross Premium Charge

2018 Premium Development Recap

- 6.5 % Gross Premium Increase
- \$70.0 million in dividend application
- 7.5% Empire Plan Net Premium Increase

Projected Year 2018 Empire Plan Experience¹ (000's)

	Blue Cross Hospital	UHC Medical	Beacon MHA	CVS Drug	Total
Premium	\$3,278,835	\$3,293,913	\$283,686	\$2,014,422	\$8,897,856
Incurred Claims	\$3,104,200	\$3,106,647	\$260,940	\$1,998,014	\$8,469,801
Administrative Expense	<u>\$93,303</u>	<u>\$194,130</u>	<u>\$15,562</u>	<u>\$30,097</u>	<u>\$333,092</u>
Gain/(Loss)	\$81,332	(\$6,864)	\$7,184	\$13,311	\$94,963

(1) 2019 Rate Renewal Submissions

2019 Rate Renewal

- Projected Net Premium Increase: 0.9%
- Includes 6.2% Trend
- Rate action is considerably lower than the Plan's historical average annual increase due to the re-procurement of the Prescription Drug Program contract and the implementation of benefit changes effective January 1, 2019
- \$150 Million Dividend Application

Projected Dividends All Payors (in Millions)

	Dividends
Available as of 12/31/17	\$220.7
2017 Earned	+ \$260.2
2018 Projected Applied	- \$70.0
Projected Available 12/31/18	\$410.9
2018 Projected Earned	+ \$107.9
2019 Projected Applied	- \$150.0
Projected Available as of 12/31/19	\$368.8

NYSHIP Billing Statement Change

- Beginning in December, monthly NYSHIP billing statements will be updated with a new remittance page
- The new remittance page will include an agency “scan line” to improve processing speed and accuracy
- Agencies will detach the top portion of the new remittance page and send it, along with the check/payment, to EBD’s banking vendor using the provided blue envelopes.
- December billing statement (January 2019 Coverage) will include insert letter announcing the change

Questions?





Benefit Changes for 2019

MaryEllen



NYSHIP

New York State
Health Insurance Program

Benefit Update

Presenter- Mindy Beyer
Contract Manager

New York State Department of Civil Service
Employee Benefits Division

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6

Benefit Changes for 2019

- Medical, Hospital, and Mental Health & Substance Abuse changes agreed to by NYS employee unions will be extended to PAs/PEs in 2019 as follows:

In-Network Medical	Current Copayment	Change Effective 1/1/19
Office Visit, Office Surgery, Radiology, Lab, PT, Chiropractic, OT, Convenience Care	\$20	\$25
Non-Hospital Urgent Care Center Visit	\$20	\$30
Non-Hospital Outpatient Surgical Location Visit	\$30	\$50
Licensed Ambulance Service	\$35	\$70

In-Network Hospital	Current Copayment	Change Effective 1/1/19
Outpatient Physical Therapy	\$20	\$25
Urgent Care Visit, Outpatient Services for Diagnostic Radiology and Lab	\$40	\$50
Outpatient Surgery	\$60	\$95
Emergency Department Visit	\$70	\$100
Skilled Nursing Facility Days (In and Out of Network)	365 x 2	120 x 2

Benefit Changes for 2019

In-Network Mental Health & Substance Abuse	Current Copayment	Change Effective 1/1/19
Mental Health Professional Office Visit	\$20	\$25
Outpatient Substance Abuse Treatment Program Visit	\$20	\$25
Emergency Department Visit	\$70	\$100

Non-Network Benefits	Current Deductible/Coinsurance	Change Effective 1/1/19
Deductible	\$1,000 Enrollee \$1,000 Spouse/DP \$1,000 Children (combined)	\$1,250 Enrollee \$1,250 Spouse/DP \$1,250 Children (combined)
Coinsurance	\$3,000 Enrollee \$3,000 Spouse/DP \$3,000 Children (combined)	\$3,750 Enrollee \$3,750 Spouse/DP \$3,750 Children (combined)

- **Prescription Drug Program:** Effective January 1, 2019, the 30-day quantity limit for maintenance medications required by the New to You Program will be eliminated.

Questions?





NYSHIP
New York State
Health Insurance Program

Federal Health Care Reform Update

Presenter – Jesse Horton
Policy Analysis and Strategic Planning Unit

PA & PE PPACA Requirements

- The “individual mandate” has been repealed for 2019, but employer reporting requirements remain in effect
- Employer Shared Responsibility provisions, commonly known as the “employer mandate”
- Reporting Requirements to which Empire and Excelsior Plan employers must adhere
- Dependent Social Security Number solicitation
- Penalty Letters
- Each employer is responsible for their own compliance!

Employer Shared Responsibility Provisions

- “Employer Mandate”
- Large employers must offer affordable and comprehensive health insurance benefits to 95% of full-time employees
- Failure to comply could result in severe federal penalties
- Who is a “large employer”?
 - Employers with 50 or more employees meeting federal full-time criteria
 - Employee count is based on the number of employees during the preceding calendar year

Reporting Requirements

- All NYSHIP employers are subject to PPACA reporting requirements
 - Including those not designated as “Large Employers”
- Employers must provide a form, known as Form 1095-B or 1095-C, to all full-time employees, retirees, vestees, dependent survivors, and COBRA enrollees
- These forms must be provided to employees and enrollees by 1/31/19 and to the IRS by 2/28/19 if filing on paper and 4/1/19 if filing electronically
- Employers do not have to report for Medicare-primary enrollees

What Form Should My Employer Use?

- Employers designated as “Large Employers” should provide Form 1095-C to its employees and enrollees
- All other employers should provide Form 1095-B to its Empire Plan enrollees
- For each of the last two years, the IRS has extended the due dates – we do not expect a similar extension this year

Dependent SSN Solicitation

- Form 1095-B and Form 1095-C use Social Security numbers to identify enrollees
- Employers must make three “good faith efforts” to solicit missing dependent SSNs:
 1. At the time of enrollment;
 2. By December 31 of the year following enrollment; and
 3. Once in the following year
- NYSHIP employers still must ask for dependent SSNs upon enrollment

Penalty Letters

- IRS is sending penalty notices for prior tax years
- Penalty letters will be addressed to the individual whose name appears on the IRS Business Master File
- Alert your tax and finance department
- Responses are time sensitive!

EBD Assistance

- EBD has two downloadable reports available to assist NYSHIP employers with these requirements
 - The first report shows all enrolled dependents with a missing SSN
 - The second report provides all of the information to be included in Part III of Form 1095-C or Part IV of Form 1095-B
- HBA Memos PA15-23, PAEX15-21, PA 16-02, PA EX 16-02 provide information on how to access these reports
- EBD FAQ: <http://www.cs.ny.gov/employee-benefits/nyship/shared/publications/faq/2015/pa-pe-ppaca-faq.pdf>

Questions?



Benefits Administration Topics

- Department of Civil Service Systems and Access
- Submitting Requests to the Employee Benefits Division (EBD)
- Medicare and NYSHIP
- Communications and Publications Update
- EBD Contacts



NYSHIP
New York State
Health Insurance Program

Department of Civil Service Systems and Access

Presenter- Tim Burke

New York State Department of Civil Service
Employee Benefits Division

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The Department of Civil Service (DCS) Systems NYBEAS and HBA Online

Agencies who participate in NYSHIP are granted access to Department of Civil Service (Department) systems. The following provides detailed information regarding the systems purpose and how to obtain, remove or change who has access.

1

The Department of Civil Service (DCS) Systems NYBEAS and HBA Online

NYBEAS is:

The New York Benefits Eligibility and Accounting System (NYBEAS) is the system that maintains New York State Health Insurance Program (NYSHIP) enrollment information for NYSHIP participating agencies and employers.

2

The Department of Civil Service (DCS) Systems NYBEAS and HBA Online

HBA Online is:

an online resource that contains current and historical NYSHIP information, as well as up-to-date memos and announcements specifically prepared for NYSHIP participating agencies. The Department communicates with HBAs through HBA Online.

3

The Department of Civil Service (DCS) Systems NYBEAS and HBA Online

Who needs access to NYBEAS and HBA Online?

The agency staff member (s) who work directly with employee benefits and is responsible for providing benefit information to their members and enrolling and updating enrollees benefit information. EBD refers to the staff responsible for administering NYSHIP benefits as the agency Health Benefits Administrator (HBA).

NYBEAS

NYBEAS PRODUCTION

Home | Worklist | Add to Favorites | Sign Out

Menu

Search:

- > My Favorites
- Benefits**
 - History
 - Plan History
 - Transactions
- > Billing
- > COBRA
- > MyNYSHIP
- > NYBEAS Processes
- > NYBEAS Reports
- > NYSTEP Review
- > Income Protection Plan(IPP)
- > EBD Call Center
- > Data Corrections
- > Workforce Administration
- > System Announcement
- > Workforce Monitoring
- > Set Up HRMS
- > Worklist
- > Tree Manager
- > Reporting Tools
- > User Info
- > PeopleTools
- [Change My Password](#)

Main Menu >

Benefits

Select benefit plans, track company cars & FMLA, calculate leave accrual & annuity, maintain primary job, NDT, FSA details, auto enrollment, COBRA, and merchants.

History
Allows users to view history of transactions for a given enrollee.


- [NYBEAS Update History](#)
- [Archived Accounting](#)
- [Billing Options](#)
- [Direct Pay Transaction ID](#)
- [Employee Compact History](#)
- [Employee Information Changes](#)
- [Enrollee Supplemental E-Box](#)
- [DP Enrollee Billing Number](#)
- [Medicare Elig 65 Letters](#)
- [Letter Notification](#)
- [Life Insurance Premium](#)
- [Med Advantage HMO Transactions](#)
- [National Medical Support Order](#)
- [OOP Eligibility History](#)
- [Sick Leave History](#)
- [OSC Salary Grade Inquiry](#)
- [OSC Unsettled Group](#)
- [Blue Cross](#)
- [CMS/RDS Data](#)
- [DEAS](#)
- [Conversion Data](#)
- [Empire Card](#)
- [PEP](#)
- [Search](#)
- [Caremark EGWP](#)

Plan History
Tracks history of rates, department data, broadcast message and other data associated with NYSHIP.

- [Broadcast Messages](#)
- [Flat Rate Summary](#)
- [Message Agent Log](#)
- [Review NYBEAS/NYSTEP JobCodes](#)
- [Department Data](#)
- [Agency Recon Report Inquiry](#)

Transactions
Allows for the processing of NYBEAS transactions that change an enrollee's coverage.

- [Young Adult Enrollment](#)
- [Benefit Plan Change](#)
- [Benefit Program Change](#)
- [Billing Option Change](#)
- [Cancel Enrollment](#)
- [Change Coverage](#)
- [COBRA Disability](#)
- [Comments](#)
- [Contribution Rate Change](#)
- [Corrections Requests](#)
- [Unsettled Grp Contribution Chg](#)
- [Dependent Add](#)
- [Dependent/Beneficiary](#)
- [Dependent Delete](#)
- [EGWP Manual Action Page](#)
- [Empire Card Request/History](#)
- [Enroll/Waive Benefits](#)
- [Federal Qualification Change](#)
- [Letter Notification](#)
- [Marriage Domestic Partner](#)
- [Medicare Change](#)
- [Medicare Part D Change](#)
- [MRX Exception](#)
- [National Medical Support Order](#)
- [Payment Method Change](#)
- [PE First Eligibility Dates](#)
- [PE Set Rate Qualifier](#)
- [Personal / Employment](#)
- [Preferred Payment Change](#)
- [Rate Qualifier Change](#)



NEW YORK
STATE OF OPPORTUNITY.

Department of Civil Service

NYBEAS

Below are some examples to show what NYBEAS is used for:

- Enrollments (processing and viewing)
- Changing coverage
- Adding /deleting dependents
- Marital status changes
- Enrollee address changes
- Running agency reconciliations
- Medicare Transactions

HBA Online



Services News Government Local

Q Search

Location Translat

Department of Civil Service Online Services Job Seekers State Employees Retirees HR Professionals

hba_online
benefits resource center

HBA Online has a new web address, <https://www.cs.ny.gov/employee-benefits/hba>. Please update any bookmarked pages.

You Should Know...
Easy Reference
Publications & Forms
HBA Memos
Policy Memos
Phone Numbers / Links
Meetings & More
Health Plan Choices
HBA Manuals
E-Learning
HIPAA Privacy Information
Site Map
Contact Us / Disclaimer
NYSHIP Home

10/14/2017 9:04 am

Find the benefit, click on the group. *Benefits vary by group.*

Current Topics

- 2016 PA/PE Webinars
- Young Adult Option Coverage

General Information Book for:

- NY Active
- NY Retiree
- Participating Employers (PEs)
- Participating Agencies (PAs)

Pre-retirement Planning

- New York State and PE

NYSHIP

- NYS Agencies
- Participating Agencies and Participating Employers

dental

- APSU
- C-82
- MC
- NYSCOPBA
- PBA Supervisors
- PBA Troopers
- PE
- PEF
- PIA
- SEHP

vision Davis Vision Information

- APSU
- C-82
- MC

life

- M/C

IPP Income Protection Plan

- M/C
- Legislature
- Special Enrollees
- DC-37

survivor benefits

- New York State Active Employees

workers' compensation

- ARS Publications for Executive Branch Agencies and Unified Court System
- ARS Manual

HBA Online

Below are some examples to show what HBA online is used for:

- HBA memos
- Policy memos
- HBA Manuals
- Forms
- E- Learning videos
- Listing of NYBEAS system announcements
- Empire Plan resource materials
- Ordering publications
- Premium costs

8

HBA Online and NYBEAS System Access

How does agency staff obtain access to NYBEAS and HBA online?

HBA Online and NYBEAS System Access

Agencies must first designate a Data Access Officer (DAO).

The DAO is the officer of the agency who is authorized to request user permissions to NYBEAS and HBA Online.

There should also be a back up DAO named

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NYBEAS and HBA Online System Access

Data Access Officer (DAO)

- The DAO should be established by each agency
- If you do not have a DAO please refer to Memo PE 18-04, fill out the attached form EBD-545 and submit by fax or mail
- If you are not sure of your DAO, your EBD contact can assist by calling the HBA help line at 518-474-2780
- To remove a DAO form EBD-545 should be filled out and submitted by fax or mail

1

HBA Online and NYBEAS System Access

- The DAO may now update user permissions through the Civil Service Online Permission Request System (OCSPR)
- OCSPR is located on the DCS website at:
<https://www.cs.ny.gov/login/?tlsd=/permissions-request/index.cfm>

2

HBA Online and NYBEAS System Access

Responsibilities of the DAO

- The DAO will provide HBA's with the necessary links to NYBEAS and HBA Online
- The DAO will provide the HBA(s) with the USER ID and Password that they have been assigned by DCS for NYBEAS and HBA Online

3

HBA Online and NYBEAS System Access

Agencies must also designate a Health Benefits Administrator (s) (HBA (s) for the agency

The HBA is the person who works directly with employee benefits and is responsible for providing benefit information to their members and enrolling and updating enrollees benefit information on NYBEAS.

There can be more than 1 HBA within an agency

Agency Contacts

In addition to the Data Access Officer (DAO) information EBD has on record for your agency, EBD maintains agency contact (s) information for each agency.

The information includes; Name, Address, Email and Phone Number for any staff member within the agency that EBD should contact with questions concerning enrollees. Some examples are:

Health Benefit Administrators

Benefits Clerks

Agency Officers

Mayors

Superintendents

Chief Financial Officers

Agency Contacts

It is important to keep your agency contact information up to date. Any changes to this information should be reported to EBD in writing.

Agency Name

Agency Code

Name

Address

Title

Email

Phone

** When providing an update be sure to include the name of any staff member that should no longer be listed as your contact.

Questions?





NYSHIP
New York State
Health Insurance Program

Submitting Changes to EBD (Correction requests Vs. Letters)

Presenter- MaryEllen Brucculeri

**New York State Department of Civil Service
Employee Benefits Division**

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Submitting Requests to EBD

Agency HBAs are responsible for updating enrollee information by processing a transaction on NYBEAS. Some transactions will need EBD assistance, such as ;

- Transactions over 6 months old at time of processing
- A transaction you processed that needs to be corrected
- Any transaction that an agency is prevented from processing (could be various reasons)

Submitting Requests to EBD

Most NYBEAS transactions can be fixed by submitting a “Correction Request”

Some will require a “letter” along with supporting documentation be sent to EBD

It depends on what needs to be fixed before you can determine whether to process a ‘Correction Request’ or to send a “letter”

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Submitting Requests to EBD



1

Transactions Requiring a Correction

When a mistake is made when entering and saving the transaction on NYBEAS, the correction will normally involve:

- Correcting (Change) an effective date, or;
- Deleting (Delete) a transaction processed in error

The appropriate correction request would be a 'Change' or 'Delete'.

Note- Most mistakes are the result of not referencing the documents provided or double checking the effective date before saving.

2

Transactions Requiring a Correction

A correction request is also needed when an agency is simply prevented from processing the transaction due to any of the following reasons:

- The transaction is blocked by a more recent dated transaction preventing it from processing
- Processing Pension Deduction
- Over 6 months

The appropriate correction request to use when in need of general processing, is an 'Insert'.

3

Transactions Requiring a Correction

Below is an example of a request to “change” a DEP/NWB effective date.

Benefits								
Plan Type	Txn Type	Action	Reason	Benefit Plan	Covrg Cd	Event Dt	Request Dt	Effdt
10	Change	DEP	NWE	001	4			10/01/2016
Dependents		To	DEP	NWE	001	4		07/06/2016

Job							
Txn Type	Action	Reason	Job Effdt	Department	NU	PCT Fill	

For this correction the ‘benefits’ portion is completed.

If the correction was to fix a hire, retire, or term date the ‘Job’ portion of the correction is completed.

4

Transactions Requiring a Correction

When completing a correction request, be sure to enter a comment that summarizes and matches the request:

The screenshot displays a web interface for managing comments. At the top, a dark blue header contains the text "Existing Comments" on the left, and navigation links "Find | View All" in the center, and "First 1 of 1 Last" on the right. Below this header is a large white text box containing the text: "Correction to change effective date of Dep Add for Jake Benton from 10/1/2016 to 7/1/2016. The incorrect request date was entered in error. - MXB1 (MXB1 2018-11-08 11:11)". To the right of this text box are vertical scroll arrows. Below the text box is a horizontal bar with the text "Enter your comments below & click on Add Comments." in a light brown font. Underneath this bar is a large white text input area with vertical scroll arrows on its right side. To the right of the input area is a yellow button with the text "Add Comments".

When the correction is returned to your worklist, be sure to check comments. The corrections unit may have responded with follow up required by you.

Transactions Requiring a Correction Recap

When completing a correction request you will have the following choices;

- **Insert**
 - When the transaction you are attempting has a later date blocking yours
 - When you are attempting to process a transaction over 6 months old
 - When you are prevented from processing a transaction and receive an error message.
- **Change**
 - When you need to change an effective date of a transaction that was saved
- **Delete**
 - When you need to remove a transaction that should not have been processed

Choose the action that matches what you want us to do

Transactions that Require a letter

There are certain situations where a correction request cannot be done, and a letter is required along with supporting documentation.

Example of requests that require a letter:

- Updating a record to Disability Retirement
 - Include Retirement System letter that provides the effective date
- CMS Reinstatements
 - Include supporting documentation (Medicare card, corrected Address or copy of other Medicare plan termination letter)
 - The need for EBD to process a transaction due to NO NYBEAS ACCESS
 - Be sure the steps are taken to obtain access as explained in the previous slides

7

Reminders when Submitting Requests to EBD

- When sending requests do not send duplicates. I.e.; do not also send a letter when a correction request was sent
- When sending a letter it should be on Agency letterhead, and include:
 - Agency code
 - Enrollee SSN/Employee ID
 - Enrollee name
 - The reason it is being sent

Reminders when Submitting Requests to EBD

- Do not send EBD proof for transactions you processed (unless EBD specifically requests it)
- Send supporting documentation only when necessary. When the HBA signs a PS404 form they are verifying that the appropriate documents are on file with the agency. See slide 56 for situations that require proof/supporting documentaiton

Questions?





NYSHIP

**New York State
Health Insurance Program**

NYSHIP and MEDICARE

Presenters-

MaryEllen Brucculeri

Tim Burke

**New York State Department of Civil Service
Employee Benefits Division**

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Topics

- Overview of Medicare
- Medicare Beneficiary ID (MBI) (Formerly HICN)
- When To Enroll in Medicare Parts A and B
- Empire Plan Medicare Rx
- NYSHIP HMO Advantage Plans
- Role of the Health Benefits Administrator

Medicare

What is it?

- The federal health insurance benefit program administered by the Centers for Medicare & Medicaid Services (CMS)

Remember

- “When first eligible for Medicare as a retiree, I must enroll in both Parts A and B.”

Parts of Medicare

Part A	Part B	Medicare Advantage Plans (Part C)	Part D
Inpatient hospital care	Doctors' services and outpatient hospital services	HMO provided package that includes Parts A, B and usually D	Prescription drugs

When Does Medicare Eligibility Begin?

- Age 65
- After two years of Social Security Disability Insurance (SSDI) eligibility
- If you receive SSDI benefits due to amyotrophic lateral sclerosis (ALS)
- Diagnosis of end-stage renal disease (ESRD)

NYSHIP HMOs and Medicare

Traditional HMOs

- Coordinate benefits with Original Medicare Parts A and B

HMOs with Medicare Advantage Plans

- Medicare and NYSHIP coverage through HMO
- Care outside HMO service area covered to the extent allowed by HMO

Prescription Benefit and Medicare Part D

- Prescription coverage continues when you become Medicare primary
- Most NYSHIP plans enroll you in a Medicare Part D plan
 - The Empire Plan
 - NYSHIP Medicare Advantage HMOs
- Traditional HMOs do **not** have a Medicare Part D plan

Important!

- Enrollment in a non-NYSHIP Medicare Part D plan or Medicare Advantage Plan may result in cancellation of your NYSHIP coverage

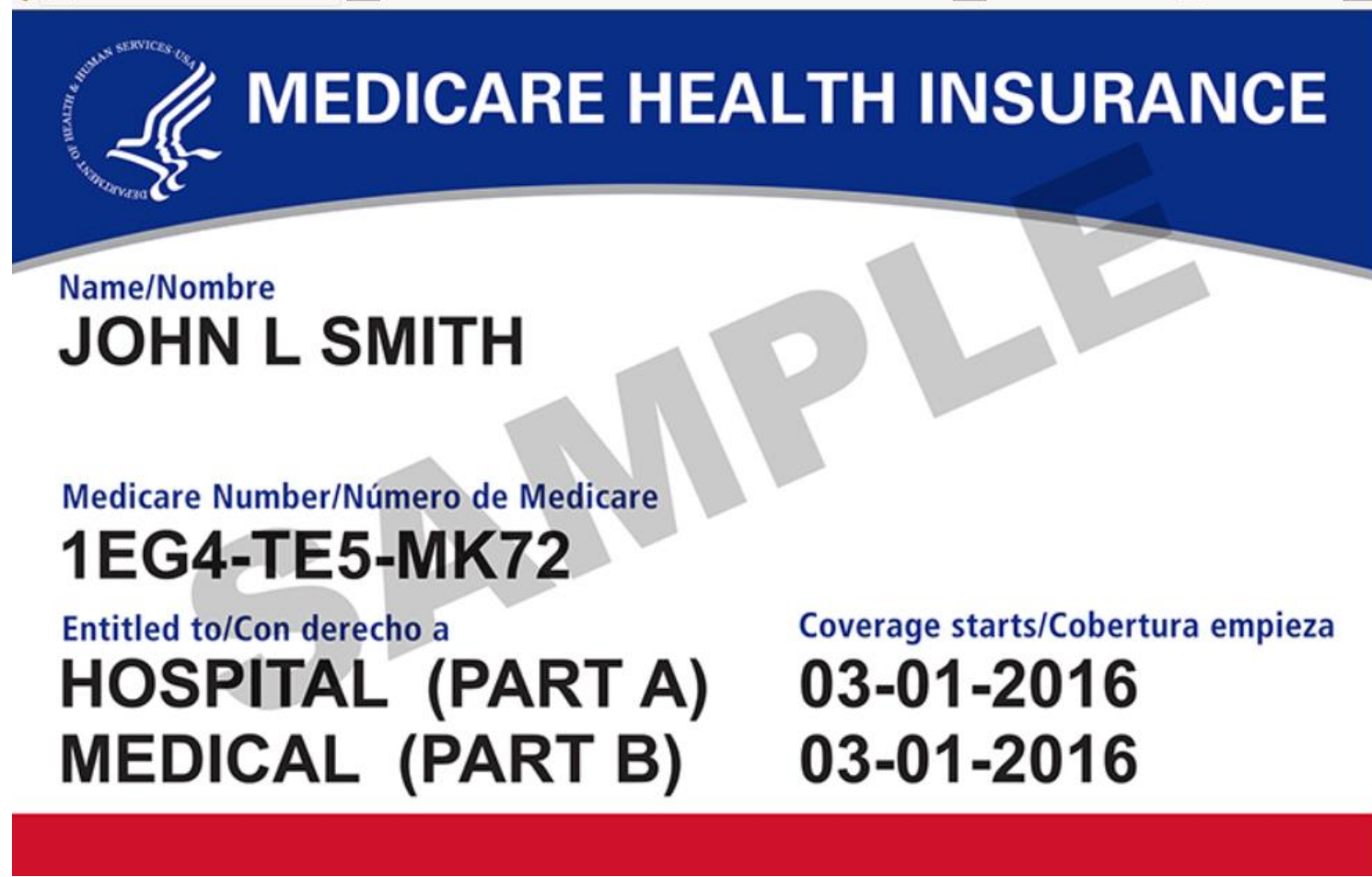
Medicare Beneficiary ID (MBI) (Formerly SSN/HICN)

Medicare Beneficiary ID (Formerly HICN)

CMS is replacing the Social Security Number based Health Insurance Claim Number (HICN) with a **Medicare Beneficiary ID**. The transition period began April 1, 2018 and will run through December 31, 2019.

January 1, 2020, CMS will no longer accept a HICN for the submission and processing of claims

Sample Medicare Card



The image shows a sample Medicare Health Insurance card. At the top left is the Department of Health & Human Services USA logo, featuring an eagle with wings spread. To the right of the logo, the text "MEDICARE HEALTH INSURANCE" is written in large, bold, white capital letters on a dark blue background. Below this, the cardholder's name "JOHN L SMITH" is printed in large, bold, black capital letters. Underneath the name is the Medicare Number "1EG4-TE5-MK72" in large, bold, black capital letters. To the right of the Medicare Number, the coverage start date "03-01-2016" is printed in large, bold, black capital letters. Below the Medicare Number and coverage start date, the cardholder's entitlement to Hospital (Part A) and Medical (Part B) coverage is listed, along with the corresponding coverage start date "03-01-2016" for both. A large, light gray "SAMPLE" watermark is diagonally across the center of the card. At the bottom of the card is a solid red horizontal bar.

DEPARTMENT OF HEALTH & HUMAN SERVICES-USA

MEDICARE HEALTH INSURANCE

Name/Nombre
JOHN L SMITH

Medicare Number/Número de Medicare
1EG4-TE5-MK72

Entitled to/Con derecho a
HOSPITAL (PART A)
MEDICAL (PART B)

Coverage starts/Cobertura empieza
03-01-2016
03-01-2016

When Does Medicare Eligibility Begin?

- At age 65; or
- Regardless of age, after being entitled to Social Security Disability Insurance (SSDI) benefits for 24 months; or
- Regardless of age, when diagnosed with End-Stage Renal Disease (ESRD); or
- When receiving SSDI benefits due to Amyotrophic Lateral Sclerosis (ALS)

Enrolling in Medicare

- NYSHIP requires enrollees and their covered dependents to be enrolled in Medicare when it is primary to NYSHIP
- It is the responsibility of **your enrollees' and covered dependents'** to enroll in Medicare Parts A and B when first eligible for primary Medicare coverage. Enrollment is not automatic in all cases

Enrolling in Medicare

- As a reminder and to help your retired enrollee(s) and dependent(s), as well as your active enrollees, understand the importance of enrolling in Medicare, we send out what we call our ***“Happy 65th Birthday Letter”*** five months before an enrollee or dependent turns 65
- These letters are posted on NYSHIP Online under the Notices page that’s available on the footer on the homepage

Updating NYBEAS to Reflect Medicare Primacy

- NYBEAS will attempt to update the Medicare Primary indicator for enrollees and dependents who should be treated as Medicare-primary approximately 2 months prior to their 65th birthday.
- When your enrollee(s) and/or dependent(s) become Medicare-eligible **prior to age 65 (due to disability) or Amyotrophic Lateral Sclerosis (ALS)**, they must notify your office so the enrollment record can be updated.
- When an enrollee or dependent becomes Medicare-eligible due to End-Stage Renal Disease (ESRD), send a copy of the member's Medicare card to the Employee Benefits Division, who will research the ESRD coordination period and update the enrollment record.

NYSHIP and Medicare

- When an enrollee is Medicare Primary, claims are to be submitted to Medicare first. Once Medicare considers the claim, it is then sent to The Empire Plan for secondary payment.
- This process is referred to as Medicare Crossover. When an enrollee's NYBEAS account is updated to Medicare Primary, he or she is automatically enrolled in Crossover with The Empire Plan.

Determining Medicare Primacy

When an employee and/or his or her dependents are eligible for Medicare, coordination of benefits occurs.

Enrollee is an **ACTIVE** Employee

- Medicare is *secondary* to NYSHIP coverage
- Exceptions
 - End-Stage Renal Disease after completing Medicare's 3 month waiting period and 30 month coordination period
 - Domestic partners age 65 or over

Enrollee is **RETIRED**

- Medicare is *primary* to NYSHIP coverage
- Exception:
 - End-Stage Renal Disease during Medicare's 30 month coordination period

Questions?



The Empire Plan Prescription Drug Benefit

Empire Plan Medicare Rx

NYSHIP enrollee(s) and their dependent(s) have prescription drug coverage as part of their health insurance coverage.

- All NYSHIP prescription drug coverage pays on average as much or more than Medicare's standard Part D Plan. This is called *creditable coverage*.
- Prescription coverage continues even when Medicare becomes the primary coverage.
- Empire Plan enrollees are enrolled in The Empire Plan Medicare Rx (SilverScripts)

The Empire Plan Prescription Drug Benefit

Empire Plan Medicare Rx

When attempting enrollment in Empire Plan Medicare Rx, enrollees will be notified when additional information is needed in order to remain enrolled in The Empire Plan.

CMS/Med Rx Enrollment/Terminations

If an enrollee or dependent is terminated from The Empire Plan, a letter will be sent explaining that additional information is needed to stay enrolled in The Empire Plan. The reason they became terminated is necessary to determine what is needed for coverage under The Empire Plan to be reinstated.

Please note that reinstatement will not guarantee that coverage will be continuous (i.e., a late enrollment penalty may apply).

The Empire Plan Prescription Drug Benefit

Empire Plan Medicare Rx

The below situations will prevent an enrollee or dependent to be enrolled in Empire Plan Medicare Rx (SilverScript). CMS will reject a request to enroll when any of the following have occurred:

- Wrong DOB on NYBEAS
- Wrong address on NYBEAS
- When a P.O Box address only is listed on NYBEAS
- Enrollment in another Medicare Plan
- Missing or Incorrect Medicare ID (MBI)
- First or last name mismatch between NYBEAS and CMS

If any of the above situations exist when attempting enrollment in Empire Plan Medicare Rx, enrollees will be notified that additional information is needed in order to remain enrolled in The Empire Plan.

CMS/Med Rx Enrollment/Terminations

If EBD is unable to enroll an enrollee or his/her dependent in The Empire Plan Med Rx, the following steps are taken:

1. EBD is notified by CMS that enrollment in Med Rx rejected
2. EBD sends letter to enrollee or dependent notifying them of the issue with a 30 day deadline to respond
3. EBD awaits required information
4. If required information is received within 30 days, enrollee can be reinstated with no lapse
5. If *not* received within 30 days, EBD proceeds with cancellation
6. If response with required information is sent after the 30 days, Enrollee can be reinstated subject to the normal waiting period rules.

Role of the Health Benefits Administrator

One of the most important responsibilities of the HBA is to ensure that NYBEAS health benefit information is accurate and up to date for all enrollee(s) and/or dependent(s). Such as;

- Name is correct: First and Last Name (should match what is on file with SSA) If you have the name as “Cindy” and SSA has the name as “Cynthia” you need to update your records to match SSA
- Obtaining enrollees’ Medicare cards and updating Medicare Primacy Indicator on NYBEAS at time of retirement (or when applicable)
- Verify dates of birth
- Verify address. If enrollee has a P.O Box, a permanent/residential address must also be listed on NYBEAS
- Confirm that Medicare-primary enrollee and/or dependent is not enrolled in any other Medicare D plan

Role of the Health Benefits Administrator

HBA's can assist their retirees with determining if they are enrolled in another Medicare plan by referring them to the

www.Medicare.gov Medicare Plan Finder “Check your enrollment”

Spanish | A A | Print

About Us | Glossary | CMS.gov | Medicare.gov | MyMedicare.gov Login

Medicare.gov | Medicare Plan Finder

The Official U.S. Government Site for Medicare

Medicare Plan Finder Home | Learn More About Plans | Help | Glossary | FAQ

Home → Check Your Enrollment

Check Your Enrollment

Use this tool to check your current and future enrollment.

Enter Your ZIP Code:

Enter Your Medicare Information:

Enter Medicare Number:
Where can I find my Medicare Number?

Last Name:

Effective Date for Part A:
Not Part A? Select here.

Date of Birth:

This page is secured to protect your personal information.

Continue

[Back to Top](#)

Questions?



Publications and Enrollee Notices

Communications Update

Recent publications:

- 2018 Participating Provider Directories
- 2018 Creditable Coverage Notice
- Child Health Insurance Program (CHIP) Notice for 2018

Upcoming Publications

Fall 2018

- Empire Plan 2019 *At A Glance*. Enrollee mailing will also include: 2019 versions of The Empire Plan Flexible Formulary, *Out of Network Reimbursement Disclosure*, *Preventive Care Coverage Chart*, and the *Nondiscrimination Notice*
- *Option Transfer Information* for 2019 flyer for PE active enrollees
- *Health Insurance Choices* for 2019 and *2019 Rates & Information for PE Retirees* with Personalized Sick Leave information

Upcoming Publications

2019

- *Empire Plan Report*
- *PE General Information Book 2019*
- *Empire Plan Certificate*

9

Be sure to check HBA online at a minimum of once a week to stay informed



HBA Online has a new web address, <https://www.cs.ny.gov/employee-benefits/hba>. Please update any bookmarked pages.

Find the **benefit**, click on the group. *Benefits vary by group.*

You Should Know...
Easy Reference
Publications & Forms
Phone Numbers / Links
Meetings & More
Health Plan Choices
HBA Manuals
E-Learning
HIPAA Privacy Information
Site Map
Help / Tutorial
Contact Us / Disclaimer
NYSHIP Home
Super Search
Suggestions

10/14/2016 8:06 am

Current Topics
 2016 PA/PE Webinars
 Young Adult Option Coverage

NYSHIP For Employees of:
 New York State
 Participating Employers (PE)
 Participating Agencies (PA)
 Retired NYS Employees
 Retired PE Employees

Empire Plan Providers,
 Pharmacies and Services

NYPERLSM
 NYS Agencies
 Participating Agencies and
 Participating Employers

dental

- APSU
- C-82
- M/C
- NYSCOPBA
- PBA Supervisors
- PBA Troopers
- PE
- PEF
- PIA
- SEHP

vision Davis Vision Information

- APSU
- C-82
- MC
- NYSCOPBA
- PBA
- PE
- PEF
- PIA
- SEHP

life

- M/C

IPP Income Protection Plan

- M/C
- Legislature
- Special Enrollees
- DC-37

survivor benefits

- New York State Active Employees

workers' compensation

- ARS Publications for Executive Branch Agencies and Unified Court System
- ARS Manual
- Dispute Resolution Program
- Workers' Compensation Pharmacy Benefits
- Claimant Information Packet



General Reminders

Before Calling EBD

- Have NYBEAS open
- Check NYBEAS Update History for recently processed transactions
- Have SSN/Employee ID available

Billing Inquiries

- Be sure to run a reconciliation every Monday following the first Friday (billing is run the first Friday of every month)
- Send full payment that is reflected on your billing statement. Don't make adjustments *even though* changes may have been made resulting in a credit that would affect future bill. Credit adjustments will be reflected for transactions that were processed in the next billing cycle

1

General Reminders

When receiving inquiries from your employees;

- Assist your enrollees
 - If you need assistance please call the HBA Helpline. Do not refer caller to EBD
- If inquiry concerns a medical bill or problem receiving services, check NYBEAS for enrollment status
 - If enrollee is covered and services were denied, refer caller to the Empire Plan 877-769-7447
- HBAs should be calling EBD on behalf of their enrollees; not referring them to EBD

How To Reach Us

HBA Line PA/PE Unit

(518) 474-2780 Press 1

for Participating Agency

Responds to questions about:

- Enrollee needs services
- NYBEAS Processing
- Medicare
- Agency Bill
- Retiree Coverage
- Eligibility
- Effective dates of coverage
- Agency Reconciliation
- COBRA
- Survivor Coverage

Public Employer Liaison Unit

(518) 549-2356

Responds to questions about:

- Compliance
- Agency Resolution Changes
- GASB 45
- Hold Harmless
- Agency Participation
- NYSHIP Policies

Thank you for joining us today!

EBD Contact for HBAs

Phone: 518-474-2780

Address: NYS Department of Civil Service
Employee Benefits Division
Albany, NY 12239

Fax: 518-485-5590

Website: www.cs.ny.gov