



# NYSHIP

New York State  
Health Insurance Program

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

# Click on State Employees

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Job Seekers

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Retirees

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Paid Family Leave

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**NYSHIP**  
New York State  
Health Insurance Program

# NYSHIP Online

**nyshiponline**  
Employee Benefits Division  
Department of Civil Service

- Current Topics**
- What's New?
- Health Benefits & Option Transfer**
- Other Benefits
- Using Your Benefits
- Forms
- Planning to Retire?
- Find a Provider
- Calendar
- MyNYSHIP - Employee Self-Service



# NYSHIP

## What is NYSHIP?

- The New York State Health Insurance Program
  - The Empire Plan
  - NYSHIP-approved Health Maintenance Organizations (HMOs)

## Who is eligible for NYSHIP?

- Employees, retirees and their families from:
  - New York State Agencies
  - Participating Employers
  - Participating Agencies

# Today's Topics

- Eligibility
- Cost
- Sick Leave Credit
- Dental and Vision
- Eligible Dependents
- Dependent Survivors
- Medicare



# Eligibility for Retiree Health Benefits

- Minimum 10 years of service in a NYSHIP benefits-eligible position
- Eligible for a NYS pension
- Enrolled in NYSHIP at the time of your retirement as an:
  - Enrollee
  - Dependent
  - Enrollee in the Opt-out Program

# Benefits Eligibility Example

## Does Joe qualify?

- Total of 12 years of NYSHIP service
  - Four years at a NYS Agency
  - Four years at a Participating Employer
  - Four years at a Participating Agency
- Eligible for a NYS pension
- Enrolled in NYSHIP

Yes, Joe is eligible for retiree health insurance benefits.

# Disability Retirement

<b>Non-Work-Related Disability</b>	<b>Work-Related Disability</b>
10 years of NYSHIP benefits-eligible service	Service requirement is waived



# Disability Retirement Example

## Does Joe qualify?

- Eight years of service in a benefits-eligible position
- Enrolled in NYSHIP plan
- Injured at work and retiring due to disability

Yes, Joe qualifies for retiree coverage. The 10 years of service is waived because his disability is work related.

# Retiree Letters

<b>Notification Letter</b>	<b>“Dear Retiree” Letter</b>
<ul style="list-style-type: none"><li>• Eligibility requirements</li><li>• Payment method</li><li>• Medicare</li><li>• Dental &amp; vision</li></ul>	<ul style="list-style-type: none"><li>• NYSHIP option</li><li>• Monthly cost</li><li>• Sick leave credit</li><li>• Medicare</li></ul>

# Retiree Cost

- State continues to contribute
- Pay the same share as an active employee, except on a monthly basis
- Unused sick leave can be used to reduce cost

# Sick Leave Credit



Hours of  
Unused Sick  
Leave

x



Hourly  
Rate of  
Pay

=



Total Dollar  
Value of Sick  
Leave

# Sick Leave Credit



Total Dollar  
Value of  
Sick Leave

÷

Life Expectancy in  
Months

=

Your Monthly  
Sick Leave  
Credit

# Sick Leave Credit Calculator

## Sick Leave Credit Calculator

When you retire, you may be able use the value of your unused sick leave to offset the cost of NYSHIP coverage. Check with your Health Benefits Administrator (HBA) to confirm eligibility. To estimate your monthly sick leave credit, enter the information below. If you are retiring with a Disability Retirement, use the [Disability Sick Leave Credit Calculator](#).

### Effective Date of Retirement

On or After October 1, 2011



### Pay Rate \$

0

### Standard Work Schedule

8 Hours Per Day or 40 Hours Per Week



### Hours of Unused Sick Leave

0

### Age at Retirement

50



### Dual Annuitant Sick Leave Credit

No



Calculate

Reset

### How Your Sick Leave Is Calculated

Hourly Rate of Pay

X

Hours of Unused Sick  
Leave

=

Total Value of Sick Leave

Total Value of Sick Leave

÷

Life Expectancy in  
Months

=

Your Estimated Monthly  
Sick Leave Credit \*

\* This is an estimate based on the information provided. For the most accurate calculation of your sick leave credit see your Health Benefits Administrator.

Sick Leave Credit Calculator can be found at  
[www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits)

# Sick Leave Credit Example

\$20.43

Hourly Rate  
of Pay

×

800

Hours of Unused  
Sick Leave

=

\$16,344

Total Value of  
Sick Leave

\$16,344

Total Value of  
Sick Leave

÷

337

Life Expectancy in  
Months

=

\$48.50

Your Estimated Monthly  
Sick Leave Credit

## Sick Leave Credit Options

Single Annuitant	Dual Annuitant
<ul style="list-style-type: none"><li>• 100% of credit</li><li>• <b>Cannot transfer</b> to surviving dependents</li><li>• Default option</li><li>• Can be enrolled in Individual or Family coverage</li></ul>	<ul style="list-style-type: none"><li>• 70% of credit</li><li>• <b>Can transfer</b> to surviving dependents</li><li>• Only affects dependent survivor cost</li><li>• Can be enrolled in Individual or Family coverage</li></ul>

Selection must be submitted **before** you retire and can only be made **once**.



# How Will I Make My Payments?

## Two choices

- Direct payments to EBD
- Automatic Pension Check Deduction
  - May be billed by EBD and must pay until deductions begin

# Deferred Health Insurance at Retirement

## Benefits

- No waiting period when you reinstate your coverage
- Higher sick leave credit value at reinstatement

## Requirements

- Be enrolled in NYSHIP and eligible for retiree coverage
- Prove enrollment in other coverage
- Elect to defer before you leave the payroll

## Dental and Vision Benefits

	<b>NYSHIP</b>	<b>Union Employee Benefit Fund</b>
<b>Dental</b>	<ul style="list-style-type: none"> <li>• Enroll in:               <ul style="list-style-type: none"> <li>– COBRA for up to 36 months</li> </ul> </li> <li style="text-align: center;"><b>OR</b></li> <li>– Emblem Health direct-pay conversion plan</li> </ul>	<ul style="list-style-type: none"> <li>• Contact your union for COBRA coverage details</li> </ul>
<b>Vision</b>	<ul style="list-style-type: none"> <li>• Enroll in:               <ul style="list-style-type: none"> <li>– COBRA for up to 36 months</li> </ul> </li> <li>• No Davis Vision conversion plan</li> </ul>	<ul style="list-style-type: none"> <li>• Contact your union for COBRA coverage details</li> </ul>

## 2020 COBRA Dental and Vision Monthly Rates

	Individual	Family
Dental	\$24.14	\$67.96
Vision	\$4.06	\$9.23

**These rates do not apply to dental and vision coverage under Union Benefit Funds. Check with the appropriate fund for rate information.**

Note: Vision rates do not apply to certain groups of Council 82, NYSCOPBA and APSU retirees. COBRA rates are based on the full share rate plus a 2% administrative fee.

# Types of Coverage

## Individual

- Yourself

## Family

- Yourself
- Eligible dependents

# Health Insurance for Dependents

## Eligible

- Spouse, including a legally-separated spouse
- Domestic partner
- Children under the age of 26, including:
  - Natural children
  - Legally-adopted children
  - Stepchildren
  - Domestic partner's children
  - “Other” dependent children



## Coverage for Children Over 26

- Child has a disability that began prior to age 26
  - Requires approved Statement of Disability (Form PS-451)
- Child served in the military between the ages of 19 and 25
  - Can remain on policy for up to four years after age 26
  - Must maintain full-time student status

# NYSHIP Dental and Vision for Dependents

## Eligible

- A spouse or domestic partner
- Children up to age 19
- Children age 19 to 25 who are full-time students
- Disabled dependent children or full-time students with military service over age 25



# Dependent Loss of Eligibility

## Spouse/Domestic Partner

- COBRA
  - If elected within 60 days of COBRA-qualifying event

## Children

- COBRA
  - If elected within 60 days of COBRA-qualifying event
- Young Adult Option

# What If I Predecease My Dependents?

## Extended benefits period

- Three-month extension of benefits at no cost
- Empire Plan ID number remains the same
  - HMO enrollees should contact HMO

## Dependent survivor coverage

- Family plan in place at the time of your death or deferral
- 10 years of NYSHIP benefits-eligible service
- Retirement System or EBD must be notified of death

# Dependent Survivor Cost

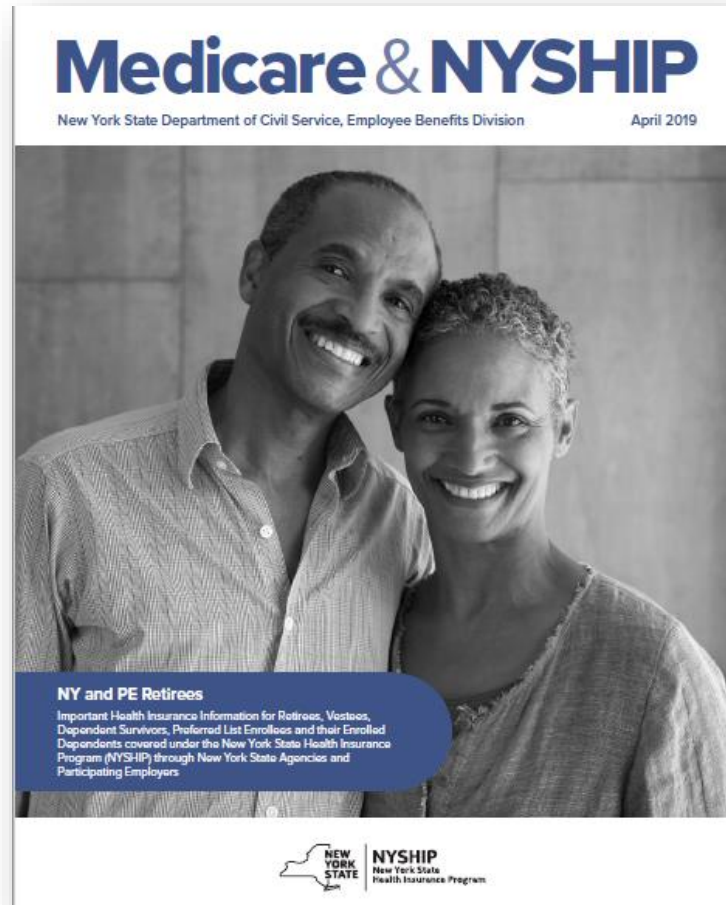
<b>Individual</b>	<b>Family</b>	<b>Dual Annuitant Sick Leave Credit Option</b>
10% of cost of Individual coverage	10% of cost of Individual coverage plus 25% of cost of dependent coverage	Credit reduces dependent survivor's cost

# Dependent Survivor Coverage Termination

## If your dependent survivor

- Does not enroll in dependent survivor coverage
- Cancels coverage
- Remarries or repartners
- Fails to make premium payments
- Ages out

# Medicare & NYSHIP



Available on our website at [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits) or contact your HBA for a copy.

# 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

<b>Part A</b>	<b>Part B</b>	<b>Medicare Advantage Plans (Part C)</b>	<b>Part D</b>
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)



# Medicare Primacy

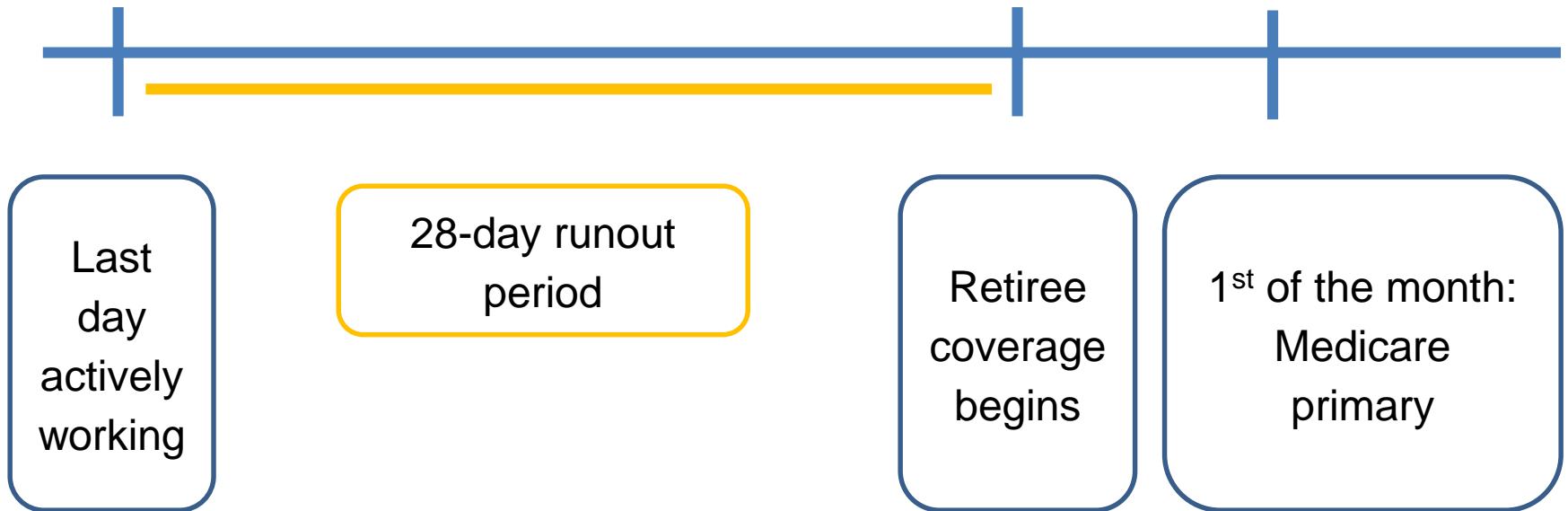
<b>Active Employee</b>	<b>Retiree</b>
<ul style="list-style-type: none"><li>• <b>NYSHIP</b> primary<ul style="list-style-type: none"><li>– Medicare secondary</li></ul></li></ul>	<ul style="list-style-type: none"><li>• <b>Medicare</b> primary<ul style="list-style-type: none"><li>– NYSHIP secondary</li></ul></li></ul>

# Exceptions to Primacy

## Medicare will always be primary for

- Enrollees eligible for Medicare due to ESRD who are beyond the 30-month coordination period
- Covered domestic partners age 65 and older

# Medicare-Eligible at Retirement



# Enrolling in Medicare

- It is **your** responsibility to know when Medicare becomes primary and to enroll in Parts A and B
- Contact the Social Security Administration (SSA) three months prior to Medicare becoming primary

# Medicare and Your NYSHIP Benefits

- If you or your dependents become Medicare-eligible prior to age 65, notify EBD with:
  - A copy of your Medicare ID card
  - Your residential street address, if you have a P.O. Box on file
    - NYSHIP materials will still be mailed to your P.O. Box

# Medicare Costs, Payment and Reimbursement

- Medicare Part B premium
  - SSA determines premiums annually
  - 2020 monthly premium: \$144.60
  - Part B premium reimbursed for each Medicare-primary person covered

# Income Related Adjustment Amount (IRMAA)

<b>Medicare Part B IRMAA</b>	<b>Medicare Part D IRMAA</b>
Annual reimbursement by application	No reimbursement

# The Empire Plan and Medicare

- Medicare crossover program coordinates Medicare and NYSHIP benefits for The Empire Plan
- Claims submitted to Medicare first, then The Empire Plan



# NYSHIP HMOs and Medicare

## Traditional HMOs

- Coordinate benefits with Original Medicare Parts A and B

## HMOs with Medicare Advantage Plans

- Medicare and NYSHIP coverage are both provided 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 will result in cancellation of your NYSHIP coverage

# Medicare Recap

- Enroll in Medicare Parts A and B when first eligible as a retiree
- Enrolling in a non-NYSHIP Medicare product will terminate your NYSHIP (Empire Plan and Medicare Advantage Plans) benefits
- Call EBD if you have any questions

# Return to State Service

## In a benefits-eligible position

- NYSHIP becomes primary
- Medicare becomes secondary
- Eligibility for Medicare Part B reimbursement ends

# Publications

## ***Choices & Rates for Retirees***

- Benefit and rate change guides

## ***On The Road with The Empire Plan***

- Health benefits information for when you travel or move

## ***Welcome to EBD***

- How and where to get benefits information

# Planning for Retirement

- Video in the *Planning to Retire?* section of NYSHIP Online
- Publication in your seminar folder



# Other Benefit Information

## M/C Life Insurance Program

- See your Human Resources Office

## Union Sponsored Plans

- Contact plan sponsor



## To Contact EBD

**Phone:** 518-457-5754 or 1-800-833-4344

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

**Fax:** 518-485-5590

**Website:** [www.cs.ny.gov/employee-benefits](http://www.cs.ny.gov/employee-benefits)