

NYSHIP

HEALTH MAINTENANCE ORGANIZATIONS

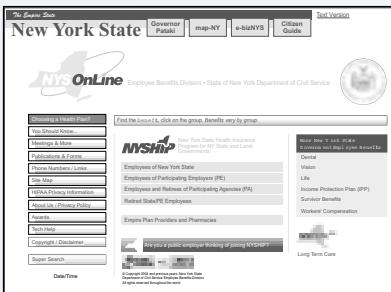
REPORT

MARCH 2005

NEW YORK STATE HEALTH INSURANCE PROGRAM (NYSHIP)
FOR THE BCI UNIT OF THE NEW YORK STATE POLICE
REPRESENTED BY PIA

And for their enrolled Dependents
and for COBRA Enrollees with their NYSHIP Benefits

NYS OnLine



Check our New York State Department of Civil Service Employee Benefits Division web site at www.cs.state.ny.us. Click on Employee Benefits for timely information about your NYSHIP benefits. Publications are available on our site, which meets universal accessibility standards adopted by New York State for NYS Agency web sites.

If you don't have access to the Internet, visit your local library. Most libraries have computers linked to the Internet.

NYSHIP Change Effective March 31, 2005

Domestic Partner Eligibility

Effective March 31, 2005, to enroll a domestic partner, you must be able to provide proof that you have lived together and been financially interdependent for at least six months. Also effective March 31, 2005,

there is a one-year waiting period from the termination date of previous partner coverage before you may again enroll a domestic partner. Other eligibility requirements apply. Please see your *NYSHIP General Information Book* and *HMO Reports* for details.

Keeping Your Coverage Up To Date

To keep your coverage up to date, you must notify your agency Health Benefits Administrator if...

Your home address changes

Your phone number changes

Your name changes

Your family unit changes

- You marry or divorce; your domestic partner no longer qualifies
- You want to add a dependent
- You no longer have any eligible dependents
- Your dependent loses eligibility
- You no longer wish to provide coverage for a dependent
- You have a disabled dependent
- Your spouse dies

Your employment status changes

- You are going to retire from State service
- You are affected by layoff
- You are going on leave without pay
- You are going on Family and Medical Leave
- You want to continue your health insurance coverage while in vested status
- You have questions about continuing coverage under COBRA (To apply for COBRA, write to the Employee Benefits Division within 60 days after NYSHIP coverage ends.)

You have questions about NYSHIP

- You have questions concerning your family's eligibility for health insurance coverage
- You have questions about changing your type of coverage (Family/Individual)

SAVE THIS REPORT

In This Report

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- I-2 Coverage Up To Date

Coverage continued on page 2

State of New York
Department of Civil Service
Employee Benefits Division
The State Campus
Albany, New York 12239
www.cs.state.ny.us

SAVE THIS DOCUMENT



NYSHIP information for the Enrollee, Enrolled Spouse/
Domestic Partner and Other Enrolled Dependents

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PIA HMO Report – March 2005

It is the policy of the State of New York Department of Civil Service to provide reasonable accommodation to ensure effective communication of information in benefits publications to individuals with disabilities. These publications are also available on the Employee Benefits Division web site (www.cs.state.ny.us), which meets universal accessibility standards adopted by New York State for NYS Agency web sites. If you need an auxiliary aid or service to make benefits information available to you, please contact your agency Health Benefits Administrator. COBRA Enrollees: Contact the Employee Benefits Division at 518-457-5754 (Albany area) or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

This NYSHIP HMO Report was printed using recycled paper and environmentally sensitive inks.

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Coverage continued from page 1

- You have questions about changing your health insurance option; you would like information about other NYSHIP HMOs and The Empire Plan
- You or a covered dependent becomes eligible for Medicare benefits because of end stage renal disease or because your domestic partner will be 65 soon
- You want to know how to coordinate your NYSHIP benefits with Medicare
- You have questions about the Pre-Tax Contribution Program
- You do not want to participate in the Pre-Tax Contribution Program

Other

- You become disabled and want to apply for a waiver of premium
- You want to cancel your health insurance coverage to obtain dependent status under your spouse's NYSHIP coverage
- You want to cancel your coverage (Notify the Employee Benefits Division in writing if you want to cancel your COBRA coverage.)
- You return to State service

You may write or call:

*Health Benefits Administrator
Human Resources Office
NYS Division of State Police
State Campus Building 22
1220 Washington Avenue
Albany, New York 12226
518-457-6082*