

CHOOSE YOUR HEALTH INSURANCE OPTION

You may change your New York State Health Insurance Program (NYSHIP) health insurance option once at any time during a 12-month period. You may change from a NYSHIP-approved Health Maintenance Organization (HMO) to The Empire Plan, from The Empire Plan to an HMO or from one HMO to another HMO in your area.¹

Consider your options carefully. You are choosing a benefit package for yourself and your dependent(s) for a 12-month period.

You may change options more than once in a 12-month period only if:

- You are enrolled in an HMO and you or one of your enrolled dependents (other than a student attending college) moves permanently out of your HMO's service area.
- You move to a new permanent address² and your new home area is served by a NYSHIP-approved HMO that did not serve your previous home area or
- You add a newly-eligible dependent to your coverage.

Important: You may receive information from Medicare and from non-NYSHIP plans in your area describing Medicare options available to you. Please be aware that your NYSHIP benefits will be canceled if you join a Medicare Advantage or prescription drug option that is not part of NYSHIP. Before you choose one of these plans, check with the Employee Benefits Division to see how your NYSHIP benefits will be affected.

NO ACTION IS REQUIRED IF YOU WISH TO KEEP YOUR CURRENT HEALTH INSURANCE OPTION AND STILL QUALIFY FOR IT.

YOUR NYSHIP OPTIONS FOR 2025

If you are considering changing your health insurance option or wish to review your current option, there is an Option Transfer Guide available on the NYSHIP website. This guide provides easy access to option

transfer-related information and instructions, as well as tools and additional resources to assist you in your research. To access the guide, visit www.cs.ny.gov/employee-benefits/login/index-retiree.cfm. You can use the NYSHIP Plan Comparison Tool to compare benefits of plans in your service area, access *Health Insurance Choices for 2025* and download enrollment forms.

Your current plan will notify you directly if there are any copayment or benefit changes for 2025.

If you have questions about The Empire Plan, call toll free at 1-877-7-NYSHIP (1-877-769-7447). Select the Medical/Surgical Program and then the appropriate prompt for assistance with option transfer benefit questions. If you have questions about NYSHIP-approved HMOs, contact the HMOs directly (see pages 6 and 7). Be sure you understand how your benefits will be affected if you change plans. Changing plans may result in substantially different coverage and cost.

SUMMARY OF BENEFITS AND COVERAGE

The Summary of Benefits and Coverage (SBC) is a standardized comparison document required by the Patient Protection and Affordable Care Act.

To view a copy of an *SBC* for The Empire Plan or a NYSHIP HMO, visit www.cs.ny.gov/sbc. If you do not have internet access, call 1-877-7-NYSHIP (1-877-769-7447) and select the Medical/Surgical Program to request a copy for The Empire Plan. If you need an *SBC* for a NYSHIP HMO, contact the HMO.

IF YOU DECIDE TO CHANGE YOUR OPTION

The deduction for your new health insurance plan, plus or minus any retroactive adjustment needed, will be reflected in your pension check or monthly billing statement. The date of the adjustment will depend on when your health insurance plan change is received and processed by the Employee Benefits Division.

¹ This flyer includes the most common 2025 enrollee rates for all NYSHIP options. If you reside outside New York State, your only NYSHIP option is The Empire Plan. NYSHIP HMOs have limited service areas. If you move into an area served by a NYSHIP HMO, you will be eligible to change your option to an HMO at that time.

² The Centers for Medicare & Medicaid Services (CMS) states that, except under certain circumstances, if an enrollee's temporary residence is out of the HMO's Medicare Advantage Plan service area for more than six consecutive months, the enrollee will be disenrolled from that HMO's Medicare Advantage Plan.

YOUR NOTICE OF CHANGE DOCUMENT

If you receive your pension by direct deposit, your retirement system will notify you of any deduction changes. Your Notice of Change document will show new deduction amounts for your health plan's 2025 premium.

ENROLLEES WHO PAY THE EMPLOYEE BENEFITS DIVISION DIRECTLY

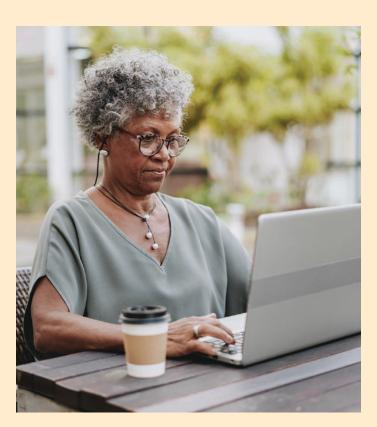
The 2025 rate for your current health insurance plan will be reflected in your December bill for your January coverage. If you are changing options, the date of the adjustment will depend on when your change request is received and processed by the Employee Benefits Division.

LIFETIME SICK LEAVE CREDIT

When you retired, you may have been entitled to convert your unused sick leave into a lifetime monthly credit that reduces your cost for health insurance for as long as you remain enrolled in NYSHIP. Not all Participating Employers (PE) offer a sick leave credit. If you have questions regarding your eligibility for a NYSHIP sick leave credit, please contact your former employer.

The amount of your monthly credit will remain the same throughout your lifetime. However, the balance you will pay for your health insurance premium may change each year. The most common reason for a change to the balance you pay would be a premium increase for your NYSHIP option for the new plan year.

If your monthly credit is less than your health insurance premium, you pay the balance. When the retiree premium rises, the balance you must pay will also rise. To calculate the balance you will pay in the calendar year 2025, subtract your monthly sick leave credit from the new monthly premium.



KEEP YOUR INFORMATION UP TO DATE

It's important for you to keep the Employee Benefits Division (EBD) up to date with any changes to your enrollment record (address, adding or removing dependents, marital status changes) in a timely manner as deadlines may apply.

Call EBD at:

518-457-5754 or 1-800-833-4344 (United States, Canada, Puerto Rico, Virgin Islands). Representatives are available Monday through Friday from 9 a.m. to 4 p.m., Eastern time.

Or write to EBD at: New York State Department of Civil Service **Employee Benefits Division** Albany, NY 12239

Before sending a letter to EBD, be sure that it includes your Empire Plan ID number or the last four digits of your Social Security number, your permanent address and your phone number (including area code). The letter must also be signed and dated.

You may also make address or phone number changes online using MyNYSHIP at www.cs.ny.gov/mynyship. See your General Information Book for more information on enrollment changes and applicable deadlines.

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NEW YORK STATE HEALTH INSURANCE PROGRAM 2025 RATES

CHECK YOUR PLAN -THIS IS YOUR ONLY NOTICE OF A RATE CHANGE.

Please read this rate sheet carefully to find the rate that applies to you. There are different rates for different groups as a result of legislation and administrative agreements.

Not all Participating Employers (PE) use the contribution rates reflected in this flyer. If you have questions regarding whether any of these rates apply to you or what your NYSHIP rates will be for 2025, contact your former employer.

To enroll in an HMO or to remain enrolled in your current HMO, you must live or work in the HMO's NYSHIP service area. Medicare-primary NYSHIP HMO enrollees will be enrolled in the HMO's Medicare Advantage Plan.

These rates reflect the monthly cost for NYSHIP retiree, Dependent Survivor and Vestee coverage. Rates for retirees do not reflect sick leave credits. (See page 3 for information on how sick leave credit impacts your premium.)

Amended

(25% Dependent

contribution)

Retirees and **Dependent Survivors** of Employers that contribute 90% Individual/ 75% Dependent

Retirees of Employers **Dependent Survivors** that contribute 94% Individual/ 75% Dependent

Vestees and all other **Dependent Survivors** (full-share premium)

ENROLLEE CONTRIBUTIONS FOR RETIREES, VESTEES, **DEPENDENT SURVIVORS AND ENROLLEES COVERED UNDER PREFERRED LIST PROVISIONS**

The most common rates used by Participating Employers are included in this chart. Contact your former employer if your rate share is different from those shown or if you are unsure of your premium contribution.

Code	Plan	Individual	Family	Individual	Family	Individual	Family	Individual	Family
001	The Empire Plan	109.05	536.40	65.43	492.78	427.35	427.35	1,090.54	2,799.95
066	Blue Choice	90.41	421.20	54.24	385.03	330.79	330.79	904.08	2,227.25
063	Capital District Physicians' Health Plan (CDPHP) (Capital)	123.90	448.94	82.65	406.84	343.70	343.70	1,052.33	2,427.13
300	Capital District Physicians' Health Plan (CDPHP) (Central)	192.04	487.20	150.19	441.84	373.80	373.80	1,133.96	2,629.18
310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)	331.27	746.77	289.37	704.87	418.56	418.56	1,274.12	2,948.36
050	EmblemHealth – HIP (Downstate)	352.62	934.62	305.28	887.28	500.81	500.81	1,418.04	3,421.28
220	EmblemHealth – HIP (Capital)	588.78	1,234.85	545.45	1,191.52	553.71	553.71	1,563.93	3,778.78
350	EmblemHealth – HIP (Hudson Valley)	570.22	1,406.83	534.08	1,370.69	488.31	488.31	1,383.50	3,336.74
067	Highmark Blue Cross Blue Shield	97.64	455.85	58.59	416.80	358.21	358.21	976.42	2,409.28
069	Highmark Blue Shield	100.19	468.78	60.11	428.70	368.59	368.59	1,001.89	2,476.27
072	HMOBlue (Central New York Region)	106.40	488.22	63.84	445.66	381.82	381.82	1,064.04	2,591.34
160	HMOBlue (Utica Region)	158.34	575.15	114.46	531.27	442.88	442.88	1,145.78	2,917.29
059	Independent Health	96.33	444.04	57.80	405.51	347.71	347.71	963.27	2,354.11
058	MVP Health Care (Rochester)	93.60	398.21	56.16	360.77	304.61	304.61	936.05	2,154.50
060	MVP Health Care (East)	99.43	423.54	59.66	383.77	324.11	324.11	994.29	2,290.73
330	MVP Health Care (Central)	168.96	481.08	126.53	436.13	368.71	368.71	1,123.71	2,598.54
340	MVP Health Care (Mid-Hudson)	184.84	485.33	142.94	440.22	372.55	372.55	1,127.83	2,618.03
360	MVP Health Care (North)	138.27	463.85	96.16	420.41	355.24	355.24	1,086.06	2,507.02

2025 RATES & DEADLINES/PE RETIREE 2025 RATES & DEADLINES/PE RETIREE 5

CODE AND PLAN	SERVICE AREA					
	1-877-7-NYSHIP (1-877-769-7447) • www.cs.ny.gov					
O01 The Empire Plan (available to enrollees	Medical/Surgical Program: UnitedHealthcare P.O. Box 1600, Kingston, NY 12402-1600 TTY: 1-888-697-9054 Hospital Program: Anthem Blue Cross NYS Service Center	Mental Health/Substance Use Program: Carelon Behavioral Health P.O. Box 1850, Hicksville, NY 11802 TTY: 711 Prescription Drug Program: CVS Caremark P.O. Box 6550				
and their eligible dependents worldwide)	P.O. Box 1407, Church Street Station New York, NY 10008-1407 TTY: 711	Lee's Summit, MO 64064-6590 TTY: 711 SilverScript Insurance Company (an affiliate of CVS Caremark) P.O. Box 6590 Lee's Summit, MO 64064-6590 TTY: 711				
066 Blue Choice	165 Court St., Rochester, NY 14647 1-800-499-1275 • TTY: 1-800-662-1220 • www.excellusbcbs.com Medicare Blue Choice: 1-877-883-9577 Serving Livingston, Monroe, Ontario, Seneca, Wayne and Yates counties					
063 Capital District Physicians' Health Plan (CDPHP) (Capital)	6 Wellness Way, Latham, NY 12110 518-641-3700 or 1-800-777-2273 • TTY: 711 • www.cdphp.com/stateemployees Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties					
300 Capital District Physicians' Health Plan (CDPHP) (Central)	6 Wellness Way, Latham, NY 12110 518-641-3700 or 1-800-777-2273 • TTY: 711 • www.cdphp.com/stateemployees Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Broome, Chenango, Clinton, Essex, Franklin, Hamilton, Herkimer, Jefferson, Lewis, Madison, Oneida, Otsego, St. Lawrence and Tioga counties					
310 Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)	6 Wellness Way, Latham, NY 12110 518-641-3700 or 1-800-777-2273 • TTY: 711 • www.cdphp.com/stateemployees Medicare Advantage: 518-641-3950 or 1-888-248-6522 Serving Delaware, Dutchess, Orange and Ulster counties					
050 EmblemHealth – HIP (Downstate)	55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • www.emblemhealth.com Medicare Advantage: 1-877-344-7364 Serving Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk and Westchester counties					
220 EmblemHealth – HIP (Capital)	55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • www.emblemhealth.com Medicare Advantage: 1-877-344-7364 Serving Albany, Columbia, Greene, Rensselaer, Saratoga, Schenectady, Warren and Washington counties					
350 EmblemHealth – HIP (Hudson Valley)	55 Water St., New York, NY 10041 1-800-447-8255 • TTY: 1-888-447-4833 • www.emblemhealth.com Medicare Advantage: 1-877-344-7364 Serving Delaware, Dutchess, Orange, Putnam, Sullivan and Ulster counties					

CODE AND PLAN	SERVICE AREA
067 Highmark Blue Cross Blue Shield	1 Seneca Street, Suite 3400, Buffalo, NY 14203 1-844-639-2441 • TTY: 711 • www.highmark.com/member/nyship-bcbswny.html Medicare Senior Blue HMO: 1-800-329-2792 Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
069 Highmark Blue Shield	P.O. Box 15013, Albany, NY 12212 1-844-639-2440 • TTY: 711 • www.highmark.com/member/nyship-blueshieldneny.html Medicare Senior Blue HMO: 1-800-329-2792 Serving Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Warren and Washington counties
072 HMOBlue (Central New York Region)	333 Butternut Drive, Syracuse, NY 13214-1803 1-800-499-1275 • TTY: 1-800-662-1220 • www.excellusbcbs.com Medicare HMOBlue: 1-877-883-9577 Serving Broome, Cayuga, Chemung, Cortland, Onondaga, Oswego, Schuyler, Steuben, Tioga and Tompkins counties
160 HMOBlue (Utica Region)	333 Butternut Drive, Syracuse, NY 13214-1803 1-800-499-1275 • TTY: 1-800-662-1220 • www.excellusbcbs.com Medicare HMOBlue: 1-877-883-9577 Serving Chenango, Clinton, Delaware, Essex, Franklin, Fulton, Hamilton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Otsego and St. Lawrence counties
059 Independent Health	511 Farber Lakes Drive, Buffalo, NY 14221 1-800-501-3439 • TTY: 716-631-3108 • www.independenthealth.com Medicare Advantage: 1-800-665-1502 • TTY: 711 Serving Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming counties
058 MVP Health Care (Rochester)	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 711 • www.mvphealthcare.com Medicare Advantage: 1-800-209-3945 Serving Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Wyoming and Yates counties
060 MVP Health Care (East)	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 711 • www.mvphealthcare.com Medicare Advantage: 1-800-209-3945 Serving Albany, Columbia, Fulton, Greene, Hamilton, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington counties
330 MVP Health Care (Central)	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 711 • www.mvphealthcare.com Medicare Advantage: 1-800-209-3945 Serving Broome, Cayuga, Chenango, Cortland, Delaware, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, Otsego, Tioga and Tompkins counties
340 MVP Health Care (Mid-Hudson)	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 711 • www.mvphealthcare.com Medicare Advantage: 1-800-209-3945 Serving Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster and Westchester counties
360 MVP Health Care (North)	P.O. Box 2207, 625 State St., Schenectady, NY 12301-2207 1-888-MVP-MBRS (1-888-687-6277) • TTY: 711 • www.mvphealthcare.com Medicare Advantage: 1-800-209-3945 Serving Clinton, Essex, Franklin and St. Lawrence counties

New York State Department of Civil Service Employee Benefits Division P.O. Box 1068 Schenectady, New York 12301-1068 www.cs.ny.gov

Time-Sensitive Materials

Please do not send mail or correspondence to the return address above. See the front

cover for address information.



Important Health Insurance Information for the Enrollee, Enrolled Spouse/Domestic Partner and Other Enrolled Dependents

Rates & Information for 2025 (PE Retirees) - November 2024

Your Only Notice of Health Insurance Rate Changes for 2025

It is the policy of the New York State 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 NYSHIP website at www.cs.ny.gov/retirees. Visit the NYSHIP website for timely information that meets universal accessibility standards adopted by New York State for NYS agency websites. If you need an auxiliary aid or service to make benefits information available to you, please contact the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands).

👶 2025 Rates & Information was printed on paper containing recycled fiber using environmentally sensitive inks. 🗆 🗆

2025 Rates & Information/PE Retiree

→ PE0205

EMPLOYEE BENEFITS DIVISION WEBSITE

To find the latest benefit information, go to the NYSHIP website by visiting www.cs.ny.gov and click on Retirees and then Health Benefits. Select the group from which you retired and your plan type (Empire Plan or HMO), if prompted. You may also use MyNYSHIP (www.cs.ny.gov/mynyship) to view your enrollment record, change your address, order Empire Plan benefit cards, compare benefit plans and submit option transfer requests. See the *Health Insurance Choices for 2025* booklet for details.

Note: For a replacement Empire Plan Medicare Rx Card, call The Empire Plan at 1-877-7-NYSHIP (1-877-769-7447) and press 4 for Empire Plan Medicare Rx.

TO CONTACT THE EMPLOYEE BENEFITS DIVISION

You may call the Employee Benefits Division at 518-457-5754 or 1-800-833-4344 (U.S., Canada, Puerto Rico, Virgin Islands). Representatives are available Monday through Friday between 9 a.m. and 4 p.m., Eastern time.