

## State Employee Benefits

### *Retiree Health Benefits*

#### **1. Will my health insurance coverage continue into retirement?**

Yes, the health insurance and prescription drug coverage that you are enrolled in as an active employee will continue into retirement if you meet the eligibility requirements. You may also continue to cover eligible dependents under your family coverage.

#### **2. What are the eligibility requirements for continuing coverage in retirement?**

- a) You must be 55 years of age or older at retirement.
- b) You must have ten or more years of service in a position eligible for health insurance at retirement.
- c) You must be participating in a health insurance plan immediately preceding your retirement date.

#### **3. Who do I contact with questions about my health insurance/prescription drug coverage after I retire?**

After retirement, the New York State Department of Civil Service, Employee Benefits Division, in Albany will be responsible for any questions or changes in your coverage. They can be reached at (518) 457-5754.

#### **4. What is the cost of health insurance/prescription drug coverage in retirement?**

The cost of coverage changes each year on January 1. However, the state continues to pay 75% of the full cost for family coverage and 90% of the full cost for individual coverage. To learn the current monthly premiums for retiree coverage, please use the web site at <http://www.cs.state.ny.us> and look under the retiree section.

#### **5. How will I pay for my retiree health insurance/prescription drug coverage?**

At retirement, up to 200 days of your unused sick leave accruals will be converted to a monthly lifetime credit and used to offset the cost of the coverage. You will pay for your coverage only if the premium exceeds your monthly lifetime credit. In that case, you will pay the difference between your monthly lifetime credit and the premium.

#### **6. How is the monthly lifetime credit calculated?**

The monthly lifetime credit is calculated using a formula that includes the number of your accrued sick leave days, your salary, your age and an actuarial table.

#### **7. How will I pay for my retiree health insurance/prescription drug coverage if my monthly credit does not cover the full cost of the monthly premium?**

If you are a retiree of one of the state retirement plans, the difference in cost will be deducted each month from your pension check. If you are a retiree of TIAA-CREF, you will receive a bill for the difference in cost from the Division of Employee Benefits on a quarterly basis.

#### **8. If I predecease my covered spouse after retirement, can my spouse continue health insurance coverage under my plan?**

Yes, as long as your spouse remains un-remarried, coverage can continue under your plan. Your spouse will be required to contact the Division of Employee Benefits for the necessary details.

#### **9. How will my covered spouse pay for the retiree health insurance coverage after my death?**

At retirement, you may specify that you want your surviving spouse to use your monthly lifetime credit to offset the cost of the survivor health insurance premium. This is called the Dual

Annuitant Sick Leave Credit.

If, at retirement, you choose to use **70%** of your monthly lifetime credit, your surviving spouse will continue to use the same monthly lifetime credit to offset the cost of their premium.

If, at retirement, you choose to use **100%** of your monthly lifetime credit, the credit will stop upon your death and your surviving spouse will pay the individual premium in effect at the time.

**10. Can I change my health insurance plan after retirement?**

Yes, you can change your plan once during any twelve month period by contacting the Division of Employee Benefits.

**11. Does my retiree health insurance coverage change when I, or my covered dependent, reach age 65?**

Yes, when you and/or your covered dependent reach age 65, you must apply for Medicare B, which will become your primary health insurance coverage. *Your state health insurance plan will be your secondary coverage.*

**12. When and how do I apply for Medicare B?**

Approximately three months before you and/or your covered dependent reach age 65, contact your local Social Security Administration to apply. If your dependent is *under* the age of 65 but is receiving Social Security Disability payments for 24 months or more, your dependent must also apply for Medicare B.

**13. Is there a cost associated with Medicare B?**

Yes, the monthly cost of Medicare B usually changes each year on January 1 and is automatically deducted each month from your social security check. Please contact the Social Security Administration to determine the current cost of Medicare B coverage.

**14. Will I be reimbursed for the cost of Medicare B?**

Yes, because the state shares responsibility for your health insurance coverage with Medicare, the Division of Employee Benefits will reimburse you for the cost of Medicare B. If your spouse is a dependent on your state health insurance plan, the Division of Employee Benefits will reimburse you for the cost of your spouse's Medicare B coverage when applicable.

**15. How will I be reimbursed for the cost of Medicare B?**

If you are a retiree of one of the state retirement plans, the Division of Employee Benefits will include the reimbursement for yourself and/or your spouse in your monthly retirement check. If you are a retiree of TIAA-CREF, you will be reimbursed by separate check on a quarterly basis.

**16. Do my dental and vision care benefits continue after retirement?**

The dental and vision care coverage you receive as an active employee will not continue into retirement. Some unions provide a retiree dental/vision care plan; please contact your union for that information. However, *all* retirees will be offered the opportunity to enroll in the GHI Retiree Dental Plan. This information will be sent automatically to your home address of record after your retirement date.