

EMPLOYEE Health Plan Rates as of January 1, 2019 (NOTE: Rates are subject to change)

These rates are in effect as of your first full payroll period in January 2019

WEEKLY

Please note that the GHI-CBP/EBCBS rates are effective January 1, 2019 and NOT retroactive to July 1, 2018

INDIVIDUAL	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$55.56	\$183.45	\$0.00	\$87.28	\$161.30	\$0.00	\$33.31	\$0.00	\$251.41	\$0.00	\$23.29
Prescription Drugs	\$357.70	\$67.33	\$0.00	\$54.08	\$54.08	\$16.57	\$74.29	\$53.16	\$65.67	\$47.77	\$64.28
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1.20	\$0.00	\$1.84	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$413.26	\$250.78	\$0.00	\$141.37	\$215.38	\$17.76	\$107.59	\$55.00	\$317.08	\$47.77	\$87.57
FAMILY	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$261.12	\$497.17	\$0.00	\$252.05	\$411.73	\$0.00	\$101.64	\$0.00	\$615.94	\$0.00	\$92.13
Prescription Drugs	\$1,011.70	\$200.93	\$0.00	\$132.58	\$132.58	\$29.35	\$189.40	\$130.25	\$160.89	\$107.72	\$167.17
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.04	\$0.00	\$4.51	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$1,272.81	\$698.11	\$0.00	\$384.64	\$544.31	\$32.39	\$291.03	\$134.76	\$776.83	\$107.72	\$259.30

* For GHI-CBP/EBCBS, "Rider Other" is for enhanced major medical coverage. For HIP HMO, "Rider Other" is for private duty nursing & durable medical equipment.

BI-WEEKLY

INDIVIDUAL	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$111.12	\$366.91	\$0.00	\$174.57	\$322.60	\$0.00	\$66.61	\$0.00	\$502.82	\$0.00	\$46.58
Prescription Drugs	\$715.40	\$134.66	\$0.00	\$108.16	\$108.16	\$33.13	\$148.57	\$106.33	\$131.34	\$95.54	\$128.56
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.40	\$0.00	\$3.68	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$826.52	\$501.57	\$0.00	\$282.73	\$430.77	\$35.53	\$215.18	\$110.01	\$634.16	\$95.54	\$175.14
FAMILY	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$522.23	\$994.34	\$0.00	\$504.11	\$823.45	\$0.00	\$203.27	\$0.00	\$1,231.87	\$0.00	\$184.26
Prescription Drugs	\$2,023.40	\$401.87	\$0.00	\$265.17	\$265.17	\$58.70	\$378.79	\$260.50	\$321.79	\$215.44	\$334.34
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6.08	\$0.00	\$9.02	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$2,545.63	\$1,396.21	\$0.00	\$769.27	\$1,088.62	\$64.78	\$582.06	\$269.52	\$1,553.66	\$215.44	\$518.60

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SEMI-MONTHLY

INDIVIDUAL	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$120.71	\$398.58	\$0.00	\$189.64	\$350.45	\$0.00	\$72.36	\$0.00	\$546.22	\$0.00	\$50.60
Prescription Drugs	\$777.15	\$146.28	\$0.00	\$117.50	\$117.50	\$35.99	\$161.40	\$115.51	\$142.68	\$103.79	\$139.66
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.61	\$0.00	\$4.00	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$897.86	\$544.86	\$0.00	\$307.14	\$467.95	\$38.60	\$233.76	\$119.50	\$688.89	\$103.79	\$190.26
FAMILY	Aetna EPO	CIGNA	DC37 Med Team	Empire HMO	Empire EPO	GHI-CBP/EBCBS	GHI HMO	HIP HMO	HIP POS	MetroPlus Gold	Vytra
Basic	\$567.31	\$1,080.17	\$0.00	\$547.62	\$894.53	\$0.00	\$220.82	\$0.00	\$1,338.20	\$0.00	\$200.16
Prescription Drugs	\$2,198.04	\$436.56	\$0.00	\$288.06	\$288.06	\$63.77	\$411.49	\$282.99	\$349.56	\$234.04	\$363.20
Rider Other*	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6.60	\$0.00	\$9.80	\$0.00	\$0.00	\$0.00
Total (Basic + Rider)	\$2,765.34	\$1,516.72	\$0.00	\$835.67	\$1,182.58	\$70.37	\$632.30	\$292.78	\$1,687.76	\$234.04	\$563.36

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**New York City
Office of Labor Relations
Health Benefits Program**
nyc.gov/olr



Date: December 2018
To: All Employees
Subject: Health Benefits Program Rate Changes

I) GHI-CBP/EBCBS Rates Effective January 1, 2019

The payroll deductions for GHI-CBP/EBCBS optional riders listed on the back of this notice are changing in January. Please review the deduction on your check in the first full payroll period in January to ensure that it matches with the January 2019 rate changes.

II) All Other Health Plan Rates

These rates were changed in July 2018 and remain unchanged.

III) HIP HMO Changes Effective January 1, 2019

HIP/HMO members will be enrolled in the Gold Standard. As a Gold Standard member, you will receive a new ID card which will include a new ID number. Please discard any ID cards you have previously received.

IV) Domestic Partner Taxation for PMS Payrolls, Including DOE and NYCHA

Pursuant to federal regulations, the amount paid by an employer attributable to coverage of a domestic partner is treated as taxable and made a part of the employee's gross wages for Federal tax purposes. In the past, as well as for calendar year 2018, that taxable amount was added to the employee's gross wages at the end of the year in the employee's W-2.

Beginning with the year 2019, the proportionate taxable amount will be included in each paycheck for that pay period rather than a lump sum at the end of the year. The amount will appear on the employee's paycheck with the following designation: **"Health Miscellaneous Payment"**.

Therefore, if an employee changes his/her status such as marriage, termination of domestic partnership, or removal of his/her domestic partner from the employee's health coverage even though the partnership has not been dissolved, the employee must notify the Domestic Partner Unit of the Office of Labor Relations of this status change as soon as possible, in order not to be taxed. In such a case, the employee should also notify his/her welfare fund of any status change, if applicable.

Please submit the appropriate documentation to the below address:

NYC Office of Labor Relations
Health Benefits Program, 3rd Floor
New York, NY 10006
Attn: Domestic Partner Unit

Please note:

- 1) If the employee includes his/her domestic partner on their welfare fund benefits, the taxable amount of those benefits (if any) will still be added to the employee's gross wages at the end of the year.
- 2) If the employee includes a domestic partner as a dependent on their federal tax return, then the employee is not subject to tax on the value of the health insurance cost.

V) Special Reminder to Medicare-Eligible Employees and Dependents (this does not apply to domestic partners of employees who are 65 years of age or older)

Federal law requires the City of New York to offer employees over age 65 the same coverage under the same conditions as those that are offered to employees under age 65. The same stipulation also applies to dependents over age 65 and those covered by Medicare through the Special Provisions of the Social Security Act for the Disabled. In such cases, enrollment in a City health plan is primary coverage and Medicare, if applicable, becomes secondary coverage. Make sure that you and your dependent(s) (if enrolled in your coverage) inform all health care providers that your City health coverage is your and your dependent's primary coverage. If you and/or your dependent(s) are Medicare-eligible and want Medicare to be your primary coverage, you must waive your City health coverage.