



OFFICE OF THE NASSAU COUNTY COMPTROLLER
Health Benefits Unit

**NOTICE TO ALL ELIGIBLE EMPLOYEES – 2024 ANNUAL OPEN ENROLLMENT PERIOD
FOR OPTION CHANGES IN HEALTH INSURANCE PLAN COVERAGE.**

**** ALL OPTION CHANGES AND ELECTIONS WILL BECOME EFFECTIVE JANUARY 1, 2024****

Every year in December, the Nassau County Comptroller’s Office has an Open Enrollment period. **The Open Enrollment window for 2024 benefits will be December 8th thru December 22, 2023.** During this period all health benefits enrollees have the opportunity to make changes to their coverage.

Before making any changes, please review the information below and the attachments, especially the Rate Charts which contain the monthly premiums.

HOW TO MAKE CHANGES

Employees changing from one insurance carrier to another must complete two health insurance transaction forms – one to cancel current coverage and the other to enroll with the newly selected carrier. *Forms can be obtained from your HR representative and must be completed and returned to your department’s human resource representative by the end of Open Enrollment, December 22nd.*

If you have any questions or concerns, contact your department’s human resource representative.

GENERAL INFORMATION

EMBLEM HEALTH (HIP HMO) UPDATE: There is a 13.5% increase in the rates for HIP HMO coverage with a \$0 copay, and a 13.6% increase in the rates for HIP VYTRA coverage with a \$5 copay. Please review the Summary of Benefits for details on coverage and other copays.

PBA/DAI/SOA/COBA Employees: Only members of these unions will be eligible to enroll in Empire Blue Cross Blue Shield PPO High Deductible Plan with a Healthcare Spending Account (HSA). Enrollment in the High Deductible HSA plan will remove the 2.5% base pay deduction required by your CBA; including any premium deduction that would be required if you enrolled in another plan. The County’s HSA Employer contribution will be \$2000 to a family HSA account and \$0 to an individual HSA account.

OPTICAL INSURANCE: Davis Vision added a \$10 copay for the annual eye examinations and \$25 copay for lenses for In-Network visits. See attached Summary of Benefits and Coverage (SBC) for a full listing of copays and benefits.

PAYROLL DEDUCTIONS: All payroll deductions for health insurance premiums will be taken in 24 bi-monthly deductions instead of **26 bi-weekly deductions**. This means that in the months with three payrolls, **NO** deduction will be taken from the third paycheck. See attached rate sheet for bi-monthly deduction amounts for each plan based on your hire date, union/ordinance.

BUY-BACK PROGRAM: Employees who opt out of County health insurance because they have other coverage are eligible for a buy-back payment from the County. Employees can only opt in during the open enrollment period unless they have a qualifying event, such as marriage, or birth of a child. Payments are made bi-annually in June and December, except for employees whose union contract dictates otherwise.

SMART SAVINGS PROGRAM: Ordinance No. 82-2006 mandates that Nassau County and/or Nassau Community College employees who are married to each other are only eligible to receive **one family or two individual policies**. **You or your spouse must choose who will be enrolled in health insurance, and who will take the Buy-out payment. If you are married to a Nassau County employee and neither of you are enrolled in the Smart Savings Program, please contact your HR representative immediately!**

Smart Savings and Retirement: Employees enrolled in the Smart Saving program will continue in Smart Savings upon retirement. During Open Enrollment, Smart Savings enrollees can change to two individual policies if there are no other dependents on the policy. **Active employees who are enrolled as a dependent on a retiree's Smart Savings policy, must enroll in Medicare upon turning 65.**

NEW COLLECTIVE BARGAINING AGREEMENTS (CBAs) have resulted in changes to CSEA, COBA and PBA health benefits. Please see below.

CSEA MEMBERS

EXCELSIOR PLAN: Effective January 1, 2024, all CSEA employees currently enrolled in the Empire Plan and BlueCross BlueShield PPO plans will be automatically transferred into the NYSHIP Excelsior Plan as agreed upon in the Collective Bargaining Agreement signed in September 2023. CSEA members currently enrolled in Emblem Health (HIP/VYTRA) may request an option change to the Excelsior plan during open enrollment.

HEALTH REIMBURSEMENT ACCOUNT (HRA): Active employees and non-Medicare primary retirees enrolled in the Excelsior plan will be automatically enrolled in the HRA. Eligible members will receive a HRA Payflex card directly from Payflex. The HRA can **only be used for medical expenses**. The HRA reimbursement amounts for 2024 are: Family Plan **\$1,300** & Individual Plan **\$425**.

BUY-BACK: Effective January 1, 2023, the Buyback payment amounts were increased to \$4,000/family and \$2,000/individual. The annual payment will be made in December to those enrolled by November 1st of each year. There is no proration of benefits. Upon retirement the payment reverts to \$2,000 for family and \$500 for individual.

SMART SAVINGS: Effective January 1, 2023, the annual amount that will be paid to CSEA employees who surrender their coverage was increased to \$4,000 annually. Employees who received a payment in February 2023 will be paid the additional \$2,000 in February 2024. There is no proration of benefits. You must be enrolled in the program by January 1st of each year to receive a check for that year. Upon retirement the payment reverts to \$2,000 annually.

COBA MEMBERS

BUY-BACK: Effective January 1, 2024, the annual payment will be increased to \$4,000 for family coverage and \$2,000 for individual coverage. The annual payment will be made in December to those enrolled by November 1st of each year. There will be no proration of benefits. Upon retirement the payments revert to \$2,000 for family and \$500 for individual.

SURVIVOR COVERAGE – HEALTH & OPTICAL: Surviving spouses/domestic partners of members who retire after 12/1/2023 will be provided health and optical coverage at no cost until they become Medicare eligible or obtain other medical coverage.

HEALTH INSURANCE CONTRIBUTION: Effective January 1, 2024, members who are not currently contributing towards the cost of their health insurance benefits shall contribute 2.5% of base earnings towards health insurance. Contributions shall cease upon retirement.

PBA MEMBERS

BUY-BACK: Effective January 1, 2023, the annual payment was increased to \$4,000 for family coverage and \$2,000 for individual coverage. The annual payment will be made in December to those enrolled by November 1st of each year. There will be no proration of payment. Upon retirement the payments revert to \$2,000 for family and \$500 for individual.

HEALTH INSURANCE CONTRIBUTION: Effective January 1, 2024, PBA members will contribute 2.5% of base earnings towards the cost of their health insurance. Contributions shall cease upon retirement.

NOTES ABOUT BENEFITS AT NASSAU COUNTY

Please note that it is your responsibility to notify your department HR rep, or the Health Benefits Division of any change in your marital status, address, eligible dependents, Medicare eligibility or any other change that may affect your health benefits. If you fail to notify us in a timely manner, **and the change results in premium costs that are not recoverable by Nassau County, you may be held responsible for the premiums.**

ADDING DEPENDENTS (such as a new-born child or spouse): Dependents must be added when they first become eligible. If a request is made within 30 days of the eligibility event (marriage, birth or adoption of a child or loss of coverage) then coverage will become effective on the date of the event. For example, if you got married, or had the birth of a child on Jan 10th and you request the addition of your spouse/child by February 10th the coverage will become effective on January 10th. If the request is received more than one month after the event date, then your spouse/dependent will experience a late enrollment waiting period of three months from the date the request is made.

However, if there is a qualifying event for a newly eligible dependent, then all previously eligible dependents can be added without a waiting period. **It is very important that you request coverage for eligible dependents within the 30 days allowed to avoid late enrollment. Note: a newborn child may be enrolled without the social security number, however you must provide the SSN card within 30 days.**

UNPAID LEAVE OF ABSENCE: If you are placed on an Unpaid Leave of Absence, **you will be required to pay for your health insurance for that period.** You may be able to get assistance from NYSHIP to pay the monthly premiums. Ask your HR representative for the NYSHIP Waiver of Premium instructions and Application form to see if you qualify. **This option is only available to employees enrolled in NYSHIP.** You may also visit the [FAQ section of our website](#) for more information.

WORKERS COMPENSATION: If you are in an unpaid status due to an injury sustained on the job and have filed a Workers Compensation case, your health insurance will remain active for 12 months. The 12 months can be continuous or intermittent. **If you have a Health Benefit option that requires you to pay a monthly premium, you must keep your payments current so that you do not experience cancellation of your coverage. At the end of the 12-month period, if you are still in an unpaid leave status, you will be required to start paying the full premium for your health insurance.** *Please make sure to discuss your absence with your HR representative before going out on unpaid leave.*

REQUIREMENT OF A SOCIAL SECURITY NUMBER (SSN): To be compliant with IRS filing requirements of Form 1095-C (Employer-Provided Health Insurance Offer & Coverage), the County cannot enroll dependents for whom a Social Security Number is not provided – except in the case of newborns. Newborns will be enrolled pending the SSN. Employees will have 30 days to provide the SSN.

MEDICARE AND ACTIVE EMPLOYEES: If you or any of your dependents has end-stage renal disease (permanent kidney failure) and has completed Medicare's waiting period of up to 3 months and the 30-month coordination period; you will become eligible for Medicare Primary coverage. Please notify your HR representative immediately and provide a copy of your Medicare card showing Parts A & B. Once we receive proof of your Medicare Primary status, we will start reimbursing your Part B premiums. Reimbursements are made two times a year at the end of June and end of December.

If you or any of your dependents are eligible for Medicare Part B prior to your retirement but were not enrolled because you were an active employee, it is imperative that you and/or your dependents apply for Medicare no later than two months prior to your retirement. It may be advantageous for you and/or your dependents to enroll in Part A at age 65 - there is usually no premium for Part A.

You or your dependent is eligible for Medicare:

- At age 65 or older, or
 - Regardless of age, if you/they have been entitled to Social Security Disability Insurance (SSDI) benefits for more than 24 months, or
 - Regardless of age, if you/they have end-stage renal disease (permanent kidney failure) and have completed Medicare's waiting period of up to 3 months and the 30-month coordination period.
- Failure to be enrolled in Medicare Parts A and B when you retire, and are eligible for Medicare, may result in higher monthly premiums to keep your retiree coverage with Nassau County, and may also result in a higher monthly premium cost for Medicare Part B.
 - Enrollees of the NYSHIP Excelsior and Empire Plan will automatically have their primary coverage switched to Medicare and Empire/Excelsior will become secondary. Empire Plan enrollees will also

automatically be enrolled in Medicare Part D (prescription drug coverage). Excelsior plan enrollees will continue to have their prescription drug coverage through the Excelsior Plan.

Enrollees of any Emblem Health (HIP HMO) plan have three options upon retirement. Please review them carefully so that you will be able to make the right choice that fits your needs.

Option 1:

You may choose to remain in your current HIP HMO plan. This may result in you having to pay a higher premium than you are currently paying. **Nassau County rules dictate that we pay the same premium rate for all our enrollees; so, if there is a difference in the premium cost for NYSHIP's Medicare enrollees and HIP HMO Medicare enrollees, that difference must be paid by the enrollee.** If the rates are the same amount, you will have no additional premium. Under this option you will have one insurance carrier, even though you are enrolled in Medicare. Please call us to verify what the premiums are before deciding.

Option 2:

You may choose to enroll in the Medicare advantage plan offered by HIP HMO. This plan is called HIP VIP and is open to HIP HMO enrollees and their eligible dependents who are Medicare eligible. Enrollment in this plan usually does not result in additional premium cost to you but even if there is, it will be considerably less than the cost under option 1. Again, please contact us prior to deciding.

Option 3:

You may choose to dis-enroll from HIP HMO and enroll into NYSHIP. Change of option to NYSHIP may **not** result in any additional premium. In this option Medicare will become your primary insurance and NYSHIP will become secondary.

Please review this document and the attachments in advance of the Open Enrollment period, which begins on December 8, 2023. If you have any questions or concerns, contact your department's human resource representative.