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Office of Labor Relations

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NYC Health Benefits Program

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NOTE: The NYCE PPO plan is subject to finalization and approval through the city's contracting process.

Please note the provider directory on the NYCE PPO site was updated on October 3rd. If you could not find a provider in a search prior to that, we encourage you to try again.

The New NYCE PPO Health Plan

If approved and finalized through the City's contracting process, effective January 1, 2026, the City of New York will be offering a new health plan, replacing the current GHI CBP/Anthem BlueCross and BlueShield plan for active employees and pre-Medicare retirees, and their eligible dependents under 65. This new plan, NYC Employees PPO plan (NYCE PPO), will be offered by EmblemHealth (Emblem) and United Healthcare (UHC) and would provide an expanded network of healthcare providers without increases in cost for members.

For more information concerning the proposed plan, including the ability to lookup your healthcare provider, visit NYCE PPO. Employees can also call (212) 501-4444.

What Does this Mean?

Effective January 1, 2026, all active employees/pre-Medicare retirees, and their dependents under 65, who are enrolled in GHI CBP/Anthem BlueCross and BlueShield would automatically be transferred to the new health plan with no gap in coverage unless they choose a different plan during the Annual Fall

Transfer Period in November. Therefore, they do not need to take any action in order to continue their City health benefits.

If the employee/pre-Medicare retiree enrolled in GHI CBP/Anthem BlueCross and BlueShield has a Medicare-eligible dependent, then the Medicare-eligible dependent would remain in GHI/Anthem Senior Care plan.

What's Next

Information regarding the plan will be mailed to all employees and pre-Medicare retirees in October in advance of the November transfer period. There will also be additional information communicated from OLR and your agencies over the coming months. All employees/pre-Medicare retirees enrolled in NYCE PPO will receive a new ID card and welcome kit in late-December 2025 from Emblem/UHC. Please note that they will only receive one ID card as this is a single plan, unlike the GHI-CBP plan which had separate coverage for Medical and Hospital.

Annual Fall Transfer Period Changes

If an employee/pre-Medicare retiree is currently enrolled in the GHI CBP/Anthem BlueCross and BlueShield plan and does not wish to be transferred to the NYCE PPO, then they will have the opportunity to select a new health plan during the Annual Fall Transfer Period in November 2025, for an effective date of January 1, 2026.

If an employee/pre-Medicare retiree is not currently enrolled in the GHI CBP/Anthem BlueCross and BlueShield plan and wishes to enroll in NYCE PPO, then they will be able to do so during the Annual Fall Transfer Period, effective January 1, 2026.

Visit NYCE PPO for more information, including:

- FAQs
- In-Network Provider search
- Registration details to attend in-person and virtual Information sessions

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Health Benefits Annual Fall Transfer Period

The Fall 2025 Annual Health Benefits Program Transfer Period for both employees and retirees will be November 1, 2025 - November 30, 2025. Additional information will be availble shortly.

Information and update regarding the Medicare Advantage Plan - June 20, 2025

Mayor Adams stated the City has decided not to move forward with the Medicare Advantage plan at this time.

Read more about the future of Medicare Advantage

MetroPlus Gold Plan Discount Prescription Drug Program: $0 for Over 100 Popular Medications*

All MetroPlusHealth Gold Plan members can enjoy significant savings with the new Discount Drug Program. MetroPlusHealth offers over 100 of the most commonly prescribed medications at absolutely no cost. That means no copays, no coinsurance – just essential medications at $0.

* NOTE: This is a drug discount program, not a prescription drug benefit. Drugs on the list are provided to eligible MetroPlusHealth Gold Plan members at a discounted price of $0 as part of a health and wellness benefit. Coverage for drugs that are not included in the discount program, require purchase of the optional rider and may be subject to copays.

View the Drug Plan List

Information and Update: $15 copays to resume January 1, 2025 for the EmblemHealth-GHI portion of the GHI/Anthem Senior Care Plan

Read more about the $15 copay

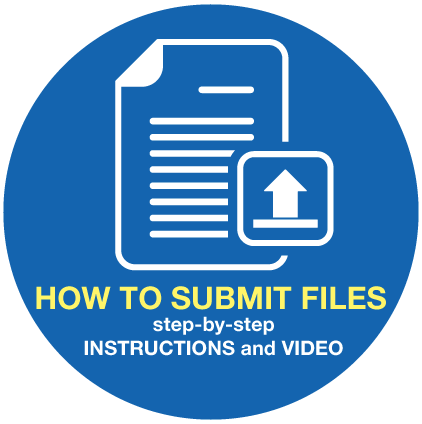
Important Notice

RETIREE CLIENT SERVICE CENTER:

Retirees can speak with a Client Service Representative between 10am and 4pm, Monday through Friday, except holidays, by calling (212) 513-0470. Additional staff have been added to assist callers.

The Health Benefits Retiree Client Service Walk-in Center is open for in-person meetings on Wednesdays only, **by appointment only**. It remains closed to walk-in visitors. To make an appointment to meet with a Client Service Representative call (212) 513-0470. Appointments will be available on a first-come, first-served basis.

Please submit inquiries and documents as follows:



1) Forms and documents can be submitted electronically through LeapFILE.

- Before you begin, you may wish to view instructions and a short video on how to submit your forms/documents.
- When you are ready, use the following link to submit your forms and documents: https://nycemployeebenefits.leapfile.net
- Please do NOT submit your form/document more than once. This will only delay processing.
- You will immediately receive notification stating *"Success! Your file has been received"* upon completion of your document upload. You will **not** receive a separate email confirmation.
- Please allow 30-45 days from the day you submit your document(s) for them to be processed. Coverage will be retroactive to the effective date of retirement.
- Also, please do not send forms or documents via express mail.

2) Forms and documents can be mailed to:

NYC Office of Labor Relations
Health Benefits Program
22 Cortlandt Street, 12th Floor
New York, NY 10007

3) Inquiries and questions can be emailed to: healthbenefits@olr.nyc.gov - do not send forms through email (see #1 and #2 above)

4) For questions regarding the PICA prescription drug benefit program please call 1-800-467-2006.

5) If you are a HIP-HMO member turning 65 or on Medicare due to a disability, please contact HIP at 1-800-447-9169 to enroll over the phone. Please identify yourself as a City of New York retiree or dependent of a retiree. For all other members enrolled in a HMO plan, please contact your health plan at the customer service numbers on the back of your ID card.

Please note that **active employees** can contact NYCAPS Central by:

1) Phone - (212) 487-0500

2) Email - NYCAPSCentral@dcas.nyc.gov

Please check our website periodically for updates.

Download **Adobe Scan** to convert your documents into PDFs. Use your smart phone or tablet camera to take a picture of your paper form and Adobe Scan will convert it to a PDF. Adobe Scan mobile app is available for iPhone and Android.

Introduction

Through collective bargaining agreements, the City of New York and the Municipal Unions have cooperated in choosing health plans and designing the benefits for the City's Health Benefits Program.

Coverage for Employees 65+

If you're over 65, still working for the City and enrolled in the NYC Health Benefits Program, do not use your Medicare card when you visit your doctor's office. Instead, be sure to use the member ID card provided to you by your current HBP health plan.

These benefits are intended to provide you and your eligible dependents with the fullest possible protection that can be purchased with the available funding.

The OLR website and the NYC Health Benefits Program Summary Program Description (SPD) provide you with information about your benefits under the New York City Health Benefits Program.

Health Plan Websites

Use the links below to visit your health plan where you will be able to find an in-network doctor, urgent care center, lab or pharmacy.

- 
GHI CBP
Anthem
GHI CBP
Anthem
- 
HIP
HMO
HIP
HMO
- 
MetroPlusHealth
GOLD
MetroPlusHealth
GOLD
- 
DC 37 MED-TEAM
DC 37 MED-TEAM
- 
Cigna
Cigna
- 
GHI HMO
EmblemHealth
WHAT CARE FEELS LIKE.
GHI HMO
EmblemHealth
WHAT CARE FEELS LIKE.
- 
HIP
POS
HIP
POS
EmblemHealth

- HIP VIP EmblemHealth
- Anthem Blue Access Gated EPO
- Anthem EPO
- Anthem Medicare Preferred PPO
- Anthem Medicare-Related
- aetna EPO
- aetna PPO-ESA
- Humana

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Note for GHI-CBP Members: Hospitalization coverage for GHI CBP is underwritten and administered by Anthem BlueCross and BlueShield. View the Anthem Directory of participating NY, NJ, CT hospitals*

*Provider information contained in the Anthem BlueCross and BlueShield Directory is updated on a regular basis and may have changed. Therefore, please check with your provider before scheduling your appointment or receiving services to confirm participation.

Form 1095-C for Calendar Year 2024

Form 1095-C is a tax form under the Affordable Care Act ("ACA") which contains information about your health care insurance coverage. Form 1095-C is distributed to all full-time employees working an average of 30 hours or more per week, for all or part of the calendar year. For information about Form

1095-B, please contact your health care provider directly. The 1095-B will include all dependent information.

Please note that the 1095-C for the calendar year 2024 will be available for employees in February 2025. Please check Employee Self-Service (ESS), if applicable, in order to obtain the Form 1095-C, or contact your payroll department.

Please note: The 1095-B is issued directly from the health plan. If you have questions about your 1095-B, please contact your health plan directly.

Learn more about Form 1095-C

Tier 6 Member Vesting Update

On April 9, 2022, Governor Hochul signed Chapter 56 of the Laws of 2022 relating to the New York State budget for the 2022-2023 state fiscal year. Part TT of the 2022-2023 Budget Bill amended the Retirement and Social Security Law (RSSL) to lower the minimum number of years required for Tier 6 members to vest for service retirement from 10 years to 5 years of credited service.

IMPORTANT: Eligibility for Retiree City Health Benefits has NOT changed by the above Part TT of the Budget Bill. Pursuant to the Section 12-126 of the NYC Administrative Code and New York City Health Benefits Summary Program Description, below summarizes enrollment eligibility for City Health Benefits as a retiree:

1. You have at least ten (10) years of credited service as a member of a retirement system maintained by the City or the Department of Education (if you were an employee of the City on or before December 27, 2001, then you must have at least five (5) years of credited service as a member of a retirement system maintained by the City);
   OR
2. You have at least fifteen (15) years of credited service as a member of either the Teachers' Retirement System or the Board of Education Retirement System if you were an employee of the City or the Department of Education appointed on or after April 28, 2010, and held a position represented by the recognized teacher organization on the last day of paid service. Where this paragraph and paragraph (1) both apply, this paragraph controls.
   AND
3. During the minimum period of credited service required for eligibility under paragraph (1) or (2) above, or at the time of separation from employment with the City or the Department of Education, you were working regularly for twenty (20) or more hours a week and eligible for City health benefits as an employee of the City or the Department of Education.
   AND
4. You receive a pension check from a retirement system maintained by the City or the Department of Education.

View the New York City Health Benefits Program Summary Program Description (SPD)

24/7 Telemedicine Program with Teladoc

(For Those Covered Under the EmblemHealth GHI-CBP, GHI HMO, HIP HMO, HIP POS, and VYTRA plans)

With Teladoc, you can talk with a doctor within minutes rather than days or hours. Teladoc doctors can diagnose, treat and prescribe medication (when medically necessary) for non-emergency medications. This includes treatments for the flu, sore throat, allergies, stomach aches, eye infections, bronchitis, and much more. Copays are waived during the COVID outbreak. To set up your account now so you can talk with one of Teladoc's board-certified doctors anytime when you don't feel well, call 1-800-Teladoc (1-800-835-2362) or visit Teladoc.com/emblemhealth

View the Teladoc Registration Guide for instructions on setting up your account on Teladoc's website or mobile app.

List of Health Plans

Listed are the non-Medicare Health Plans offered by the New York City Health Benefits Program to its employees and non-Medicare retirees.

Close

Aetna EPO
Anthem EPO
Anthem Blue Access Gated EPO
DC 37 Med-Team (DC 37 members only)
GHI-CBP/Anthem Blue Cross Blue Shield
GHI HMO
HIP HMO
HIP Prime POS
MetroPlusHealth Gold
Vytra Health Plans

View the Summary of Benefits and Coverage (SBC) for each Plan.
