



# New York State Correctional Officers & Police Benevolent Association, Inc.

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## VISION BENEFIT OPTIONS UPON RETIREMENT

As an active employee, members receive vision coverage from the State at no cost. Upon retirement members can continue vision care coverage as follows:

### 1) **COBRA Coverage**

Required to sign up through NYS Civil Service, **within 60 days of retirement, up to three years of coverage**, once cancelled you may not rejoin, application will automatically be sent once Civil Service has been notified of your retirement or you contact NYS Civil Service with questions at (800) 833-4344.

#### **Rates-**

**Single:** \$6.72

**Family:** \$12

**When Coverage Ends-** Vision Care benefits cease if you resign, retire, transfer to an ineligible negotiating unit or are terminated, your Vision Care coverage will end **28 days after the last day of the last payroll period worked**. You may have certain rights to continue coverage as explained below.

The Vision Care benefits you may continue are the same benefits you receive as an active employee. This section summarizes your rights and obligations under the continuation coverage provisions of the law. If your spouse or domestic partner is also covered under the Plan, they should take the time to read this carefully.

**60 Day Deadline-** In order for dependents to continue coverage under COBRA, the employee or a family member is responsible for notifying the Employee Benefits Division of the New York State Department of Civil Service in writing of a divorce or termination of domestic partnership, a legal separation or of a child's losing eligible dependent status under the NYS Vision Plan within 60 days from the date coverage ends due to one of those events. Other people acting on your behalf may provide written notice to the Employee Benefits Division of a COBRA qualifying event. **If notice is not received in writing within that 60-day period, regardless of the reason, the dependent will not be entitled to choose continuation coverage.**

**How Long You May Keep COBRA Coverage-** You, the employee, will have the opportunity to maintain continuation coverage for 36 months. Dependents who were covered at the time of your initial qualifying event, and newborns or newly adopted children added to your COBRA continuation coverage within 30 days of birth or final adoption during your period of COBRA coverage, are considered qualified beneficiaries with their own rights to continue COBRA coverage for up to 36 months in the event of a second qualifying event. Other dependents added to your COBRA coverage, such as a newly acquired spouse or child who returns to school full-time, do not have continuation rights apart from yours. Enrolled spouses/domestic partners and dependent children who lose eligibility due to a COBRA qualifying event have the opportunity to elect COBRA continuation coverage for up to 36 months.

#### **Who Is Eligible For COBRA?**

**You-** If you are an active employee enrolled in the NYS Vision Plan, you have the right to continue coverage.

**Spouses or Domestic Partners-** The spouse or domestic partner of an employee covered as the employee's dependent by this Plan has the right to continue coverage under this plan. Legal separation (spouses only) -- Your spouse does not automatically lose Vision Care coverage if you are legally separated. However, if your spouse loses coverage under this Plan, he or she may continue coverage under COBRA.

**Dependent Children-** A dependent child of a covered employee has the right to continue coverage if coverage under this plan. Your legal separation (NOTE: A dependent child does not automatically lose coverage because of parents' legal separation). A dependent child may be covered until the end of the month of their 19<sup>th</sup> birthday if not a full time student or until the end of the month of their 25<sup>th</sup> birthday if they are a full time student.

**When You or Your Dependents No Longer Qualify for COBRA-** If New York State no longer provides Vision Care coverage to State employees; your 36 months of coverage has expired; If the premium for your COBRA coverage is not paid on time; If you become entitled to Medicare benefits during the COBRA continuation period.

**Whom to Contact-** If you have any questions about COBRA, please contact NYS Civil Service Employee Benefits Division (800) 833-4344.

**Consider Cancelling COBRA Vision Coverage When Benefits are No Longer available in COBRA Coverage Period-** The vision benefit is generally available to children once a year and adults once every two years. For most members, there will come a time during COBRA vision coverage where you will continue to pay for COBRA vision coverage but you will not be able to receive any benefits again before the expiration of COBRA coverage. You may want to consider cancelling coverage at that time.

**2) Davis Vision Care Discount Program (See flyer for rates and coverage)**

Free with your Chapter membership. NYSCOPBA's Retiree Chapter offers a Vision Care Discount Program through Davis Vision for you and your dependents. Contact Davis Vision at (800) 283-9374 to add your dependents and to set up an appointment with a participating provider.

**3) Retiree Chapter Vision Insurance from Norvest VSP (See flyer for rates and coverage)**

Optional insurance through payroll deduction administered by Norvest Financial Services at (888) 869-8252. This is a new plan and you sign up for the Vision Plan at the beginning of each year, coverage begins in April and you must keep the plan until the following April. You can also sign up if you have a qualifying event such as losing your current vision coverage.

**4) Eyeglass and Contact Lens \$100 Reimbursement Plan**

Free with Retiree Chapter Membership, administered by Norvest Financial Services at (888) 869-8252. Provides \$100 reimbursement each year towards the cost of eyeglasses or contact lens purchase for Chapter Members only. Obtain a receipt showing Chapter Member as patient and out of pocket cost and submit receipt with reimbursement form to Norvest.