



Information Announcement

New York State Health Insurance Program (NYSHIP) Dependent Eligibility Verification Project

July 6, 2016

To help ensure that every participant who receives benefits is entitled to them, NYSHIP is conducting a Dependent Eligibility Verification Audit (DEVA).

Dependent Eligibility Verification Project Background

- In November 2015, the Department of Civil Service (DCS) mailed a letter to all NYSHIP enrollees with family coverage to inform them of the audit and to introduce the vendor, Health Management Systems, Inc. (HMS), that will conduct the audit and provide an overview of what to expect.
- In December 2015, HMS mailed an amnesty letter to all NYSHIP enrollees with family coverage to provide them an opportunity to remove any ineligible dependent(s) without incurring any liability for repayment of claims on their behalf. The amnesty period for the 2016 NYSHIP dependent verification audit has now ended.
- During the upcoming period of **July 5 – August 19, 2016**, NYS active enrollees with family coverage, will be required to provide documentation of eligibility for coverage under NYSHIP.

For Active Employees of NYS (Enrolled in Family Coverage)

During the period July 5 – August 19, 2016, active enrollees with family coverage will receive a mailing, including:

- A verification letter with instructions regarding required documentation for covered dependents requiring eligibility verification;
- The process to submit this information verification documentation; and
- The deadline for submission

You can log onto the HMS secure online portal at www.verifyOS.com using the reference number provided in your verification letter and upload any required documentation directly to HMS.

Requested documentation MUST be sent directly to HMS. Do not send requested documents or proofs to your HBA or the BSC.

Please note that if you fail to respond by the deadline, your dependents will be removed from coverage retroactively to January 1, 2016. Additionally, you may be responsible for repaying all health insurance claims for ineligible dependents as early as the date the dependent became ineligible.

For additional questions, see the toll free number for the HMS call center listed on your most current verification letter. If you have any questions regarding this announcement, please feel free to reach out to the BSC Benefits Unit at BSCBenefitsAdmin@ogs.ny.gov or (518) 457-4272.