

# Welcome to NYPA

# New Hire

# Benefits Guide

UWUA Employees  
2025



This Guide is only intended as a brief summary of the benefit plans. If there is a difference between this summary and the documents, contracts or policies, the plan documents, contracts or policies will govern in every instance. The Authority reserves the right to change or terminate any of these benefits, programs or pieces of programs at any time.

More details on all benefits are available at [nypa.gov/benefits](https://nypa.gov/benefits).

## Benefits Webpage

The NYPA benefits webpage, [nypa.gov/benefits](https://nypa.gov/benefits), has an icon for UWUA employees. While this New Hire Guide contains a summary of benefits, you can access details on all NYPA's benefits there. You'll find information on various topics such as health & wellness, life at NYPA, planning for the future, forms, communications & regulations, and Open Enrollment information. A schedule of benefit events and benefit vendor contact information is also available.

## Eligibility

As a full-time employee, you're eligible to enroll in a range of benefits to customize to your individual and family needs.

Your coverage is effective on your first day of employment. You have thirty days from your hire date to enroll in your benefits. Once a year during our Open Enrollment period you will have the opportunity to change certain benefit elections.

## Medical Coverage

NYPA offers several medical plans or the option to waive medical coverage.

- The NYPA Plan, a preferred provider organization (PPO) plan, provides major medical care, hospitalization and prescription drug coverage. If you use a network provider, you are only responsible for the copay. If you use an out-of-network provider, you will be responsible for paying the annual deductible and coinsurance, as well as any charges over the reasonable and customary limit.
- The Choice Plan provides major medical care, hospitalization, and prescription drug coverage. If you use a network provider, you are only responsible for the copay. Out of Network Benefits are not available under this plan.

## Coverage Costs

If you choose to opt out of healthcare coverage you will receive a stipend of \$76.93 per paycheck.

The table below provides the annual cost for employee health insurance (Deductions are taken bi-weekly).

Effective Date	Annual Health Care Contributions *	
	Individual	Family
PPO Plan	\$1,400	\$3,650
Choice Plan	\$1,000	\$1,100

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The following grid gives you an at-a-glance comparison of the plans offered.

Medical Plans	United Healthcare (UHC) PPO Plan		UHC Choice Plan
Bi-Weekly Cost — Employee	\$53.84		\$38.46
Bi-Weekly Cost — Family	\$140.38		\$42.30
Type of Services	In-Network	Out-of-Network	In-Network
Preventive Care copay	\$0	20% coinsurance*	\$0
Virtual Visit copay	\$15	N/A	\$10
Primary Care copay	\$30	20% coinsurance*	\$20
Specialist copay	\$30	20% coinsurance*	\$35
Chiropractic copay	\$30	20% coinsurance*	\$35
Urgent Care copay	\$30	20% coinsurance*	\$35
Emergency room copay**	\$0	\$0	\$100
Hospitalization copay	\$0	\$0	\$0
Retail Prescription			
Tier 1 / Tier 2 / Tier 3 copay	\$10/\$30/\$50	\$10/\$30/\$50	\$10/\$20/\$35
Mail Order Prescription			
Tier 1 / Tier 2 / Tier 3 copay	\$25/\$75/\$112.50	N/A	\$20/\$40/\$70
Deductible			
Single	\$0	\$700	\$0
Family	\$0	\$2,100	\$0
Out-of-Pocket Limit			
Single	\$7,150	\$900	\$2,500
Family	\$14,300	\$2,400	\$5,000

For Questions regarding benefits, contact HR Services at [HR.Services@nypa.gov](mailto:HR.Services@nypa.gov) or 914-287-3114.

# Benefits



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## Dental Plan

The Delta Dental Plan covers charges for services related to the care of the teeth, gums and mouth. Diagnostic and preventive care services are paid at 100%. Other dental expenses, including orthodontics, are covered as referenced in the chart below. You are responsible for the coinsurance for these services after meeting the deductible. Selecting a provider that participates in the Delta Dental network reduces your out-of-pocket expense. Should you use an out-of-network provider, payment to the dentist is based on the negotiated rate and you are responsible for any amount over that rate.

<b>Eligibility</b>	For eligibility details, refer to the plan's Evidence/Certificate of Coverage (on file with your benefits administrator, plan sponsor or employer).			
<b>Deductibles</b>	\$25 per person / \$50 per family each calendar year			
Deductibles waived for Diagnostic & Preventive (D & P)?	Yes			
<b>Maximums</b>	\$2,000 per person each calendar year			
D & P counts toward maximum?	Yes			
<b>Waiting Period(s)</b>	Basic Services None	Major Services None	Prosthodontics None	Orthodontics None

Benefits and Covered Services*	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**
<b>Diagnostic &amp; Preventive Services (D &amp; P)</b> Exams, cleanings and x-rays	0%	0%
<b>Basic Services</b> Fillings and posterior composites	20%	20%
<b>Endodontics (root canals)</b>	20%	20%
<b>Periodontics (gum treatment)</b>	20%	20%
<b>Oral Surgery</b>	20%	20%
<b>Major Services</b> Crowns, onlays and cast restorations	50%	50%
<b>Prosthodontics</b> Bridges and dentures	50%	50%
<b>Temporomandibular Joint (TMJ) Benefits</b>	20%	20%
<b>Orthodontic Benefits</b> Adults and dependent children	25%	25%
<b>Orthodontic Maximums</b>	\$3,000 Lifetime	\$3,000 Lifetime

\* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental maximum contract allowances and not necessarily each dentist's submitted fees.

\*\* The coinsurance shown here reflects your cost-sharing responsibility. Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and Premier contracted fees for non-Delta Dental dentists.

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## Vision Coverage

The **Core Vision Plan** is available to employees only (not dependents) and is paid for by NYPA. Under this option, you are reimbursed up to \$100 during a 12-month period for a routine eye exam, prescription eyeglasses, or prescription contact lenses.

## Hearing Aids

NYPA provides reimbursement for hearing aids, up to a maximum of \$1,500 every three years through a health reimbursement account. This is available at no cost to employees. You may elect to enroll in this benefit or choose not to participate.

## Employee Life Insurance

You will automatically receive core life insurance (at no cost to you) equal to 150% of your base annual wage. Life insurance coverage in excess of \$50,000 is considered taxable income and will appear on your W-2.

## Short-Term Disability

The Short-Term Disability (STD) Plan provides continuing income for up to thirteen weeks when you are unable to work due to short term illness or injury. The weekly STD benefit payment will equal 50% of your basic weekly wage. *The maximum weekly benefit is \$750.*

## Long-Term Disability

Long-term disability coverage provides income to protect you and your family if you are disabled and cannot work after three consecutive months of absence from work. At no cost to you, you'll receive 50% of covered salary with a maximum monthly amount of \$3,000. Cost-of-living increases, survivor benefits, education benefits, and rehabilitation incentives are built into the coverage options.

## Flexible Spending Accounts

You can contribute pre-tax dollars to Flexible Spending Accounts (FSAs), which allow you to pay for eligible out-of-pocket health and dependent day care expenses, up to annual IRS limits. You will receive a debit card to use for both types of FSA expenses.

## Health Care FSA

- Pre-tax annual election \$100 to IRS Maximum (\$3,300 in 2025).
- Use this account for medical and dental co-pays and deductibles, vision exams, eyeglasses, contact lenses and some over-the counter medicines without a prescription and menstrual care products.
- Unused health care FSA funds will roll over to the following year. For 2025, the maximum rollover is \$660.

For Questions regarding benefits, contact HR Services at [HR.Services@nypa.gov](mailto:HR.Services@nypa.gov) or 914-287-3114.

## Dependent Care FSA

- Pre-tax annual election \$260 to \$5,000. Use this account for eligible dependents' childcare (under age 13) or elder care expenses while you and your spouse are at work.
- Any unused dependent care funds will be forfeited at the end of the plan year. You have until March 31 of the following year to request reimbursement for eligible expenses in the prior year.

## Cancer Plan

The Aflac Cancer Plan helps with unexpected expenses if cancer occurs and can help maintain your lifestyle. Benefits are paid directly to you, regardless of any other insurance, copays, etc. The cost of this plan is based on the coverage you choose.

## Accident Expense Plan

The Aflac Accident Expense Plan helps with unexpected expenses if an accident occurs. Benefits include costs associated with accident emergency treatment, accident follow-up treatment, initial accident hospitalization, accident hospital confinement, accidental death and dismemberment, physical therapy, blood and plasma, and ambulance. Levels of reimbursement for each benefit vary. The cost of this plan is based on the coverage you choose.

## Default Benefits

If you do not complete your benefit enrollment within 30 days of your first day of employment, you will default to employee-only coverage in the following benefits:

- NYPA Medical Plan
- Vision Care Plan
- Life Insurance
- Long Term Disability

If you receive default benefits, you are not eligible to change health plans, choose the Cancer Plan or the Accident Expense Plan, open a Flexible Spending Account(s), or waive medical coverage until the next open enrollment period or if you incur a qualifying event.

## Domestic Partner Benefits

Medical, Dental, Cancer Protection Plan and Accident Expense Plan, benefits may be extended to a domestic partner and dependents of the domestic partner. Eligibility criteria is in the [Domestic Partner Guide](#).



## Time Away From Work

### **Vacation**

Refer to your Collective Bargaining Agreement for details.

### **Sick Time**

Refer to your Collective Bargaining Agreement for details.

### **Military Leave**

You're eligible for 30 workdays a year for authorized military leave at full NYPA base pay. Refer to your Collective Bargaining Agreement for details.

### **Death in Family**

In the event of the death of an immediate family member, you are eligible for three days of paid time away from work. Refer to your Collective Bargaining Agreement for details.

### **Holidays**

UWUA employees receive a total of 13 days per year. Holiday schedules vary depending on your work location.

## More Benefits

### Employee Assistance Program

A free, confidential assessment and counseling program for employees and family members. The program also includes childcare and elder care resources and referral services. Visit [myccaonline.com](http://myccaonline.com) (Company Code: NYPA) or call **800-833-8707** 24/7.

### Commuter Benefits Program

If you use mass transit as your regular means of commuting to work, NYPA provides you with \$50 per month to offset your commuting costs. Return [this form](#) to [HR.Services@NYPA.gov](mailto:HR.Services@NYPA.gov) to begin your enrollment.

### Educational Assistance

Expenditures for tuition and books for certain courses approved in advance may be eligible for reimbursement after successful completion. Refer to your Collective Bargaining Agreement for details.

### Plum Benefits Discount Program

This cost-free benefit provides you access to thousands of exclusive discounts on shopping, services, travel, entertainment, and more. Visit [Plum Benefits' Website](#) and enter company code ac0224403 for more information.

### Programs Available Through Payroll Deduction

- Credit union membership [Utility Employees Credit Union](#)
- New York's 529 College Savings Program (877-697-2837, [NY529@nysaves.org](mailto:NY529@nysaves.org))
- Certain charities through State Employees Federated Appeal (SEFA)

## Retirement Programs

### NYSLRS

The New York State and Local Retirement System (NYSLRS) is a defined benefit plan which provides a fixed monthly income at retirement with annual cost-of-living adjustments. New hires are generally in Tier 6 under NYSLRS. [Click here](#) for a summary.

### Deferred Compensation Plan (457 Plan)

The Deferred Compensation Plan is a retirement savings program governed by Section 457(b) of the Internal Revenue Code. The plan has the same annual limits and other similarities to the 401(k) Plan, but some important differences, such as no employer match. You may contribute from 1% up to 100% of your eligible salary on a pre-tax basis and/or Roth (after-tax) basis. Maximum contributions are based on IRS regulations.

## Benefits New Hire Checklist

- Have original identification for employment verification on your first day.
- Gather documentation for your dependents and email to [HR Services](#) on your first day.
- Enroll in benefits on [MyPageNYPA](#) > Benefits and Payment > New Hire within 30 days of hire date. *(You must be connected to the NYPA network to access [MyPageNYPA](#).)*
- Review your benefit summary to confirm your choices and verify you've included any eligible dependents you want covered.
- Enroll in the New York State and Local Retirement System (NYSLRS) within 30 days of hire date.

Enroll in the 457 Plan at any time.

Designate beneficiaries:

- Life insurance beneficiaries should be done before your first day.
- 457 Plan beneficiaries can be designated on the [T.Rowe Price website](#).
- NY State and Local Retirement System beneficiaries must be designated using [this form](#).
- Receive your new ID cards for medical, pharmacy and dental coverage.
- Find contact information for vendors directly [here](#).