

S/N	Employee Groups	Health Coverage Eligibility	Medical	Dental	Vision	Rx Drugs	Basic Life	AD&D	Basic Dependent Life	Supplemental Life	Supplemental Dependent Life
1	NYCT Transit Support Coordinator (TSC I & TSC II) Employees	1st of Month Following Date of Hire, Promotion, or Transfer	GHI CBP/Empire Blue Cross GHI CBP/Empire Blue Cross with Optional Rider GHI CBP/Empire Blue Cross with Optional Rider (Local 30 Only) HIP HMO Standard HIP POS Metro Plus Standard Aetna HMO Cigna Healthcare HMO GHI HMO Empire EPO Empire HMO (New York Only) VYTRA Healthcare HMO MedTeam Choice EPO (DC-37 Only)	MetLife Fee Schedule OR DentCare/HealthPie X	EyeMed	When enrolled in a GHI or HIP medical plan: Part of Medical Coverage When enrolled in medical plans other than GHI or HIP: GHI Px Drug Coverage	\$5,000	\$10,000	Spouse Only: \$1,500*	Purchase option 1x-5x Base Annual Salary (\$750K Max)	Purchase up to \$18,500* (Spouse) OR \$4,000* (Per Child) *Spouse \$3,500/Child \$1,000 *Spouse \$8,500/Child \$2,000 *Spouse \$13,500/Child \$3,000 *Spouse \$18,500/Child \$4,000

*: Spouse and Child(ren) **MUST** be enrolled on employee's medical and/or dental and vision benefits in order to participate in specified plan