



**Department of
Civil Service**

**EMPLOYEE BENEFITS DIVISION
Change of Address**

PS-850 (10/16)

As you know, your Health Insurance information is important.

You may not receive information regarding your benefits if your address is not kept current on the New York State Health Insurance Program (NYSHIP) enrollment records.

Note: Your enrollment record cannot be updated without your signature.

Please complete the information below and return it to the following address.

**NYS Department of Civil Service
Employee Benefits Division
Program Administration Unit
Empire State Plaza, Core Building 1
Albany, NY 12239**

If you have any questions, you may contact the Employee Benefits Division at 1-800-833-4344.

Health Insurance Identification No.					
Last Name		First Name			Middle Initial
Old Address:			New Address:		
Street Address			Street Address		
City	State	Zip Code	City	State	Zip Code
Telephone Number (Include Area Code) ()			Effective Date of Change		
Signature (Required):				Date:	

(If Power of Attorney – Please send copy)

Power of Attorney/Guardianship – If you are acting on behalf of an enrollee, your “documents” must be on file with our office before any benefit changes, including mailing address, can be processed.

ENCLOSED

ALREADY ON FILE WITH EBD

Personal Privacy Protection Law Notification – The information you provide on this application is being requested in accordance with Article 11 of the Civil Service Law for the principal purpose of enabling the Department of Civil Service to process a request to change the address listed on your New York State Health Insurance Program enrollment record. The information will be used in accordance with section 96(1) of the Personal Privacy Protection Law, particularly subdivisions (b), (e) and (f). Failure to provide the information requested may interfere with our ability to comply with your request. This information will be maintained by your personnel office, and by the Employee Benefits Division, Department of Civil Service, Albany, New York 12239. For information concerning *only* the Personal Privacy Protection Law, call 518-473-2624. For information relating to this form, please call 1-800-833-4344.

FOR OFFICE USE ONLY		
	DATE	INITIALS