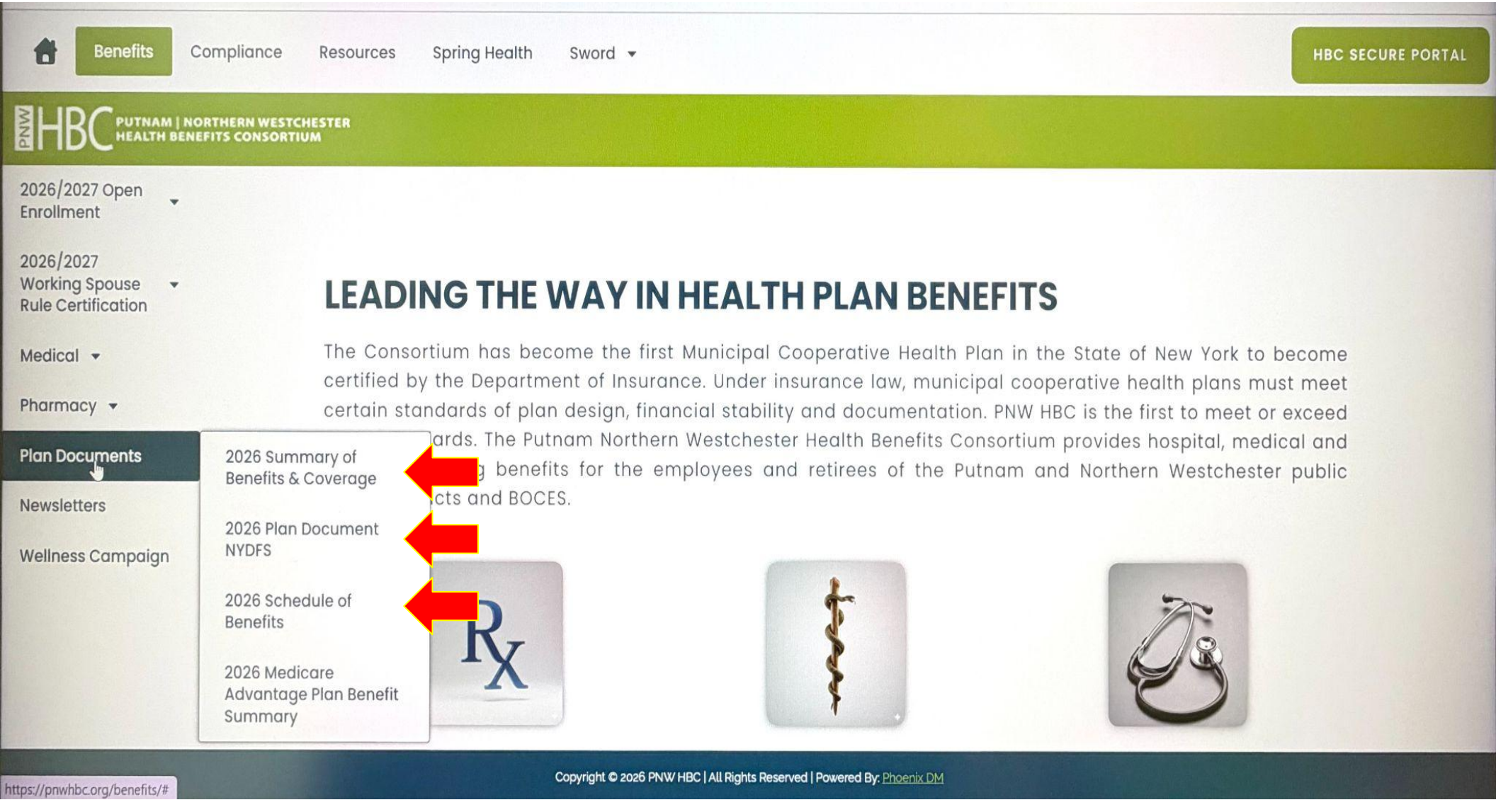
PUTNAM NORTHERN WESTCHESTER HEALTH BENEFITS CONSORTIUM

Website: pnwhbc.org



Annual Open Enrollment Period

Usually happens in May. During this time you can request to enroll yourself, add or remove dependents, terminate your coverage or make any other changes to your plan, which will go into effect July 1st.

No changes can be made to your plan outside of this Open Enrollment Period, unless you have a Qualifying Life Event.

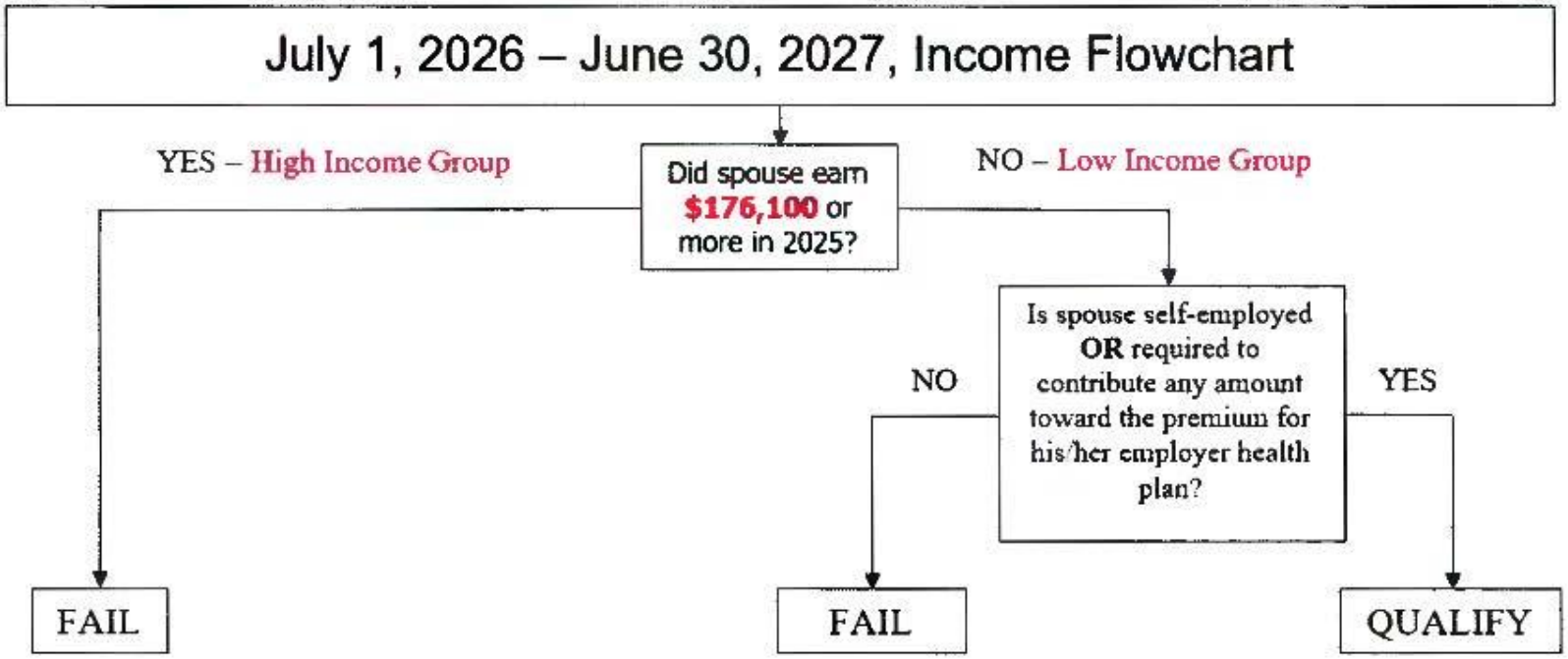
Some examples of Qualifying Events:

- **Marriage or Divorce**
- **Birth or Adoption of a child**
- **Loss of other coverage**

Changes due to a qualifying event must be made within 30 days of the event. You will be required to submit documentation proving the event.

WSR - Eligibility Rule

PNW HBC
PUTNAM | NORTHERN WESTCHESTER HEALTH BENEFITS CONSORTIUM



- FAIL – Spouse is required to purchase other primary health insurance, or the Employee/Retiree will be charged a Buy-In amount of $800 for covering the spouse primary on the plan. This additional premium Buy-In is in addition to any other premium cost sharing that the district requires.
- QUALIFY – Spouse is NOT required to purchase other primary health insurance or be charged a Buy-In amount for covering the spouse primary on the plan.

For more information visit:
https://pnwhbc.org/wp-content/uploads/2026/04/26-27-WSR-Member-Guide.pdf

Annual Spousal and Dependent Recertification

- All dependents must be recertified annually to determine their eligibility for primary coverage.
- Occurs each year in May.
- Supporting documentation must be sent directly to PNW HBC.
- If recertification is not completed by the deadline, dependent's claims will be processed as secondary.
- You are responsible for notifying the District of any changes in dependent status that could result in their ineligibility for primary coverage within 30 days of the change.

Annual Coverage and Costs

Our plan year runs from July 1 - June 30.

Employees pay for 12 months of coverage over 10 months.

Deductions begin in September and continue through your last pay period in June.

Costs will be prorated based on your enrollment date.

Employees pay their contribution percentage of the District's annual cost for the tier of coverage they hold, based on the contractual agreement of their bargaining unit.

Current District Annual Cost for Coverage:

$12,792 - Individual $30,708 - Employee + 1 $33,504 - Family

These costs are subject to change.

Health Insurance Buyout Option

- Eligibility and amount of payment is based on the terms of your bargaining unit agreement.
- You must provide proof of other coverage. (Ex: Insurance ID card, letter from employer/provider, current Explanation of Benefits)
- Payment is made semi-annually in December and June.
- Amount will be prorated based on your eligibility date.
- A new Health Insurance Buyout Request form must be completed each calendar year.

QUESTIONS?

District Benefits Representative:

Aliza Trupia

Phone: 845-279-8000 x6112

Email: atrupia@brewsterschools.org

Putnam Northern Westchester Health Benefits Consortium Member support:

Phone: 888-709-6414

Email: hbcsupport@fmvaccaro.com