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DEPARTMENT OF CIVIL SERVICE
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ALBANY, NEW YORK 12239
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NANCY G. GROENWEGEN
COMMISSIONER

NY08-37

TO: State Agency Health Benefits Administrators

FROM: Employee Benefits Division

SUBJECT: 2009 Health Insurance Contribution Biweekly Rates
2009 Dental and Vision Rates for Leave without Pay

DATE: December 4, 2008

Attached are the 2009 New York State Health Insurance Program (NYSHIP) premium rates and Medicare Part "B" reimbursement rates effective January 1, 2009. The NYSHIP rates are presented in three basic groupings:

- Schedule I – Settled With Drug Coverage
- Schedule II – Unsettled With Drug Coverage
- Schedule III – CSEA and Courts

These schedules differentiate the rates applicable to employees in bargaining units whose contract negotiations have remained unsettled, from those that have reached agreement with the Governor's Office of Employee Relations.

The Empire Plan rates, in aggregate, will increase 1.15%. The percentage changes for individual and family rates vary due to the separate rating of enrollee and dependent experience as well as the bargaining status of the respective groups.

Overall, the HMO rates have increased an average of 15.2%, with varying percentage changes for both individual HMOs and coverage types. The increase in the employee deduction by HMO can vary significantly due to the impact of the HMO capping formulas. The capping formula affects 18 of the 20 HMO option codes for individual and family coverage.

Employee deductions will be changed automatically through PayServ as follows:

Employees Exempt from Lag Payroll

- o Administrative payroll checks dated December 10, 2008
- o Institution payroll checks dated December 18, 2008

Employees Subject to Lag Payroll

- o Administrative payroll checks dated December 24, 2008
- o Institution payroll checks dated December 31, 2008

Questions may be directed to your processor.

**NYS Health Insurance Program
Dental and Vision Rates
Effective January 1, 2009**

Biweekly Benefit Programs
Dental Program

A02, A04, A05, A07, A09, A10,
A11, A15, A17, A19, A22, A23,
A24, A25, A33, A35, A36, A37,
A43, A46, A48, A50, A51, L19,
R11, R16, R17, R18, R19, R20,
R25, R61, R69, R75

Full Share LWOP rates			
D E N T A L		Biweekly	Monthly
	Individual	\$ 13.03	\$ 28.32
	Family	\$ 34.17	\$ 74.24

Biweekly Benefit Programs
Vision Program

A02, A04, A05, A09, A10, A11,
A22, A23, A24, A33, R16, R17,
R18, R19, R20, R61, R69, R75

Full Share LWOP rates			
V I S I O N		Biweekly	Monthly
	Individual	\$ 1.65	\$ 3.59
	Family	\$ 4.43	\$ 9.62

Biweekly Benefit Programs
Vision Program With Laser
Benefits

A25, A37, A50, A51

Full Share LWOP rates			
V I S I O N		Biweekly	Monthly
	Individual	\$ 3.90	\$ 8.47
	Family	\$ 6.67	\$ 14.50

**January 1, 2009 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

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Administrative Paycheck December 10, 2008 - Employees exempt from Lag Payroll
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Institution Paycheck December 18, 2008 - Employees not subject to Lag Payroll

***Medicare : 44.37**

			Schedule I Drug Coverage <u>Benefit Programs:</u> A02, A03, A05, A06, A07, A09, A10 A11, A12, A19, A22, A23, A28,A29 A33, A34 A35, A40, L19	
O	C	M		
P	O	E		
T	V	D	Employee	<u>Full Share</u> LWOP
<u>Empire Plan</u>				
Individual	001	1 0	22.16	221.64
Medicare	001	1 1	(22.21)	177.27
Family	001	4 0	97.06	521.24
1 Medicare	001	4 1	52.69	476.87
2 Medicares	001	4 2	8.32	432.50

			Schedule II Unsettled <u>Benefit Program:</u> A04, A24, A25, A37, A48, A50, A51	
O	C	M		
P	O	E		
T	V	D	Employee	<u>Full Share</u> LWOP
<u>Empire Plan</u>				
Individual	001	1 0	22.61	226.11
Medicare	001	1 1	(21.76)	181.74
Family	001	4 0	98.77	530.75
1 Medicare	001	4 1	54.40	486.38
2 Medicares	001	4 2	10.03	442.01

Rates include Medical Only

**January 1, 2009 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

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*** Medicare :**
Biweekly 44.37
Monthly 96.40

Empire Plan

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule III CSEA & COURTS <u>Benefit Program:</u> A01, A13, A14,A15, A17, A20, A21, A36, A39, A41 A43, A44, A45, A46, A47 Employee <u>Full Share</u> Biweekly	
O P T	C O V	M E D		
001	1	0	22.46	224.63
001	1	1	(21.91)	128.23
001	4	0	98.16	527.44
001	4	1	53.79	431.04
001	4	2	9.42	334.64

January 1, 2009 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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			Schedule I Drug Coverage	
			<u>Benefit Programs:</u>	
			A01, A02, A03, A05, A06, A07, A09, A10,A11,A12 , A13 A14, A15, A17, A19, A20, A21, A22, A23, A28, A29 A33, A34, A35, A36, A39, A40, A41 A42, A43, A44, A46, A47, L19	
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP
<u>HIP (050)</u>				
Individual	050	1 0	34.92	225.00
Medicare	050	1 1	(9.45)	180.63
Family	050	4 0	129.53	551.15
1 Medicare	050	4 1	85.16	506.78
2 Medicares	050	4 2	40.79	462.41
<u>Univera Healthcare-WNY, Inc (057)</u>				
Individual	057	1 0	92.73	260.34
Medicare	057	1 1	48.36	215.97
Family	057	4 0	343.26	719.65
1 Medicare	057	4 1	298.89	675.28
2 Medicares	057	4 2	254.52	630.91
<u>Preferred Care (058)</u>				
Individual	058	1 0	17.56	175.63
Medicare	058	1 1	(26.81)	131.26
Family	058	4 0	83.20	438.20
1 Medicare	058	4 1	38.83	393.83
2 Medicares	058	4 2	(5.54)	349.46
<u>Independent Health - Western NY (059)</u>				
Individual	059	1 0	21.26	206.52
Medicare	059	1 1	(23.11)	162.15
Family	059	4 0	126.99	543.59
1 Medicare	059	4 1	82.62	499.22
2 Medicares	059	4 2	38.25	454.85
<u>MVP Health Care, Inc. - East Region (060)</u>				
Individual	060	1 0	17.68	176.77
Medicare	060	1 1	(26.69)	132.40
Family	060	4 0	87.86	457.51
1 Medicare	060	4 1	43.49	413.14
2 Medicares	060	4 2	(0.88)	368.77
<u>Capital District PHP - Capital (063)</u>				
Individual	063	1 0	18.91	189.08
Medicare	063	1 1	(25.46)	144.71
Family	063	4 0	93.04	485.60
1 Medicare	063	4 1	48.67	441.23
2 Medicares	063	4 2	4.30	396.86

January 1, 2009 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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			<u>Benefit Programs:</u>	
			A01, A02, A03, A05, A06, A07, A09, A10, A11, A12 , A13 A14, A15, A17, A19, A20, A21, A22, A23, A28, A29 A33, A34, A35, A36, A39, A40, A41 A42, A43, A44, A46, A47, L19	
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP
<u>Blue Choice (066)</u>				
Individual	066	1 0	22.53	194.89
Medicare	066	1 1	(21.84)	150.52
Family	066	4 0	106.78	490.41
1 Medicare	066	4 1	62.41	446.04
2 Medicares	066	4 2	18.04	401.67
<u>Community Blue (067)</u>				
Individual	067	1 0	38.86	230.78
Medicare	067	1 1	(5.51)	186.41
Family	067	4 0	202.20	640.48
1 Medicare	067	4 1	157.83	596.11
2 Medicares	067	4 2	113.46	551.74
<u>HMO Blue - CNY (072)</u>				
Individual	072	1 0	66.28	249.24
Medicare	072	1 1	21.91	204.87
Family	072	4 0	232.48	635.34
1 Medicare	072	4 1	188.11	590.97
2 Medicares	072	4 2	143.74	546.60
<u>HMO Blue - Utica/Watertown (160)</u>				
Individual	160	1 0	31.77	215.47
Medicare	160	1 1	(12.60)	171.10
Family	160	4 0	169.93	578.08
1 Medicare	160	4 1	125.56	533.71
2 Medicares	160	4 2	81.19	489.34

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			<u>Benefit Programs:</u>	
			A01, A02, A03, A05, A06, A07, A09, A10,A11,A12 , A13 A14, A15, A17, A19, A20, A21, A22, A23, A28, A29 A33, A34, A35, A36, A39, A40, A41 A42, A43, A44, A46, A47, L19	
O P T	C O V	M E D		
			Employee	<u>Full Share</u> LWOP
<u>Aetna (210)</u>				
Individual	210	1 0	97.26	273.07
Medicare	210	1 1	52.89	228.70
Family	210	4 0	363.03	746.04
1 Medicare	210	4 1	318.66	701.67
2 Medicares	210	4 2	274.29	657.30
<u>GHI HMO Albany Region (220)</u>				
Individual	220	1 0	42.54	228.76
Medicare	220	1 1	(1.83)	184.39
Family	220	4 0	185.78	601.72
1 Medicare	220	4 1	141.41	557.35
2 Medicares	220	4 2	97.04	512.98
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>				
Individual	280	1 0	60.17	256.32
Medicare	280	1 1	15.80	211.95
Family	280	4 0	228.20	669.13
1 Medicare	280	4 1	183.83	624.76
2 Medicares	280	4 2	139.46	580.39
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>				
Individual	290	1 0	82.62	279.23
Medicare	290	1 1	38.25	234.86
Family	290	4 0	286.97	728.95
1 Medicare	290	4 1	242.60	684.58
2 Medicares	290	4 2	198.23	640.21
<u>Capital District PHP - Central (300)</u>				
Individual	300	1 0	44.48	223.54
Medicare	300	1 1	0.11	179.17
Family	300	4 0	173.98	574.07
1 Medicare	300	4 1	129.61	529.70
2 Medicares	300	4 2	85.24	485.33
<u>Capital District PHP - W. Hudson Valley (310)</u>				
Individual	310	1 0	50.24	228.64
Medicare	310	1 1	5.87	184.27
Family	310	4 0	188.61	587.16
1 Medicare	310	4 1	144.24	542.79
2 Medicares	310	4 2	99.87	498.42

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O	C	M	0.00	
P	O	E		
T	V	D		
			Employee	Full Share LWOP
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>				
Individual	320	1 0	105.69	301.87
Medicare	320	1 1	61.32	257.50
Family	320	4 0	347.14	788.12
1 Medicare	320	4 1	302.77	743.75
2 Medicares	320	4 2	258.40	699.38
<u>MVP Health Care, Inc. - Central Region (330)</u>				
Individual	330	1 0	38.04	209.77
Medicare	330	1 1	(6.33)	165.40
Family	330	4 0	161.35	542.91
1 Medicare	330	4 1	116.98	498.54
2 Medicares	330	4 2	72.61	454.17
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>				
Individual	340	1 0	56.19	230.22
Medicare	340	1 1	11.82	185.85
Family	340	4 0	209.09	595.82
1 Medicare	340	4 1	164.72	551.45
2 Medicares	340	4 2	120.35	507.08
<u>GHI HMO - HV & Ulster Regions (350)</u>				
Individual	350	1 0	59.24	245.46
Medicare	350	1 1	14.87	201.09
Family	350	4 0	237.02	652.95
1 Medicare	350	4 1	192.65	608.58
2 Medicares	350	4 2	148.28	564.21
<u>MVP Health Care Inc - North Region (360)</u>				
Individual	350	1 0	59.41	233.44
Medicare	350	1 1	15.04	189.07
Family	350	4 0	217.42	604.15
1 Medicare	350	4 1	173.05	559.78
2 Medicares	350	4 2	128.68	515.41

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NYS Health Insurance Program Biweekly Rates

UNSETTLED

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				<u>Full Share</u>	
				Employee	LWOP
O P T	C O V	M E D			
<u>HIP (050)</u>					
Individual	050	1	0	34.25	225.00
Medicare	050	1	1	(10.12)	180.63
Family	050	4	0	128.08	551.15
1 Medicare	050	4	1	83.71	506.78
2 Medicares	050	4	2	39.34	462.41
<u>Univera Healthcare-WNY, Inc (057)</u>					
Individual	057	1	0	92.06	260.34
Medicare	057	1	1	47.69	215.97
Family	057	4	0	341.81	719.65
1 Medicare	057	4	1	297.44	675.28
2 Medicares	057	4	2	253.07	630.91
<u>Preferred Care (058)</u>					
Individual	058	1	0	17.56	175.63
Medicare	058	1	1	(26.81)	131.26
Family	058	4	0	83.20	438.20
1 Medicare	058	4	1	38.83	393.83
2 Medicares	058	4	2	(5.54)	349.46
<u>Independent Health - Western NY (059)</u>					
Individual	059	1	0	20.65	206.52
Medicare	059	1	1	(23.72)	162.15
Family	059	4	0	125.54	543.59
1 Medicare	059	4	1	81.17	499.22
2 Medicares	059	4	2	36.80	454.85
<u>MVP Health Care, Inc. - East Region (060)</u>					
Individual	060	1	0	17.68	176.77
Medicare	060	1	1	(26.69)	132.40
Family	060	4	0	87.86	457.51
1 Medicare	060	4	1	43.49	413.14
2 Medicares	060	4	2	(0.88)	368.77
<u>Capital District PHP - Capital (063)</u>					
Individual	063	1	0	18.91	189.08
Medicare	063	1	1	(25.46)	144.71
Family	063	4	0	93.04	485.60
1 Medicare	063	4	1	48.67	441.23
2 Medicares	063	4	2	4.30	396.86

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O C M P O E T V D			Employee	<u>Full Share</u> LWOP
<u>Blue Choice (066)</u>				
Individual	066	1 0	21.86	194.89
Medicare	066	1 1	(22.51)	150.52
Family	066	4 0	105.33	490.41
1 Medicare	066	4 1	60.96	446.04
2 Medicares	066	4 2	16.59	401.67
<u>Community Blue (067)</u>				
Individual	067	1 0	38.19	230.78
Medicare	067	1 1	(6.18)	186.41
Family	067	4 0	200.75	640.48
1 Medicare	067	4 1	156.38	596.11
2 Medicares	067	4 2	112.01	551.74
<u>HMO Blue - CNY (072)</u>				
Individual	072	1 0	65.61	249.24
Medicare	072	1 1	21.24	204.87
Family	072	4 0	231.03	635.34
1 Medicare	072	4 1	186.66	590.97
2 Medicares	072	4 2	142.29	546.60
<u>HMO Blue - Utica/Watertown (160)</u>				
Individual	160	1 0	31.10	215.47
Medicare	160	1 1	(13.27)	171.10
Family	160	4 0	168.48	578.08
1 Medicare	160	4 1	124.11	533.71
2 Medicares	160	4 2	79.74	489.34

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				Employee	Full Share LWOP
<u>Aetna (210)</u>					
Individual	210	1	0	96.59	273.07
Medicare	210	1	1	52.22	228.70
Family	210	4	0	361.58	746.04
1 Medicare	210	4	1	317.21	701.67
2 Medicares	210	4	2	272.84	657.30
<u>GHI HMO Albany Region (220)</u>					
Individual	220	1	0	41.87	228.76
Medicare	220	1	1	(2.50)	184.39
Family	220	4	0	184.33	601.72
1 Medicare	220	4	1	139.96	557.35
2 Medicares	220	4	2	95.59	512.98
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>					
Individual	280	1	0	59.50	256.32
Medicare	280	1	1	15.13	211.95
Family	280	4	0	226.75	669.13
1 Medicare	280	4	1	182.38	624.76
2 Medicares	280	4	2	138.01	580.39
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>					
Individual	290	1	0	81.95	279.23
Medicare	290	1	1	37.58	234.86
Family	290	4	0	285.52	728.95
1 Medicare	290	4	1	241.15	684.58
2 Medicares	290	4	2	196.78	640.21
<u>Capital District PHP - Central (300)</u>					
Individual	300	1	0	43.81	223.54
Medicare	300	1	1	(0.56)	179.17
Family	300	4	0	172.53	574.07
1 Medicare	300	4	1	128.16	529.70
2 Medicares	300	4	2	83.79	485.33
<u>Capital District PHP - W. Hudson Valley (310)</u>					
Individual	310	1	0	49.57	228.64
Medicare	310	1	1	5.20	184.27
Family	310	4	0	187.16	587.16
1 Medicare	310	4	1	142.79	542.79
2 Medicares	310	4	2	98.42	498.42

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O C M P O E T V D			Employee	Full Share LWOP
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>				
Individual	320	1 0	105.02	301.87
Medicare	320	1 1	60.65	257.50
Family	320	4 0	345.69	788.12
1 Medicare	320	4 1	301.32	743.75
2 Medicares	320	4 2	256.95	699.38
<u>MVP Health Care, Inc. - Central Region (330)</u>				
Individual	330	1 0	37.37	209.77
Medicare	330	1 1	(7.00)	165.40
Family	330	4 0	159.90	542.91
1 Medicare	330	4 1	115.53	498.54
2 Medicares	330	4 2	71.16	454.17
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>				
Individual	340	1 0	55.52	230.22
Medicare	340	1 1	11.15	185.85
Family	340	4 0	207.64	595.82
1 Medicare	340	4 1	163.27	551.45
2 Medicares	340	4 2	118.90	507.08
<u>GHI HMO - HV & Ulster Regions (350)</u>				
Individual	350	1 0	58.57	245.46
Medicare	350	1 1	14.20	201.09
Family	350	4 0	235.57	652.95
1 Medicare	350	4 1	191.20	608.58
2 Medicares	350	4 2	146.83	564.21
<u>MVP Health Care Inc - North Region (360)</u>				
Individual	350	1 0	58.74	233.44
Medicare	350	1 1	14.37	189.07
Family	350	4 0	215.97	604.15
1 Medicare	350	4 1	171.60	559.78
2 Medicares	350	4 2	127.23	515.41