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NY 11-45

TO: New York State Agency Health Benefits Administrators

FROM: Employee Benefits Division

SUBJECT: 2012 New York State Health Insurance Rates

DATE: December 1, 2011

Attached are the 2012 New York State Health Insurance Program (NYSHIP) premium rates and Medicare Part B reimbursement rates that become effective January 1, 2012. The NYSHIP rates are presented in six groupings:

- Schedule I – Ratified (CSEA and Unrepresented Enrollees)
- Schedule II – Ratified (PEF and Courts Non-CSEA Represented Enrollees)
- Schedule III – Non-Ratified Group (Represented Enrollees Except CSEA, PEF, ALESU and UUP Lifeguards)
- Schedule IV – Non-Ratified Groups whose Agreements Expired on March 31, 2007 or earlier (ALESU and UUP Lifeguards)
- Schedule V – Student Employee Health Plan
- Full Share Dental and Vision Rates

These schedules reflect the rates applicable to employees in the various bargaining units based on the status and terms of each group's agreement with the State.

The Empire Plan rates, in aggregate, will increase 2.6%. The percentage changes for individuals and family rates vary due to the separate rating of enrollee and dependent experience as well as the collective bargaining agreements in effect for the respective groups.

Overall, the HMO rates have increased an average of 2.9%. The actual percentage change varies by HMO and coverage type (Individual v. Family). The change in the employee deduction for each HMO can vary due to the impact of the HMO capping formulas. The capping formula affects 15 of the 20 HMO option codes for individual coverage and 16 of the 20 HMO option codes for family coverage.

If you have any questions about this rate change, please contact the HBA Line at (518) 474-2780 and a processor will assist you.

Attachments

**January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

Administrative Paycheck December 21, 2011 - Employees exempt from Lag Payroll
 Administrative Paycheck January 4, 2012 - Employees subject to Lag Payroll
 Administrative Paycheck January 12, 2012 - Employees subject to Extra Lag Payroll
 Institution Paycheck December 29, 2011 - Employees subject to Lag Payroll
 Institution Paycheck December 15, 2011 - Employees not subject to Lag Payroll

***Medicare : 45.86**

			Schedule I Ratified (CSEA & Unrepresented Enrollees) Benefit Programs: A01, A05, A06, A07, A13, A15, A17, A19, A28, A29, A33, A34, A35, A36 A39, A41, A43, A46, A61, A62, L19		
Empire Plan	O P T	C O V	M E D	Employee <SG-9	Employee SG-10+ Full Share LWOP
Individual	001	1	0	32.93	43.90 274.39
Medicare	001	1	1	(12.93)	(1.96) 228.53
Family	001	4	0	132.48	158.19 643.08
1 Medicare	001	4	1	86.62	112.33 597.22
2 Medicares	001	4	2	40.76	66.47 551.36

Schedule II Ratified (PEF & Courts Non-CSEA Represented Enrollees) <u>Benefit Program:</u> A02, A14, A20, A42, A44, A47, A60									
	O P T	C O V	M E D	Employee <SG-9		Employee SG-10+		Full Share LWOP	
				1/1 - 3/31	4/1 -12/31	1/1 - 3/31	4/1 - 12/31	1/1 - 3/31	4/1 -12/31
<u>Empire Plan</u>									
Individual	001	1	0	36.34	32.93	54.51	43.90	272.53	274.39
Medicare	001	1	1	(9.52)	(12.93)	8.65	(1.96)	226.67	228.53
Family	001	4	0	141.17	132.48	183.54	158.19	643.41	643.08
1 Medicare	001	4	1	95.31	86.62	137.68	112.33	597.55	597.22
2 Medicares	001	4	2	49.45	40.76	91.82	66.47	551.69	551.36

* Medicare is income sensitive - this is the basic bi-weekly premium rate

**January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

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 Institution Paycheck December 15, 2011 - Employees not subject to Lag Payroll

*** Medicare :**
Biweekly 45.86
Monthly 99.90

Empire Plan

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule III Non Ratified Group (All Other Represented Groups Except CSEA, PEF, ALESU, and UUP Lifeguards) Benefit Program: A03, A04, A09, A10, A11, A12, A25, A40, A48, A50, A63, A64	
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP
001	1	0	28.06	280.63
001	1	1	(17.80)	234.77
001	4	0	122.13	656.91
001	4	1	76.27	611.05
001	4	2	30.41	565.19

Empire Plan

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule IV Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier (ALESU & UUP Lifeguards) Benefit Program: A37, A51, A53, A65	
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP
001	1	0	28.97	289.74
001	1	1	(16.89)	243.88
001	4	0	125.52	675.95
001	4	1	79.66	576.05
001	4	2	33.80	476.15

(11/22/2012)

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*** Medicare : 45.86**

SEHP PLAN

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule V Student Employee Heath Plan	
			<u>Benefit Program:</u>	
			A27, A52	C27, C52
O P T	C O V	M E D	Employee Biweekly	COBRA Monthly
002	1	0	7.95	176.76
002	1	1	(37.91)	76.86
002	4	0	55.52	599.57
002	4	1	9.66	499.67
002	4	2	(36.20)	399.77

* Medicare is income sensitive - this is the basic bi-weekly premium rate

SEHP Rates include Medical Dental and Vision.

Medicare credits apply only for Medicare Primary Domestic Partners and/or Medicare Primary Enrollees due to disability or ESRD

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Institution Paycheck December 15, 2011 - Employees not subject to Lag Payroll

*Medicare: 45.86

				Schedule I Ratified (CSEA & Unrepresented Enrollees)		
				Benefit Programs: A01, A05, A06, A07, A13, A15, A17, A19, A28, A29, A33, A34, A35, A36 A39, A41, A43, A46, A61, A62, L19		
O C M P O E T V D				Employee <SG-9	Employee SG-10+	Full Share LWOP
<u>HIP (050)</u>						
Individual	050	1	0	60.97	71.59	294.65
Medicare	050	1	1	15.11	25.73	248.79
Family	050	4	0	196.09	222.16	711.70
1 Medicare	050	4	1	150.23	176.30	665.84
2 Medicares	050	4	2	104.37	130.44	619.98
<u>MVP Health Care, Inc. - Rochester (058)</u>						
Individual	058	1	0	26.08	34.78	217.35
Medicare	058	1	1	(19.78)	(11.08)	171.49
Family	058	4	0	111.20	132.51	532.60
1 Medicare	058	4	1	65.34	86.65	486.74
2 Medicares	058	4	2	19.48	40.79	440.88
<u>Independent Health - Western NY (059)</u>						
Individual	059	1	0	44.71	55.04	271.94
Medicare	059	1	1	(1.15)	9.18	226.08
Family	059	4	0	164.97	190.43	668.35
1 Medicare	059	4	1	119.11	144.57	622.49
2 Medicares	059	4	2	73.25	98.71	576.63
<u>MVP Health Care, Inc. - East Region (060)</u>						
Individual	060	1	0	28.35	37.80	236.25
Medicare	060	1	1	(17.51)	(8.06)	190.39
Family	060	4	0	121.05	144.24	579.59
1 Medicare	060	4	1	75.19	98.38	533.73
2 Medicares	060	4	2	29.33	52.52	487.87
<u>Capital District PHP - Capital (063)</u>						
Individual	063	1	0	28.38	37.84	236.50
Medicare	063	1	1	(17.48)	(8.02)	190.64
Family	063	4	0	121.21	144.42	580.31
1 Medicare	063	4	1	75.35	98.56	534.45
2 Medicares	063	4	2	29.49	52.70	488.59

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				Benefit Programs: A01, A05, A06, A07, A13, A15, A17, A19, A28, A29, A33, A34, A35, A36 A39, A41, A43, A46, A61, A62, L19		
O P T C O V M E D				Employee <SG-9	Employee SG-10+	Full Share LWOP
<u>Blue Choice (066)</u>						
Individual	066	1	0	25.69	34.25	214.05
Medicare	066	1	1	(20.17)	(11.61)	168.19
Family	066	4	0	111.08	132.29	530.30
1 Medicare	066	4	1	65.22	86.43	484.44
2 Medicares	066	4	2	19.36	40.57	438.58
<u>Community Blue (067)</u>						
Individual	067	1	0	32.20	42.94	268.35
Medicare	067	1	1	(13.66)	(2.92)	222.49
Family	067	4	0	167.17	194.23	701.31
1 Medicare	067	4	1	121.31	148.37	655.45
2 Medicares	067	4	2	75.45	102.51	609.59
<u>HMO Blue - CNY (072)</u>						
Individual	072	1	0	84.10	94.18	305.65
Medicare	072	1	1	38.24	48.32	259.79
Family	072	4	0	258.56	283.15	744.83
1 Medicare	072	4	1	212.70	237.29	698.97
2 Medicares	072	4	2	166.84	191.43	653.11
<u>HMO Blue - Utica/Watertown (160)</u>						
Individual	160	1	0	95.82	105.78	314.79
Medicare	160	1	1	49.96	59.92	268.93
Family	160	4	0	316.43	340.95	801.07
1 Medicare	160	4	1	270.57	295.09	755.21
2 Medicares	160	4	2	224.71	249.23	709.35

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				Benefit Programs: A01, A05, A06, A07, A13, A15, A17, A19, A28, A29, A33, A34, A35, A36 A39, A41, A43, A46, A61, A62, L19		
				Employee <SG-9	Employee SG-10+	Full Share LWOP
O P T	C O V	M E D				
<u>Aetna (210)</u>						
Individual	210	1	0	124.89	135.63	361.27
Medicare	210	1	1	79.03	89.77	315.41
Family	210	4	0	508.02	533.77	1,018.39
1 Medicare	210	4	1	462.16	487.91	972.53
2 Medicares	210	4	2	416.30	442.05	926.67
<u>GHI HMO Albany Region (220)</u>						
Individual	220	1	0	115.33	126.28	356.02
Medicare	220	1	1	69.47	80.42	310.16
Family	220	4	0	387.44	414.59	923.82
1 Medicare	220	4	1	341.58	368.73	877.96
2 Medicares	220	4	2	295.72	322.87	832.10
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>						
Individual	280	1	0	41.84	53.28	293.36
Medicare	280	1	1	(4.02)	7.42	247.50
Family	280	4	0	188.99	217.57	753.33
1 Medicare	280	4	1	143.13	171.71	707.47
2 Medicares	280	4	2	97.27	125.85	661.61
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>						
Individual	290	1	0	122.74	134.46	380.52
Medicare	290	1	1	76.88	88.60	334.66
Family	290	4	0	402.09	431.40	980.97
1 Medicare	290	4	1	356.23	385.54	935.11
2 Medicares	290	4	2	310.37	339.68	889.25
<u>Capital District PHP - Central (300)</u>						
Individual	300	1	0	56.72	66.71	276.49
Medicare	300	1	1	10.86	20.85	230.63
Family	300	4	0	193.65	218.27	680.42
1 Medicare	300	4	1	147.79	172.41	634.56
2 Medicares	300	4	2	101.93	126.55	588.70
<u>Capital District PHP - W. Hudson Valley (310)</u>						
Individual	310	1	0	61.50	71.44	280.02
Medicare	310	1	1	15.64	25.58	234.16
Family	310	4	0	205.28	229.76	689.26
1 Medicare	310	4	1	159.42	183.90	643.40
2 Medicares	310	4	2	113.56	138.04	597.54

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(11/22/2012)

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				Benefit Programs: A01, A05, A06, A07, A13, A15, A17, A19, A28, A29, A33, A34, A35, A36 A39, A41, A43, A46, A61, A62, L19		
O P T	C O V	M E D		Employee <SG-9	Employee SG-10+	Full Share LWOP
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>						
Individual	320	1	0	112.29	123.93	368.29
Medicare	320	1	1	66.43	78.07	322.43
Family	320	4	0	372.01	401.12	946.73
1 Medicare	320	4	1	326.15	355.26	900.87
2 Medicares	320	4	2	280.29	309.40	855.01
<u>MVP Health Care, Inc. - Central Region (330)</u>						
Individual	330	1	0	49.72	59.47	264.18
Medicare	330	1	1	3.86	13.61	218.32
Family	330	4	0	174.74	198.76	649.63
1 Medicare	330	4	1	128.88	152.90	603.77
2 Medicares	330	4	2	83.02	107.04	557.91
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>						
Individual	340	1	0	54.44	64.20	269.08
Medicare	340	1	1	8.58	18.34	223.22
Family	340	4	0	186.23	210.27	661.49
1 Medicare	340	4	1	140.37	164.41	615.63
2 Medicares	340	4	2	94.51	118.55	569.77
<u>GHI HMO - HV & Ulster Regions (350)</u>						
Individual	350	1	0	141.57	152.52	382.26
Medicare	350	1	1	95.71	106.66	336.40
Family	350	4	0	465.51	492.76	1,002.00
1 Medicare	350	4	1	419.65	446.90	956.14
2 Medicares	350	4	2	373.79	401.04	910.28
<u>MVP HMO - North Region (360)</u>						
Individual	350	1	0	90.43	100.37	308.98
Medicare	350	1	1	44.57	54.51	263.12
Family	350	4	0	277.63	302.11	761.66
1 Medicare	350	4	1	231.77	256.25	715.80
2 Medicares	350	4	2	185.91	210.39	669.94

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				Schedule II Ratified (PEF & Courts Non-CSEA Represented Enrollees)				
				<u>Benefit Programs:</u> A02, A14, A20, A42, A44, A47, A60				
				Employee <SG-9		Employee SG-10+		
				1/1 - 3/31	4/1 - 12/31	4/1 - 12/31	4/1 & forward	Full Share LWOP
HIP (050)								
Individual	050	1	0	66.08	60.97	83.58	71.59	294.65
Medicare	050	1	1	20.22	15.11	37.72	25.73	248.79
Family	050	4	0	204.47	196.09	247.25	222.16	711.70
1 Medicare	050	4	1	158.61	150.23	201.39	176.30	665.84
2 Medicares	050	4	2	112.75	104.37	155.53	130.44	619.98
MVP Health Care, Inc. -Rochester (058)								
Individual	058	1	0	28.89	26.08	43.21	34.78	217.35
Medicare	058	1	1	(16.97)	(19.78)	(2.65)	(11.08)	171.49
Family	058	4	0	118.10	111.20	153.19	132.51	532.60
1 Medicare	058	4	1	72.24	65.34	107.33	86.65	486.74
2 Medicares	058	4	2	26.38	19.48	61.47	40.79	440.88
Independent Health - Western NY (059)								
Individual	059	1	0	47.98	44.71	64.85	55.04	271.94
Medicare	059	1	1	2.12	(1.15)	18.99	9.18	226.08
Family	059	4	0	173.04	164.97	214.63	190.43	668.35
1 Medicare	059	4	1	127.18	119.11	168.77	144.57	622.49
2 Medicares	059	4	2	81.32	73.25	122.91	98.71	576.63
MVP Health Care, Inc. - East Region (060)								
Individual	060	1	0	31.30	28.35	46.65	37.80	236.25
Medicare	060	1	1	(14.56)	(17.51)	0.79	(8.06)	190.39
Family	060	4	0	128.28	121.05	165.95	144.24	579.59
1 Medicare	060	4	1	82.42	75.19	120.09	98.38	533.73
2 Medicares	060	4	2	36.56	29.33	74.23	52.52	487.87
Capital District PHP - Capital (063)								
Individual	063	1	0	32.59	28.38	48.59	37.84	236.50
Medicare	063	1	1	(13.27)	(17.48)	2.73	(8.02)	190.64
Family	063	4	0	129.22	121.21	168.37	144.42	580.31
1 Medicare	063	4	1	83.36	75.35	122.51	98.56	534.45
2 Medicares	063	4	2	37.50	29.49	76.65	52.70	488.59

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				<u>Benefit Programs:</u> A02, A14, A20, A42, A44, A47, A60				
	O P T	C O V	M E D	Employee <SG-9		Employee SG-10+		Full Share LWOP
				1/1 - 3/31	4/1 - 12/31	1/1 - 3/31	4/1 - 12/31	
Blue Choice (066)								
Individual	066	1	0	28.53	25.69	42.76	34.25	214.05
Medicare	066	1	1	(17.33)	(20.17)	(3.10)	(11.61)	168.19
Family	066	4	0	117.84	111.08	152.56	132.29	530.30
1 Medicare	066	4	1	71.98	65.22	106.70	86.43	484.44
2 Medicares	066	4	2	26.12	19.36	60.84	40.57	438.58
Community Blue (067)								
Individual	067	1	0	35.58	32.20	53.08	42.94	268.35
Medicare	067	1	1	(10.28)	(13.66)	7.22	(2.92)	222.49
Family	067	4	0	175.84	167.17	220.18	194.23	701.35
1 Medicare	067	4	1	129.98	121.31	174.32	148.37	655.49
2 Medicares	067	4	2	84.12	75.45	128.46	102.51	609.63
HMO Blue - CNY (072)								
Individual	072	1	0	89.11	84.10	105.85	94.18	305.65
Medicare	072	1	1	43.25	38.24	59.99	48.32	259.79
Family	072	4	0	266.63	258.56	307.30	283.15	744.83
1 Medicare	072	4	1	220.77	212.70	261.44	237.29	698.97
2 Medicares	072	4	2	174.91	166.84	215.58	191.43	653.11
HMO Blue - Utica/Watertown (160)								
Individual	160	1	0	100.71	95.82	117.12	105.78	314.79
Medicare	160	1	1	54.85	49.96	71.26	59.92	268.93
Family	160	4	0	324.30	316.43	364.50	340.95	801.07
1 Medicare	160	4	1	278.44	270.57	318.64	295.09	755.21
2 Medicares	160	4	2	232.58	224.71	272.78	249.23	709.35

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				<u>Benefit Programs:</u> A02, A14, A20, A42, A44, A47, A60				
	O P T	C O V	M E D	Employee <SG-9		Employee SG-10+		Full Share
				1/1 - 3/31	4/1 - 12/31	1/1 - 3/31	4/1 - 12/31	LWOP
<u>Aetna (210)</u>								
Individual	210	1	0	130.02	124.89	147.66	135.63	361.27
Medicare	210	1	1	84.16	79.03	101.80	89.77	315.41
Family	210	4	0	516.25	508.02	558.42	533.77	1,018.39
1 Medicare	210	4	1	470.39	462.16	512.56	487.91	972.53
2 Medicares	210	4	2	424.53	416.30	466.70	442.05	926.67
<u>GHI HMO Albany Region (220)</u>								
Individual	220	1	0	120.62	115.33	138.80	126.28	356.02
Medicare	220	1	1	74.76	69.47	92.94	80.42	310.16
Family	220	4	0	396.35	387.44	441.27	414.59	923.82
1 Medicare	220	4	1	350.49	341.58	395.41	368.73	877.96
2 Medicares	220	4	2	304.63	295.72	349.55	322.87	832.10
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>								
Individual	280	1	0	47.03	41.84	65.51	53.28	293.36
Medicare	280	1	1	1.17	(4.02)	19.65	7.42	247.50
Family	280	4	0	197.69	188.99	243.62	217.57	753.33
1 Medicare	280	4	1	151.83	143.13	197.76	171.71	707.47
2 Medicares	280	4	2	105.97	97.27	151.90	125.85	661.61
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>								
Individual	290	1	0	127.93	122.74	146.69	134.46	380.52
Medicare	290	1	1	82.07	76.88	100.83	88.60	334.66
Family	290	4	0	410.80	402.09	457.47	431.40	980.97
1 Medicare	290	4	1	364.94	356.23	411.61	385.54	935.11
2 Medicares	290	4	2	319.08	310.37	365.75	339.68	889.25
<u>Capital District PHP - Central (300)</u>								
Individual	300	1	0	61.69	56.72	78.26	66.71	276.49
Medicare	300	1	1	15.83	10.86	32.40	20.85	230.63
Family	300	4	0	201.70	193.65	242.38	218.27	680.42
1 Medicare	300	4	1	155.84	147.79	196.52	172.41	634.56
2 Medicares	300	4	2	109.98	101.93	150.66	126.55	588.70
<u>Capital District PHP - W. Hudson Valley (310)</u>								
Individual	310	1	0	66.46	61.50	82.97	71.44	280.02
Medicare	310	1	1	20.60	15.64	37.11	25.58	234.16
Family	310	4	0	213.31	205.28	253.81	229.76	689.26
1 Medicare	310	4	1	167.45	159.42	207.95	183.90	643.40
2 Medicares	310	4	2	121.59	113.56	162.09	138.04	597.54

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(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

Administrative Paycheck December 21, 2011 - Employees exempt from Lag Payroll
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Institution Paycheck December 15, 2011 - Employees not subject to Lag Payroll

*Medicare: 45.86

				Schedule II Ratified (PEF & Courts Non-CSEA Represented Enrollees)				
				<u>Benefit Programs:</u> A02, A14, A20, A42, A44, A47, A60				
	O P T	C O V	M E D	Employee <SG-9		Employee SG-10+		Full Share LWOP
				1/1 - 3/31	4/1 - 12/31	1/1 - 3/31	4/1 - 12/31	
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>								
Individual	320	1	0	117.49	112.29	136.18	123.93	368.29
Medicare	320	1	1	71.63	66.43	90.32	78.07	322.43
Family	320	4	0	380.73	372.01	427.22	401.12	946.73
1 Medicare	320	4	1	334.87	326.15	381.36	355.26	900.87
2 Medicares	320	4	2	289.01	280.29	335.50	309.40	855.01
<u>MVP Health Care, Inc. - Central Region (330)</u>								
Individual	330	1	0	54.61	49.72	70.79	59.47	264.18
Medicare	330	1	1	8.75	3.86	24.93	13.61	218.32
Family	330	4	0	182.59	174.74	222.28	198.76	649.63
1 Medicare	330	4	1	136.73	128.88	176.42	152.90	603.77
2 Medicares	330	4	2	90.87	83.02	130.56	107.04	557.91
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>								
Individual	340	1	0	59.31	54.44	75.45	64.20	269.08
Medicare	340	1	1	13.45	8.58	29.59	18.34	223.22
Family	340	4	0	194.04	186.23	233.63	210.27	661.49
1 Medicare	340	4	1	148.18	140.37	187.77	164.41	615.63
2 Medicares	340	4	2	102.32	94.51	141.91	118.55	569.77
<u>GHI HMO - HV & Ulster Regions (350)</u>								
Individual	350	1	0	146.86	141.57	165.04	152.52	382.26
Medicare	350	1	1	101.00	95.71	119.18	106.66	336.40
Family	350	4	0	474.52	465.51	519.43	492.76	1,002.00
1 Medicare	350	4	1	428.66	419.65	473.57	446.90	956.14
2 Medicares	350	4	2	382.80	373.79	427.71	401.04	910.28
<u>MVP HMO - North Region (360)</u>								
Individual	350	1	0	95.38	90.43	111.86	100.37	308.98
Medicare	350	1	1	49.52	44.57	66.00	54.51	263.12
Family	350	4	0	285.64	277.63	326.06	302.11	761.66
1 Medicare	350	4	1	239.78	231.77	280.20	256.25	715.80
2 Medicares	350	4	2	193.92	185.91	234.34	210.39	669.94

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(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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*Medicare: 45.86

			Schedule III Non Ratified Group (Represented Groups Except CSEA, PEF, ALESU, and UUP Lifeguards)	
			Benefit Programs: A03, A04, A09, A10, A11, A12, A25, A40, A48, A50, A63, A64	
O P T	C O V	M E D	Employee	Full Share LWOP
HIP (050)				
Individual	050	1 0	53.67	294.65
Medicare	050	1 1	7.81	248.79
Family	050	4 0	178.52	711.70
1 Medicare	050	4 1	132.66	665.84
2 Medicares	050	4 2	86.80	619.98
MVP Health Care, Inc. -Rochester (058)				
Individual	058	1 0	21.73	217.35
Medicare	058	1 1	(24.13)	171.49
Family	058	4 0	100.54	532.60
1 Medicare	058	4 1	54.68	486.74
2 Medicares	058	4 2	8.82	440.88
Independent Health - Western NY (059)				
Individual	059	1 0	37.56	271.94
Medicare	059	1 1	(8.30)	226.08
Family	059	4 0	147.71	668.35
1 Medicare	059	4 1	101.85	622.49
2 Medicares	059	4 2	55.99	576.63
MVP Health Care, Inc. - East Region (060)				
Individual	060	1 0	23.62	236.25
Medicare	060	1 1	(22.24)	190.39
Family	060	4 0	109.45	579.59
1 Medicare	060	4 1	63.59	533.73
2 Medicares	060	4 2	17.73	487.87
Capital District PHP - Capital (063)				
Individual	063	1 0	23.65	236.50
Medicare	063	1 1	(22.21)	190.64
Family	063	4 0	109.60	580.31
1 Medicare	063	4 1	63.74	534.45
2 Medicares	063	4 2	17.88	488.59

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(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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*Medicare: 45.86

			Schedule III Non Ratified Group (Represented Groups Except CSEA, PEF, ALESU, and UUP Lifeguards)	
			Benefit Programs: A03, A04, A09, A10, A11, A12, A25, A40, A48, A50, A63, A64	
O P T	C O V	M E D	Employee	Full Share LWOP
<u>Blue Choice (066)</u>				
Individual	066	1 0	21.40	214.05
Medicare	066	1 1	(24.46)	168.19
Family	066	4 0	100.46	530.30
1 Medicare	066	4 1	54.60	484.44
2 Medicares	066	4 2	8.74	438.58
<u>Community Blue (067)</u>				
Individual	067	1 0	26.83	268.35
Medicare	067	1 1	(19.03)	222.49
Family	067	4 0	149.12	701.35
1 Medicare	067	4 1	103.26	655.49
2 Medicares	067	4 2	57.40	609.63
<u>HMO Blue - CNY (072)</u>				
Individual	072	1 0	77.08	305.65
Medicare	072	1 1	31.22	259.79
Family	072	4 0	241.75	744.83
1 Medicare	072	4 1	195.89	698.97
2 Medicares	072	4 2	150.03	653.11
<u>HMO Blue - Utica/Watertown (160)</u>				
Individual	160	1 0	88.86	314.79
Medicare	160	1 1	43.00	268.93
Family	160	4 0	299.66	801.07
1 Medicare	160	4 1	253.80	755.21
2 Medicares	160	4 2	207.94	709.35

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(11/22/2012)

January 1, 2012 Premium Rate Change
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*Medicare: 45.86

			Schedule III Non Ratified Group (Represented Groups Except CSEA, PEF, ALESU, and UUP Lifeguards)	
			Benefit Programs: A03, A04, A09, A10, A11, A12, A25, A40, A48, A50, A63, A64	
O P T	C O V	M E D	Employee	Full Share LWOP
<u>Aetna (210)</u>				
Individual	210	1 0	117.53	361.27
Medicare	210	1 1	71.67	315.41
Family	210	4 0	490.61	1,018.39
1 Medicare	210	4 1	444.75	972.53
2 Medicares	210	4 2	398.89	926.67
<u>GHI HMO Albany Region (220)</u>				
Individual	220	1 0	107.88	356.02
Medicare	220	1 1	62.02	310.16
Family	220	4 0	369.35	923.82
1 Medicare	220	4 1	323.49	877.96
2 Medicares	220	4 2	277.63	832.10
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>				
Individual	280	1 0	34.14	293.36
Medicare	280	1 1	(11.72)	247.50
Family	280	4 0	170.18	753.33
1 Medicare	280	4 1	124.32	707.47
2 Medicares	280	4 2	78.46	661.61
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>				
Individual	290	1 0	114.90	380.52
Medicare	290	1 1	69.04	334.66
Family	290	4 0	382.91	980.97
1 Medicare	290	4 1	337.05	935.11
2 Medicares	290	4 2	291.19	889.25
<u>Capital District PHP - Central (300)</u>				
Individual	300	1 0	49.74	276.49
Medicare	300	1 1	3.88	230.63
Family	300	4 0	176.81	680.42
1 Medicare	300	4 1	130.95	634.56
2 Medicares	300	4 2	85.09	588.70
<u>Capital District PHP - W. Hudson Valley (310)</u>				
Individual	310	1 0	54.55	280.02
Medicare	310	1 1	8.69	234.16
Family	310	4 0	188.51	689.26
1 Medicare	310	4 1	142.65	643.40
2 Medicares	310	4 2	96.79	597.54

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(11/22/2012)

January 1, 2012 Premium Rate Change
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*Medicare: 45.86

			Schedule III Non Ratified Group (Represented Groups Except CSEA, PEF, ALESU, and UUP Lifeguards)	
			Benefit Programs: A03, A04, A09, A10, A11, A12, A25, A40, A48, A50, A63, A64	
O P T	C O V	M E D	Employee	Full Share LWOP
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>				
Individual	320	1 0	104.49	368.29
Medicare	320	1 1	58.63	322.43
Family	320	4 0	352.94	946.73
1 Medicare	320	4 1	307.08	900.87
2 Medicares	320	4 2	261.22	855.01
<u>MVP Health Care, Inc. - Central Region (330)</u>				
Individual	330	1 0	42.86	264.18
Medicare	330	1 1	(3.00)	218.32
Family	330	4 0	158.21	649.63
1 Medicare	330	4 1	112.35	603.77
2 Medicares	330	4 2	66.49	557.91
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>				
Individual	340	1 0	47.58	269.08
Medicare	340	1 1	1.72	223.22
Family	340	4 0	169.69	661.49
1 Medicare	340	4 1	123.83	615.63
2 Medicares	340	4 2	77.97	569.77
<u>GHI HMO - HV & Ulster Regions (350)</u>				
Individual	350	1 0	134.12	382.26
Medicare	350	1 1	88.26	336.40
Family	350	4 0	447.52	1,002.00
1 Medicare	350	4 1	401.66	956.14
2 Medicares	350	4 2	355.80	910.28
<u>MVP HMO - North Region (360)</u>				
Individual	350	1 0	83.48	308.98
Medicare	350	1 1	37.62	263.12
Family	350	4 0	260.86	761.66
1 Medicare	350	4 1	215.00	715.80
2 Medicares	350	4 2	169.14	669.94

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(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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*Medicare: 45.86

			Schedule IV Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier (ALESU & UUP Lifeguards)	
			Benefit Programs: A37, A51, A53, A65	
			Employee	Full Share LWOP
O P T	C O V	M E D		
<u>HIP (050)</u>				
Individual	050	1 0	52.46	294.65
Medicare	050	1 1	6.60	248.79
Family	050	4 0	175.92	711.70
1 Medicare	050	4 1	130.06	665.84
2 Medicares	050	4 2	84.20	619.98
<u>MVP Health Care, Inc. -Rochester (058)</u>				
Individual	058	1 0	27.13	217.35
Medicare	058	1 1	(18.73)	171.49
Family	058	4 0	100.54	532.60
1 Medicare	058	4 1	54.68	486.74
2 Medicares	058	4 2	8.82	440.88
<u>Independent Health - Western NY (059)</u>				
Individual	059	1 0	36.35	271.94
Medicare	059	1 1	(9.51)	226.08
Family	059	4 0	145.11	668.35
1 Medicare	059	4 1	99.25	622.49
2 Medicares	059	4 2	53.39	576.63
<u>MVP Health Care, Inc. - East Region (060)</u>				
Individual	060	1 0	23.62	236.25
Medicare	060	1 1	(22.24)	190.39
Family	060	4 0	109.45	579.59
1 Medicare	060	4 1	63.59	533.73
2 Medicares	060	4 2	17.73	487.87
<u>Capital District PHP - Capital (063)</u>				
Individual	063	1 0	23.65	236.50
Medicare	063	1 1	(22.21)	190.64
Family	063	4 0	109.60	580.31
1 Medicare	063	4 1	63.74	534.45
2 Medicares	063	4 2	17.88	488.59

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(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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*Medicare: 45.86

			Schedule IV Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier (ALESU & UUP Lifeguards)	
			<u>Benefit Programs:</u> A37, A51, A53, A65	
O C M P O E T V D			Employee	<u>Full Share</u> LWOP
<u>Blue Choice (066)</u>				
Individual	066	1 0	21.40	214.05
Medicare	066	1 1	(24.46)	168.19
Family	066	4 0	100.46	530.30
1 Medicare	066	4 1	54.60	484.44
2 Medicares	066	4 2	8.74	438.58
<u>Community Blue (067)</u>				
Individual	067	1 0	26.83	268.35
Medicare	067	1 1	(19.03)	222.49
Family	067	4 0	146.52	701.31
1 Medicare	067	4 1	100.66	655.45
2 Medicares	067	4 2	54.80	609.59
<u>HMO Blue - CNY (072)</u>				
Individual	072	1 0	75.87	305.65
Medicare	072	1 1	30.01	259.79
Family	072	4 0	239.15	744.83
1 Medicare	072	4 1	193.29	698.97
2 Medicares	072	4 2	147.43	653.11
<u>HMO Blue - Utica/Watertown (160)</u>				
Individual	160	1 0	87.65	314.79
Medicare	160	1 1	41.79	268.93
Family	160	4 0	297.05	801.07
1 Medicare	160	4 1	251.19	755.21
2 Medicares	160	4 2	205.33	709.35

* Medicare is income sensitive - this is the basic bi-weekly premium rate

(11/22/2012)

Institution Paycheck December 15, 2011 - Employees not subject to Lag Payroll

45.86

(11/22/2012)

January 1, 2012 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

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*Medicare: 45.86

				Schedule IV Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier (ALESU & UUP Lifeguards)	
				<u>Benefit Programs:</u> A37, A51, A53, A65	
	O P T	C O V	M E D	Employee	Full Share LWOP
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>					
Individual	320	1	0	103.28	368.29
Medicare	320	1	1	57.42	322.43
Family	320	4	0	350.34	946.73
1 Medicare	320	4	1	304.48	900.87
2 Medicares	320	4	2	258.62	855.01
<u>MVP Health Care, Inc. - Central Region (330)</u>					
Individual	330	1	0	41.65	264.18
Medicare	330	1	1	(4.21)	218.32
Family	330	4	0	155.61	649.63
1 Medicare	330	4	1	109.75	603.77
2 Medicares	330	4	2	63.89	557.91
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>					
Individual	340	1	0	46.37	269.08
Medicare	340	1	1	0.51	223.22
Family	340	4	0	167.09	661.49
1 Medicare	340	4	1	121.23	615.63
2 Medicares	340	4	2	75.37	569.77
<u>GHI HMO - HV & Ulster Regions (350)</u>					
Individual	350	1	0	132.91	382.26
Medicare	350	1	1	87.05	336.40
Family	350	4	0	444.92	1,002.00
1 Medicare	350	4	1	399.06	956.14
2 Medicares	350	4	2	353.20	910.28
<u>MVP HMO - North Region (360)</u>					
Individual	350	1	0	82.27	308.98
Medicare	350	1	1	36.41	263.12
Family	350	4	0	258.26	761.66
1 Medicare	350	4	1	212.40	715.80
2 Medicares	350	4	2	166.54	669.94

* Medicare is income sensitive - this is the basic bi-weekly premium rate

(11/22/2012)

**New York State Health Insurance Program
Dental and Vision Coverage (non-GSEU Enrollees)
Rates Effective January 1, 2012**

Dental Plan

	Full Share Rate	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share				
Individual	28.74		28.74	13.19
Family	74.25		74.25	34.08
COBRA				
Individual	28.74	0.57	29.31	
Family	74.25	1.49	75.74	

Vision Plan*

	Full Share Rate	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share				
Individual	3.00		3.00	1.38
Family	8.25		8.25	3.79
COBRA				
Individual	3.00	0.06	3.06	
Family	8.25	0.17	8.42	

* Excludes NYSCOPBA (A04, A48, C04 & C48), ALESU (A37 & C37) & Council-82 (A25, A50, C25 & C50)

Vision Plan with Laser Vision Benefit**

	Full Share Rate	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share				
Individual	20.41		20.41	9.37
Family	25.66		25.66	11.78
COBRA				
Individual	20.41	0.41	20.82	
Family	25.66	0.51	26.17	

** NYSCOPBA (A04, A48, C04 & C48), ALESU (A37 & C37) & Council-82 (A25, A50, C25 & C50)

(1) for LWOP rates.