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DEPARTMENT OF CIVIL SERVICE
ALBANY, NEW YORK 12239
www.cs.ny.gov

JERRY BOONE
COMMISSIONER

NY 12-41

TO: New York State Health Benefits Administrators

FROM: Employee Benefits Division

SUBJECT: 2013 New York State Health Insurance Program (NYSHIP) Rates for New York State enrollees

DATE: November 29, 2012

Attached are the 2013 NYSHIP premium rates and Medicare Part B reimbursement rates that become effective January 1, 2013. The NYSHIP rates are presented in five groupings:

- Schedule I – Ratified (CSEA, PEF, Council 82, APSU enrollees represented by PBANYS, NYSCOPBA and Unrepresented Enrollees)
- Schedule II – Non-Ratified Groups
- Schedule III – Non-Ratified Groups whose Agreements Expired on March 31, 2007 or earlier (UUP Lifeguards)
- Schedule IV – 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 4.4%. 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 4.6%. 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 16 of the 20 HMO option codes for individual coverage and 15 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, 2013 Premium Rate Change
NYS Health Insurance Program Biweekly Rates**

Administrative Paycheck December 19, 2012 - Employees exempt from Lag Payroll
 Administrative Paycheck January 2, 2013 - Employees subject to Lag Payroll
 Administrative Paycheck January 10, 2013 - Employees subject to Extra Lag Payroll
 Institution Paycheck December 27, 2012 - Employees subject to Lag Payroll
 Institution Paycheck December 13, 2012 - Employees not subject to Lag Payroll

***Medicare : 48.28**

Empire Plan

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule I Ratified (Settled Groups) Benefit Programs: A01, A02, A04, A05, A06, A07, A13, A14, A15, A17, A19 A20, A25, A28, A29, A33, A34, A35, A36, A37, A39, A41 A42, A43, A44, A46, A47, A48, A50, A51, A60, A61, A62, A64, L19		
O P T	C O V	M E D	Employee <SG-9	Employee SG-10+	<u>Full Share</u> LWOP
001	1	0	33.67	44.89	280.58
001	1	1	(14.61)	(3.39)	232.30
001	4	0	140.67	167.75	676.89
001	4	1	92.39	119.47	628.61
001	4	2	44.11	71.19	580.33

Empire Plan

Individual
 Medicare
 Family
 1 Medicare
 2 Medicares

			Schedule II Non-Ratified Group (Unsettled Groups) Benefit Program: A03, A09, A10, A11, A12, A40, A63		
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP	
001	1	0	28.47	284.66	
001	1	1	(19.81)	236.38	
001	4	0	128.96	686.61	
001	4	1	80.68	638.33	
001	4	2	32.40	590.05	

Medicare

1 Medicare

2 Medicares

			Schedule III Non-Ratified Groups with Agreements Expired on March 31, 2007 or earlier (UUP Lifeguards) Benefit Program: A53, A65		
O P T	C O V	M E D	Employee	<u>Full Share</u> LWOP	
001	1	0	29.44	294.42	
001	1	1	(18.84)	246.14	
001	4	0	132.57	706.94	
001	4	1	84.29	658.66	
001	4	2	36.01	610.38	

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				Schedule I Ratified		
				Benefit Programs: A01, A02, A04, A05, A06, A07, A13, A14, A15, A17, A19 A20, A25, A28, A29, A33, A34, A35, A36, A37, A39, A41 A42, A43, A44, A46, A47, A48, A50, A51, A60, A61, A62, A64, L19		
O P T C O V M E D				Employee <SG-9	Employee SG-10+	Full Share LWOP
<u>HIP (050)</u>						
Individual	050	1	0	72.70	83.67	314.04
Medicare	050	1	1	24.42	35.39	265.76
Family	050	4	0	216.42	243.85	758.23
1 Medicare	050	4	1	168.14	195.57	709.95
2 Medicares	050	4	2	119.86	147.29	661.67
<u>MVP Health Care, Inc. - Rochester (058)</u>						
Individual	058	1	0	27.80	37.07	231.66
Medicare	058	1	1	(20.48)	(11.21)	183.38
Family	058	4	0	118.44	141.14	567.36
1 Medicare	058	4	1	70.16	92.86	519.08
2 Medicares	058	4	2	21.88	44.58	470.80
<u>Independent Health - Western NY (059)</u>						
Individual	059	1	0	36.56	47.45	276.12
Medicare	059	1	1	(11.72)	(0.83)	227.84
Family	059	4	0	141.99	169.17	679.30
1 Medicare	059	4	1	93.71	120.89	631.02
2 Medicares	059	4	2	45.43	72.61	582.74
<u>MVP Health Care, Inc. - East Region (060)</u>						
Individual	060	1	0	30.27	40.36	252.26
Medicare	060	1	1	(18.01)	(7.92)	203.98
Family	060	4	0	129.32	154.09	619.13
1 Medicare	060	4	1	81.04	105.81	570.85
2 Medicares	060	4	2	32.76	57.53	522.57
<u>Capital District PHP - Capital (063)</u>						
Individual	063	1	0	30.76	41.01	256.34
Medicare	063	1	1	(17.52)	(7.27)	208.06
Family	063	4	0	131.43	156.60	629.21
1 Medicare	063	4	1	83.15	108.32	580.93
2 Medicares	063	4	2	34.87	60.04	532.65

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11/13/2012

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NYS Health Insurance Program Biweekly Rates

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				<u>Benefit Programs:</u>		
				A01, A02, A04, A05, A06, A07, A13, A14, A15, A17, A19 A20, A25, A28, A29, A33, A34, A35, A36, A37, A39, A41 A42, A43, A44, A46, A47, A48, A50, A51, A60, A61, A62, A64, 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	25.38	33.84	211.53
Medicare	066	1	1	(22.90)	(14.44)	163.25
Family	066	4	0	109.24	130.13	522.13
1 Medicare	066	4	1	60.96	81.85	473.85
2 Medicares	066	4	2	12.68	33.57	425.57
<u>BCBS WNY (067)</u>						
Individual	067	1	0	34.29	45.17	273.74
Medicare	067	1	1	(13.99)	(3.11)	225.46
Family	067	4	0	165.89	193.66	713.65
1 Medicare	067	4	1	117.61	145.38	665.37
2 Medicares	067	4	2	69.33	97.10	617.09
<u>HMO Blue - CNY (072)</u>						
Individual	072	1	0	115.35	126.34	357.16
Medicare	072	1	1	67.07	78.06	308.88
Family	072	4	0	329.46	356.77	869.25
1 Medicare	072	4	1	281.18	308.49	820.97
2 Medicares	072	4	2	232.90	260.21	772.69
<u>HMO Blue - Utica/Watertown (160)</u>						
Individual	160	1	0	123.04	133.84	360.73
Medicare	160	1	1	74.76	85.56	312.45
Family	160	4	0	382.19	409.30	917.58
1 Medicare	160	4	1	333.91	361.02	869.30
2 Medicares	160	4	2	285.63	312.74	821.02

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O P T	C O V	M E D		Employee <SG-9	Employee SG-10+	Full Share LWOP
<u>Aetna (210)</u>						
Individual	210	1	0	116.89	128.48	371.90
Medicare	210	1	1	68.61	80.20	323.62
Family	210	4	0	485.00	513.28	1,044.74
1 Medicare	210	4	1	436.72	465.00	996.46
2 Medicares	210	4	2	388.44	416.72	948.18
<u>GHI HMO Albany Region (220)</u>						
Individual	220	1	0	45.46	56.38	285.69
Medicare	220	1	1	(2.82)	8.10	237.41
Family	220	4	0	194.18	221.71	737.74
1 Medicare	220	4	1	145.90	173.43	689.46
2 Medicares	220	4	2	97.62	125.15	641.18
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>						
Individual	280	1	0	55.88	65.64	270.58
Medicare	280	1	1	7.60	17.36	222.30
Family	280	4	0	207.06	231.70	693.38
1 Medicare	280	4	1	158.78	183.42	645.10
2 Medicares	280	4	2	110.50	135.14	596.82
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>						
Individual	290	1	0	129.93	139.77	346.37
Medicare	290	1	1	81.65	91.49	298.09
Family	290	4	0	401.07	425.91	891.41
1 Medicare	290	4	1	352.79	377.63	843.13
2 Medicares	290	4	2	304.51	329.35	794.85
<u>Capital District PHP - Central (300)</u>						
Individual	300	1	0	61.97	72.61	295.95
Medicare	300	1	1	13.69	24.33	247.67
Family	300	4	0	200.63	227.34	728.07
1 Medicare	300	4	1	152.35	179.06	679.79
2 Medicares	300	4	2	104.07	130.78	631.51
<u>Capital District PHP - W. Hudson Valley (310)</u>						
Individual	310	1	0	56.85	67.35	287.68
Medicare	310	1	1	8.57	19.07	239.40
Family	310	4	0	187.04	213.40	707.41
1 Medicare	310	4	1	138.76	165.12	659.13
2 Medicares	310	4	2	90.48	116.84	610.85

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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	131.30	141.17	348.29
Medicare	320	1	1	83.02	92.89	300.01
Family	320	4	0	404.77	429.69	896.41
1 Medicare	320	4	1	356.49	381.41	848.13
2 Medicares	320	4	2	308.21	333.13	799.85
<u>MVP Health Care, Inc. - Central Region (330)</u>						
Individual	330	1	0	53.08	63.49	282.17
Medicare	330	1	1	4.80	15.21	233.89
Family	330	4	0	175.82	201.98	692.29
1 Medicare	330	4	1	127.54	153.70	644.01
2 Medicares	330	4	2	79.26	105.42	595.73
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>						
Individual	340	1	0	52.51	62.85	279.87
Medicare	340	1	1	4.23	14.57	231.59
Family	340	4	0	173.85	199.81	686.43
1 Medicare	340	4	1	125.57	151.53	638.15
2 Medicares	340	4	2	77.29	103.25	589.87
<u>GHI HMO - HV & Ulster Regions (350)</u>						
Individual	350	1	0	57.36	68.16	294.85
Medicare	350	1	1	9.08	19.88	246.57
Family	350	4	0	216.55	243.77	753.86
1 Medicare	350	4	1	168.27	195.49	705.58
2 Medicares	350	4	2	119.99	147.21	657.30
<u>MVP HMO - North Region (360)</u>						
Individual	350	1	0	98.80	109.42	332.47
Medicare	350	1	1	50.52	61.14	284.19
Family	350	4	0	292.61	319.29	819.36
1 Medicare	350	4	1	244.33	271.01	771.08
2 Medicares	350	4	2	196.05	222.73	722.80

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			Schedule II Non Ratified Group Benefit Programs: A03, A09, A10, A11, A12, A40, A63	
O P T	C O V	M E D	Employee	Full Share LWOP
<u>HIP (050)</u>				
Individual	050	1 0	65.07	314.04
Medicare	050	1 1	16.79	265.76
Family	050	4 0	197.70	758.23
1 Medicare	050	4 1	149.42	709.95
2 Medicares	050	4 2	101.14	661.67
<u>MVP Health Care, Inc. - Rochester (058)</u>				
Individual	058	1 0	23.17	231.66
Medicare	058	1 1	(25.11)	183.38
Family	058	4 0	107.09	567.36
1 Medicare	058	4 1	58.81	519.08
2 Medicares	058	4 2	10.53	470.80
<u>Independent Health - Western NY (059)</u>				
Individual	059	1 0	28.98	276.12
Medicare	059	1 1	(19.30)	227.84
Family	059	4 0	128.40	679.30
1 Medicare	059	4 1	80.12	631.02
2 Medicares	059	4 2	31.84	582.74
<u>MVP Health Care, Inc. - East Region (060)</u>				
Individual	060	1 0	25.23	252.26
Medicare	060	1 1	(23.05)	203.98
Family	060	4 0	116.95	619.13
1 Medicare	060	4 1	68.67	570.85
2 Medicares	060	4 2	20.39	522.57
<u>Capital District PHP - Capital (063)</u>				
Individual	063	1 0	25.63	256.34
Medicare	063	1 1	(22.65)	208.06
Family	063	4 0	118.85	629.21
1 Medicare	063	4 1	70.57	580.93
2 Medicares	063	4 2	22.29	532.65

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			Employee	Full Share LWOP
O P T	C O V	M E D		
Blue Choice (066)				
Individual	066	1 0	21.15	211.53
Medicare	066	1 1	(27.13)	163.25
Family	066	4 0	98.80	522.13
1 Medicare	066	4 1	50.52	473.85
2 Medicares	066	4 2	2.24	425.57
BCBS WNY (067)				
Individual	067	1 0	27.37	273.74
Medicare	067	1 1	(20.91)	225.46
Family	067	4 0	146.99	713.65
1 Medicare	067	4 1	98.71	665.37
2 Medicares	067	4 2	50.43	617.09
HMO Blue - CNY (072)				
Individual	072	1 0	107.71	357.16
Medicare	072	1 1	59.43	308.88
Family	072	4 0	310.80	869.25
1 Medicare	072	4 1	262.52	820.97
2 Medicares	072	4 2	214.24	772.69
HMO Blue - Utica/Watertown (160)				
Individual	160	1 0	115.49	360.73
Medicare	160	1 1	67.21	312.45
Family	160	4 0	363.63	917.58
1 Medicare	160	4 1	315.35	869.30
2 Medicares	160	4 2	267.07	821.02

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				Employee	Full Share LWOP
O P T	C O V	M E D			
<u>Aetna (210)</u>					
Individual	210	1	0	108.95	371.90
Medicare	210	1	1	60.67	323.62
Family	210	4	0	465.85	1,044.74
1 Medicare	210	4	1	417.57	996.46
2 Medicares	210	4	2	369.29	948.18
<u>GHI HMO Albany Region (220)</u>					
Individual	220	1	0	37.86	285.69
Medicare	220	1	1	(10.42)	237.41
Family	220	4	0	175.41	737.74
1 Medicare	220	4	1	127.13	689.46
2 Medicares	220	4	2	78.85	641.18
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>					
Individual	280	1	0	48.86	270.58
Medicare	280	1	1	0.58	222.30
Family	280	4	0	189.74	693.38
1 Medicare	280	4	1	141.46	645.10
2 Medicares	280	4	2	93.18	596.82
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>					
Individual	290	1	0	122.87	346.37
Medicare	290	1	1	74.59	298.09
Family	290	4	0	383.65	891.41
1 Medicare	290	4	1	335.37	843.13
2 Medicares	290	4	2	287.09	794.85
<u>Capital District PHP - Central (300)</u>					
Individual	300	1	0	54.51	295.95
Medicare	300	1	1	6.23	247.67
Family	300	4	0	182.27	728.07
1 Medicare	300	4	1	133.99	679.79
2 Medicares	300	4	2	85.71	631.51
<u>Capital District PHP - W. Hudson Valley (310)</u>					
Individual	310	1	0	49.46	287.68
Medicare	310	1	1	1.18	239.40
Family	310	4	0	168.86	707.41
1 Medicare	310	4	1	120.58	659.13
2 Medicares	310	4	2	72.30	610.85

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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	124.23	348.29
Medicare	320	1 1	75.95	300.01
Family	320	4 0	387.32	896.41
1 Medicare	320	4 1	339.04	848.13
2 Medicares	320	4 2	290.76	799.85
<u>MVP Health Care, Inc. - Central Region (330)</u>				
Individual	330	1 0	45.73	282.17
Medicare	330	1 1	(2.55)	233.89
Family	330	4 0	157.74	692.29
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Individual	340	1 0	45.20	279.87
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<u>GHI HMO - HV & Ulster Regions (350)</u>				
Individual	350	1 0	49.82	294.85
Medicare	350	1 1	1.54	246.57
Family	350	4 0	197.93	753.86
1 Medicare	350	4 1	149.65	705.58
2 Medicares	350	4 2	101.37	657.30
<u>MVP HMO - North Region (360)</u>				
Individual	350	1 0	91.35	332.47
Medicare	350	1 1	43.07	284.19
Family	350	4 0	274.27	819.36
1 Medicare	350	4 1	225.99	771.08
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O C M P O E T V D			Employee	Full Share LWOP
<u>HIP (050)</u>				
Individual	050	1 0	63.86	314.04
Medicare	050	1 1	15.58	265.76
Family	050	4 0	195.36	758.23
1 Medicare	050	4 1	147.08	709.95
2 Medicares	050	4 2	98.80	661.67
<u>MVP Health Care, Inc. -Rochester (058)</u>				
Individual	058	1 0	23.17	231.66
Medicare	058	1 1	(25.11)	183.38
Family	058	4 0	107.09	567.36
1 Medicare	058	4 1	58.81	519.08
2 Medicares	058	4 2	10.53	470.80
<u>Independent Health - Western NY (059)</u>				
Individual	059	1 0	27.77	276.12
Medicare	059	1 1	(20.51)	227.84
Family	059	4 0	128.40	679.30
1 Medicare	059	4 1	80.12	631.02
2 Medicares	059	4 2	31.84	582.74
<u>MVP Health Care, Inc. - East Region (060)</u>				
Individual	060	1 0	25.23	252.26
Medicare	060	1 1	(23.05)	203.98
Family	060	4 0	116.95	619.13
1 Medicare	060	4 1	68.67	570.85
2 Medicares	060	4 2	20.39	522.57
<u>Capital District PHP - Capital (063)</u>				
Individual	063	1 0	25.63	256.34
Medicare	063	1 1	(22.65)	208.06
Family	063	4 0	118.85	629.21
1 Medicare	063	4 1	70.57	580.93
2 Medicares	063	4 2	22.29	532.65

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11/13/2012

January 1, 2013 Premium Rate Change
NYS Health Insurance Program Biweekly Rates

Administrative Paycheck June 20, 2012 - Employees exempt from Lag Payroll
Administrative Paycheck July 3, 2012 - Employees subject to Lag Payroll
Administrative Paycheck July 12, 2012 - Employees subject to Extra Lag Payroll
Institution Paycheck June 14, 2012 - Employees exempt from Lag Payroll
Institution Paycheck June 28, 2012 - Employees subject to Lag Payroll

*Medicare: 48.28

			Schedule III Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier UUP Lifeguards	
			<u>Benefit Programs:</u> 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	21.15	211.53
Medicare	066	1 1	(27.13)	163.25
Family	066	4 0	98.80	522.13
1 Medicare	066	4 1	50.52	473.85
2 Medicares	066	4 2	2.24	425.57
<u>BCBS WNY (067)</u>				
Individual	067	1 0	27.37	273.74
Medicare	067	1 1	(20.91)	225.46
Family	067	4 0	144.65	713.65
1 Medicare	067	4 1	96.37	665.37
2 Medicares	067	4 2	48.09	617.09
<u>HMO Blue - CNY (072)</u>				
Individual	072	1 0	106.50	357.16
Medicare	072	1 1	58.22	308.88
Family	072	4 0	308.46	869.25
1 Medicare	072	4 1	260.18	820.97
2 Medicares	072	4 2	211.90	772.69
<u>HMO Blue - Utica/Watertown (160)</u>				
Individual	160	1 0	114.28	360.73
Medicare	160	1 1	66.00	312.45
Family	160	4 0	361.29	917.58
1 Medicare	160	4 1	313.01	869.30
2 Medicares	160	4 2	264.73	821.02

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			Schedule III Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier UUP Lifeguards	
			<u>Benefit Programs:</u> A53, A65	
			Employee	<u>Full Share</u> LWOP
<u>Aetna (210)</u>				
Individual	210	1 0	107.74	371.90
Medicare	210	1 1	59.46	323.62
Family	210	4 0	463.51	1,044.74
1 Medicare	210	4 1	415.23	996.46
2 Medicares	210	4 2	366.95	948.18
<u>GHI HMO Albany Region (220)</u>				
Individual	220	1 0	36.65	285.69
Medicare	220	1 1	(11.63)	237.41
Family	220	4 0	173.07	737.74
1 Medicare	220	4 1	124.79	689.46
2 Medicares	220	4 2	76.51	641.18
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>				
Individual	280	1 0	47.65	270.58
Medicare	280	1 1	(0.63)	222.30
Family	280	4 0	187.40	693.38
1 Medicare	280	4 1	139.12	645.10
2 Medicares	280	4 2	90.84	596.82
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>				
Individual	290	1 0	121.66	346.37
Medicare	290	1 1	73.38	298.09
Family	290	4 0	381.31	891.41
1 Medicare	290	4 1	333.03	843.13
2 Medicares	290	4 2	284.75	794.85
<u>Capital District PHP - Central (300)</u>				
Individual	300	1 0	53.30	295.95
Medicare	300	1 1	5.02	247.67
Family	300	4 0	179.93	728.07
1 Medicare	300	4 1	131.65	679.79
2 Medicares	300	4 2	83.37	631.51
<u>Capital District PHP - W. Hudson Valley (310)</u>				
Individual	310	1 0	48.25	287.68
Medicare	310	1 1	(0.03)	239.40
Family	310	4 0	166.52	707.41
1 Medicare	310	4 1	118.24	659.13
2 Medicares	310	4 2	69.96	610.85

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			Schedule III Non Ratified Groups with Agreements Expired on March 31, 2007 or earlier UUP Lifeguards	
			<u>Benefit Programs:</u> 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	123.02	348.29
Medicare	320	1 1	74.74	300.01
Family	320	4 0	384.98	896.41
1 Medicare	320	4 1	336.70	848.13
2 Medicares	320	4 2	288.42	799.85
<u>MVP Health Care, Inc. - Central Region (330)</u>				
Individual	330	1 0	44.52	282.17
Medicare	330	1 1	(3.76)	233.89
Family	330	4 0	155.40	692.29
1 Medicare	330	4 1	107.12	644.01
2 Medicares	330	4 2	58.84	595.73
<u>MVP Health Care, Inc. - Mid-Hudson (340)</u>				
Individual	340	1 0	43.99	279.87
Medicare	340	1 1	(4.29)	231.59
Family	340	4 0	153.52	686.43
1 Medicare	340	4 1	105.24	638.15
2 Medicares	340	4 2	56.96	589.87
<u>GHI HMO - HV & Ulster Regions (350)</u>				
Individual	350	1 0	48.61	294.85
Medicare	350	1 1	0.33	246.57
Family	350	4 0	195.59	753.86
1 Medicare	350	4 1	147.31	705.58
2 Medicares	350	4 2	99.03	657.30
<u>MVP HMO - North Region (360)</u>				
Individual	350	1 0	90.14	332.47
Medicare	350	1 1	41.86	284.19
Family	350	4 0	271.93	819.36
1 Medicare	350	4 1	223.65	771.08
2 Medicares	350	4 2	175.37	722.80

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

11/13/2012

**New York State Health Insurance Program
Dental and Vision Coverage (non-GSEU Enrollees)
Rates Effective January 1, 2013**

Dental Plan (Preferred Plan)

	Full Share Rate	COBRA 48%	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share					
Individual	28.13			28.13	12.91
Family	73.69			73.69	33.82
COBRA					
Individual	28.13		0.56	28.69	
Family	73.69		1.47	75.16	
COBRA with Disability					
Individual	28.13	13.50	0.56	42.19	
Family	73.69	35.37	1.47	110.53	

Vision Plan*

	Full Share Rate	COBRA 48%	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share					
Individual	3.20			3.20	1.47
Family	8.32			8.32	3.82
COBRA					
Individual	3.20		0.06	3.26	
Family	8.32		0.17	8.49	
COBRA with Disability					
Individual	3.20	1.54	0.06	4.80	
Family	8.32	3.99	0.17	12.48	

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

Vision Plan with Laser Vision Benefit**

	Gross Rate	COBRA 48%	2% Admin Charge	Monthly Enrollee Cost	Biweekly Enrollee Cost(1)
Full Share					
Individual	17.46			17.46	8.01
Family	22.58			22.58	10.36
COBRA					
Individual	17.46		0.35	17.81	
Family	22.58		0.45	23.03	
COBRA with Disability					
Individual	17.46	8.38	0.35	26.19	
Family	22.58	10.84	0.45	33.87	

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

(1) for LWOP rates.