

NYS Health Insurance Program
 Participating Employers Monthly Rates - **WITHOUT Drug Coverage**
 Rates Effective January 1, 2018
Low Income Subsidy
Benefit Program G51, G54, G57, G58, G59, G61, G65, G69, G71, G74, G75
 90% / 75% Employer Contribution Rate Formula
WITH CAPPING

| | O P T | C O V | Employee Share | Employer Share | Full Share LWOP |
|--|----------------------|----------------------|-------------------|-------------------|--------------------|
| <u>Empire Plan</u> | | | | | |
| Individual | 001 | 1 | 58.46 | 526.10 | 584.56 |
| Family | 001 | 4 | 294.78 | 1,235.05 | 1,529.83 |
| <u>HIP - Downstate (050)</u> | | | | | |
| Individual | 050 | 1 | 165.48 | 526.10 | 691.58 |
| Family | 050 | 4 | 427.77 | 1,235.05 | 1,662.82 |
| <u>MVP Health Care Roch. (058)</u> | | | | | |
| Individual | 058 | 1 | 53.90 | 485.10 | 539.00 |
| Family | 058 | 4 | 228.84 | 1,009.91 | 1,238.75 |
| <u>Independent Health (059)</u> | | | | | |
| Individual | 059 | 1 | 54.12 | 487.08 | 541.20 |
| Family | 059 | 4 | 249.03 | 1,071.83 | 1,320.86 |
| <u>MVP Health Care - East Region (060)</u> | | | | | |
| Individual | 060 | 1 | 62.70 | 526.10 | 588.80 |
| Family | 060 | 4 | 250.63 | 1,105.16 | 1,355.79 |
| <u>Capital District PHP - Capital (063)</u> | | | | | |
| Individual | 063 | 1 | 56.83 | 511.49 | 568.32 |
| Family | 063 | 4 | 261.60 | 1,125.79 | 1,387.39 |
| <u>Blue Choice (066)</u> | | | | | |
| Individual | 066 | 1 | 57.48 | 517.29 | 574.77 |
| Family | 066 | 4 | 268.47 | 1,150.25 | 1,418.72 |
| <u>BlueCross BlueShield of Western NY (067)</u> | | | | | |
| Individual | 067 | 1 | 50.91 | 458.15 | 509.06 |
| Family | 067 | 4 | 229.46 | 993.80 | 1,223.26 |
| <u>HMO Blue - CNY (072)</u> | | | | | |
| Individual | 072 | 1 | 54.17 | 487.56 | 541.73 |
| Family | 072 | 4 | 246.74 | 1,065.29 | 1,312.03 |
| <u>HMO Blue - Utica (160)</u> | | | | | |
| Individual | 160 | 1 | 236.84 | 526.10 | 762.94 |
| Family | 160 | 4 | 709.03 | 1,235.05 | 1,944.08 |
| <u>HIP - Capital (220)</u> | | | | | |
| Individual | 220 | 1 | 220.68 | 526.10 | 746.78 |
| Family | 220 | 4 | 562.99 | 1,235.05 | 1,798.04 |
| <u>Empire BlueCross BlueShield HMO - Upstate (280)</u> | | | | | |
| Individual | 280 | 1 | 211.77 | 526.10 | 737.87 |
| Family | 280 | 4 | 655.43 | 1,235.05 | 1,890.48 |
| <u>Empire BlueCross BlueShield HMO - Downstate (290)</u> | | | | | |
| Individual | 290 | 1 | 537.50 | 526.10 | 1,063.60 |
| Family | 290 | 4 | 1,506.58 | 1,235.05 | 2,741.63 |
| <u>Capital District PHP - Central (300)</u> | | | | | |
| Individual | 300 | 1 | 151.26 | 526.10 | 677.36 |
| Family | 300 | 4 | 433.48 | 1,235.05 | 1,668.53 |
| <u>Capital District PHP - W. Hudson Valley (310)</u> | | | | | |
| Individual | 310 | 1 | 269.06 | 526.10 | 795.16 |
| Family | 310 | 4 | 719.45 | 1,235.05 | 1,954.50 |
| <u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u> | | | | | |
| Individual | 320 | 1 | 536.15 | 526.10 | 1,062.25 |
| Family | 320 | 4 | 1,503.05 | 1,235.05 | 2,738.10 |
| <u>MVP Health Care - Central Region (330)</u> | | | | | |
| Individual | 330 | 1 | 155.27 | 526.10 | 681.37 |
| Family | 330 | 4 | 338.30 | 1,235.05 | 1,573.35 |
| <u>MVP Health Care - Mid Hudson (340)</u> | | | | | |
| Individual | 340 | 1 | 163.12 | 526.10 | 689.22 |
| Family | 340 | 4 | 356.76 | 1,235.05 | 1,591.81 |
| <u>HIP - Hudson Valley (350)</u> | | | | | |
| Individual | 350 | 1 | 220.68 | 526.10 | 746.78 |
| Family | 350 | 4 | 562.99 | 1,235.05 | 1,798.04 |
| <u>MVP Health Care -North Regions (360)</u> | | | | | |
| Individual | 360 | 1 | 277.22 | 526.10 | 803.32 |
| Family | 360 | 4 | 624.88 | 1,235.05 | 1,859.93 |