

**NYS Health Insurance Program**  
 Participating Employers Monthly Rates - **WITH Drug Coverage**  
 Rates Effective January 1, 2018  
**Benefit Program G05**  
**AMENDED DEPENDENT SURVIVORS**  
 Between 4/1/75 & 3/31/79 & Some Thruway Survivors

	<b>O P T</b>	<b>C O V</b>	Employee Share	Employer Share	Full Share LWOP
<b><u>Empire Plan</u></b>					
Individual	001	1	292.52	485.99	778.51
Family	001	4	292.52	1,656.09	1,948.61
<b><u>HIP - Downstate (050)</u></b>					
Individual	050	1	310.89	568.47	879.36
Family	050	4	310.89	1,812.03	2,122.92
<b><u>MVP Health Care Roch. (058)</u></b>					
Individual	058	1	226.85	465.91	692.76
Family	058	4	226.85	1,373.30	1,600.15
<b><u>Independent Health (059)</u></b>					
Individual	059	1	243.60	427.19	670.79
Family	059	4	243.60	1,401.59	1,645.19
<b><u>MVP Health Care - East Region (060)</u></b>					
Individual	060	1	235.81	484.34	720.15
Family	060	4	235.81	1,427.58	1,663.39
<b><u>Capital District PHP - Capital (063)</u></b>					
Individual	063	1	253.38	444.56	697.94
Family	063	4	253.38	1,458.09	1,711.47
<b><u>Blue Choice (066)</u></b>					
Individual	066	1	250.24	427.31	677.55
Family	066	4	250.24	1,428.26	1,678.50
<b><u>BlueCross BlueShield of Western NY (067)</u></b>					
Individual	067	1	263.53	451.63	715.16
Family	067	4	263.53	1,505.75	1,769.28
<b><u>HMO Blue - CNY (072)</u></b>					
Individual	072	1	228.21	416.77	644.98
Family	072	4	228.21	1,329.60	1,557.81
<b><u>HMO Blue - Utica (160)</u></b>					
Individual	160	1	344.87	551.15	896.02
Family	160	4	344.87	1,930.62	2,275.49
<b><u>HIP - Capital (220)</u></b>					
Individual	220	1	337.25	614.86	952.11
Family	220	4	337.25	1,963.87	2,301.12
<b><u>Empire BlueCross BlueShield HMO - Upstate (280)</u></b>					
Individual	280	1	366.16	566.71	932.87
Family	280	4	366.16	2,031.37	2,397.53
<b><u>Empire BlueCross BlueShield HMO - Downstate (290)</u></b>					
Individual	290	1	505.73	773.42	1,279.15
Family	290	4	505.73	2,796.36	3,302.09
<b><u>Capital District PHP - Central (300)</u></b>					
Individual	300	1	297.10	511.70	808.80
Family	300	4	297.10	1,700.09	1,997.19
<b><u>Capital District PHP - W. Hudson Valley (310)</u></b>					
Individual	310	1	338.11	585.76	923.87
Family	310	4	338.11	1,938.19	2,276.30
<b><u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u></b>					
Individual	320	1	500.97	766.23	1,267.20
Family	320	4	500.97	2,770.10	3,271.07
<b><u>MVP Health Care - Central Region (330)</u></b>					
Individual	330	1	273.95	555.58	829.53
Family	330	4	273.95	1,651.37	1,925.32
<b><u>MVP Health Care - Mid Hudson (340)</u></b>					
Individual	340	1	266.09	545.32	811.41
Family	340	4	266.09	1,609.67	1,875.76
<b><u>HIP - Hudson Valley (350)</u></b>					
Individual	350	1	337.25	614.86	952.11
Family	350	4	337.25	1,963.87	2,301.12
<b><u>MVP Health Care -North Regions (360)</u></b>					
Individual	360	1	322.86	654.38	977.24
Family	360	4	322.86	1,945.81	2,268.67