

NYS Health Insurance Program
Participating Employers Monthly Rates - WITHOUT Drug Coverage
Rates Effective January 1, 2019
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	61.19	550.69	611.88
Family	001	4	307.09	1,288.39	1,595.48
<u>HIP - Downstate (050)</u>					
Individual	050	1	188.08	550.69	738.77
Family	050	4	485.38	1,288.39	1,773.77
<u>MVP Health Care Roch. (058)</u>					
Individual	058	1	55.59	500.30	555.89
Family	058	4	235.21	1,039.16	1,274.37
<u>Independent Health (059)</u>					
Individual	059	1	54.64	491.75	546.39
Family	059	4	250.27	1,078.65	1,328.92
<u>MVP Health Care - East Region (060)</u>					
Individual	060	1	59.58	536.26	595.84
Family	060	4	252.69	1,115.58	1,368.27
<u>Capital District PHP - Capital (063)</u>					
Individual	063	1	60.03	540.30	600.33
Family	063	4	275.56	1,186.91	1,462.47
<u>Blue Choice (066)</u>					
Individual	066	1	56.59	509.34	565.93
Family	066	4	262.94	1,128.40	1,391.34
<u>BlueCross BlueShield of Western NY (067)</u>					
Individual	067	1	49.73	447.60	497.33
Family	067	4	222.54	966.03	1,188.57
<u>HMO Blue - CNY (072)</u>					
Individual	072	1	69.41	550.69	620.10
Family	072	4	282.42	1,219.33	1,501.75
<u>HMO Blue - Utica (160)</u>					
Individual	160	1	217.27	550.69	767.96
Family	160	4	663.25	1,288.39	1,951.64
<u>HIP - Capital (220)</u>					
Individual	220	1	261.07	550.69	811.76
Family	220	4	664.23	1,288.39	1,952.62
<u>Empire BlueCross BlueShield HMO - Upstate (280)</u>					
Individual	280	1	158.08	550.69	708.77
Family	280	4	520.51	1,288.39	1,808.90
<u>Empire BlueCross BlueShield HMO - Downstate (290)</u>					
Individual	290	1	458.53	550.69	1,009.22
Family	290	4	1,305.62	1,288.39	2,594.01
<u>Capital District PHP - Central (300)</u>					
Individual	300	1	168.23	550.69	718.92
Family	300	4	450.35	1,288.39	1,738.74
<u>Capital District PHP - W. Hudson Valley (310)</u>					
Individual	310	1	253.22	550.69	803.91
Family	310	4	683.05	1,288.39	1,971.44
<u>Empire BlueCross BlueShield HMO - Mid-Hudson (320)</u>					
Individual	320	1	502.62	550.69	1,053.31
Family	320	4	1,420.78	1,288.39	2,709.17
<u>MVP Health Care - Central Region (330)</u>					
Individual	330	1	133.24	550.69	683.93
Family	330	4	291.22	1,284.03	1,575.25
<u>MVP Health Care - Mid Hudson (340)</u>					
Individual	340	1	149.24	550.69	699.93
Family	340	4	324.48	1,288.39	1,612.87
<u>HIP - Hudson Valley (350)</u>					
Individual	350	1	261.07	550.69	811.76
Family	350	4	664.23	1,288.39	1,952.62
<u>MVP Health Care -North Regions (360)</u>					
Individual	360	1	273.78	550.69	824.47
Family	360	4	617.14	1,288.39	1,905.53