

**New York State Health Insurance Program
Graduate Student Employee Union Rates
Rates Effective January 1, 2020**

Exhibit 1

Schedule I - Monthly Rates

Benefit Program A27, A52 - For Informational Purposes Only; using 88/73 Employer Contribution Rate

	Blue Cross	UHC	Beacon MHSA	CVS Drug	Admin	GROSS RATES	INTEREST		CONTRIBUTIONS		
							REG	Spec	Net Rate	12/27 EE	88/73 ER
							Individual	98.38	86.27	60.39	56.45
Family	545.74	317.72	110.11	132.84	0.08	1106.49		1106.49	253.52	852.97	

	Davis Vision Vision					GROSS RATES	INTEREST		CONTRIBUTIONS		
							REG	Spec	Net Rate	12/27 EE	88/73 ER
							Individual	1.92			
Family	3.97					3.97		3.97	0.78	3.19	

	EmblemHealth Dental					GROSS RATES	INTEREST		CONTRIBUTIONS		
							REG	Spec	Net Rate	12/27 EE	88/73 ER
							Individual	2.57			
Family	7.42					7.42		7.42	1.62	5.80	

	CONTRIBUTIONS		
	Net Rate	12/27 EE	88/73 ER
Individual	306.01	36.72	269.29
Family	1117.88	255.92	861.96

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Schedule II - COBRA Rates

Benefit Program C27, C52

	Blue Cross	UHC	Beacon MHSA	CVS Drug	Admin	GROSS RATES	INTEREST		CONTRIBUTIONS		
							REG	Spec	Net Rate	EE	ER
Individual	98.38	86.27	60.39	56.45	0.03	301.52	0.00	0.00	301.52	301.52	0.00
Family	545.74	317.72	110.11	132.84	0.08	1106.49	0.00	0.00	1106.49	1106.49	0.00

	Davis Vision Vision					GROSS RATES			CONTRIBUTIONS		
									Net Rate	EE	ER
Individual	1.92					1.92			1.92	1.92	0.00
Family	3.97					3.97			3.97	3.97	0.00

	EmblemHealth Dental					GROSS RATES			CONTRIBUTIONS		
									Net Rate	EE	ER
Individual	2.57					2.57			2.57	2.57	0.00
Family	7.42					7.42			7.42	7.42	0.00

	CONTRIBUTIONS		
	Net Rate	EE	ER
Ind	306.01	306.01	0.00
Family	1117.88	1117.88	0.00

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Exhibit 1

Schedule III - Biweekly Rates

Benefit Program A27, A52

Lag Admin Inst
 12/24/2019 1/2/2020

	Blue		Beacon	CVS		GROSS	INTEREST		Net	12/27	88/73
	Cross	UHC	MHSA	Drug	Admin	RATES	REG	Spec	Rate	EE	ER
Individual	45.16	39.60	27.72	25.91	0.01	138.40	0.00	0.00	138.40	16.61	121.79
Family	250.50	145.84	50.54	60.98	0.04	507.90	0.00	0.00	507.90	116.37	391.53

							CONTRIBUTIONS				
	Davis Vision					GROSS			Net	12/27	88/73
	Vision					RATES			Rate	EE	ER
Individual	0.88					0.88			0.88	0.11	0.77
Family	1.82					1.82			1.82	0.36	1.46

							CONTRIBUTIONS				
	EmblemHealth					GROSS			Net	12/27	88/73
	Dental					RATES			Rate	EE	ER
Individual	1.02					1.02			1.02	0.12	0.90
Family	2.94					2.94			2.94	0.64	2.30

CONTRIBUTIONS			
	Net	12/27	88/73
	Rate	EE	ER
Ind	140.30	16.84	123.46
Family	512.66	117.37	395.29