Participating Employers Monthly Rates - **WITH Drug Coverage**

Rates Effective January 1, 2011

Benefit Program G05

AMENDED DEPENDENT SURVIVORS

Between 4/1/75 & 3/31/79 & Some Thruway Survivors

*Medicare: 96.40

	OPT	COV	MED	Employee Share	Employer Share	Full Share LWOP
Empire Plan						
Individual	001	1	0	186.75	375.08	561.83
Medicare	001	1	1	90.35	471.48	465.43
Family	001	4	0	186.75	1,122.09	1,308.84
1 Medicare	001	4	1	90.35	1,218.49	1,212.44
2 Medicares	001	4	2	(6.05)	1,314.89	1,116.04
HIP (050)						
Individual	050	1	0	213.70	375.75	589.45
Medicare	050	1	1	117.30	472.15	493.05
Family	050	4	0	213.70	1,230.57	1,444.27
1 Medicare	050	4	1	117.30	1,326.97	1,347.87
2 Medicares	050	4	2	20.90	1,423.37	1,251.47
MVP Health Care Rochester (058)						
Individual	058	1	0	163.06	271.64	434.70
Medicare	058	1	1	66.66	368.04	338.30
Family	058	4	0	163.06	923.89	1,086.95
1 Medicare	058	4	1	66.66	1,020.29	990.55
2 Medicares	058	4	2	(29.74)	1,116.69	894.15
Independent Health (059)						
Individual	059	1	0	192.08	317.76	509.84
Medicare	059	1	1	95.68	414.16	413.44
Family	059	4	0	192.08	1,086.10	1,278.18
1 Medicare	059	4	1	95.68	1,182.50	1,181.78
2 Medicares	059	4	2	(0.72)	1,278.90	1,085.38
MVP Health Care - East Region (060)						
Individual	060	1	0	171.56	286.07	457.63
Medicare	060	1	1	75.16	382.47	361.23
Family	060	4	0	171.56	972.30	1,143.86
1 Medicare	060	4	1	75.16	1,068.70	1,047.46
2 Medicares	060	4	2	(21.24)	1,165.10	951.06
Capital District PHP - Capital (063)						
Individual	063	1	0	192.54	320.97	513.51
Medicare	063	1	1	96.14	417.37	417.11
Family	063	4	0	192.54	1,091.15	1,283.69
1 Medicare	063	4	1	96.14	1,187.55	1,187.29
2 Medicares	063	4	2	(0.26)	1,283.95	1,090.89

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*Medicare: 96.40

	OPT	COV	MED	Employee Share	Employer Share	Full Share LWOP
Blue Choice (066)						
Individual	066	1	0	156.46	282.86	439.32
Medicare	066	1	1	60.06	379.26	342.92
Family	066	4	0	156.46	908.70	1,065.16
1 Medicare	066	4	1	60.06	1,005.10	968.76
2 Medicares	066	4	2	(36.34)	1,101.50	872.36
Community Blue (067)						
Individual	067	1	0	235.97	291.86	527.83
Medicare	067	1	1	139.57	388.26	431.43
Family	067	4	0	235.97	1,235.73	1,471.70
1 Medicare	067	4	1	139.57	1,332.13	1,375.30
2 Medicares	067	4	2	43.17	1,428.53	1,278.90
HMO Blue - Central New York Region (072)						
Individual	072	1	0	236.72	410.96	647.68
Medicare	072	1	1	140.32	507.36	551.28
Family	072	4	0	236.72	1,357.84	1,594.56
1 Medicare	072	4	1	140.32	1,454.24	1,498.16
2 Medicares	072	4	2	43.92	1,550.64	1,401.76
HMO Blue - Utica (160)						
Individual	160	1	0	234.05	359.23	593.28
Medicare	160	1	1	137.65	455.63	496.88
Family	160	4	0	234.05	1,295.42	1,529.47
1 Medicare	160	4	1	137.65	1,391.82	1,433.07
2 Medicares	160	4	2	41.25	1,488.22	1,336.67
Aetna (210)						
Individual	210	1	0	331.55	378.54	710.09
Medicare	210	1	1	235.15	474.94	613.69
Family	210	4	0	331.55	1,704.73	2,036.28
1 Medicare	210	4	1	235.15	1,801.13	1,939.88
2 Medicares	210	4	2	138.75	1,897.53	1,843.48
GHI HMO (220)						
Individual	220	1	0	301.29	438.22	739.51
Medicare	220	1	1	204.89	534.62	643.11
Family	220	4	0	301.29	1,643.40	1,944.69
1 Medicare	220	4	1	204.89	1,739.80	1,848.29
2 Medicares	220	4	2	108.49	1,836.20	1,751.89

NYS Health Insurance Program
Participating Employers Monthly Rates - **WITH Drug Coverage**
Rates Effective January 1, 2011

Benefit Program G05
AMENDED DEPENDENT SURVIVORS
Between 4/1/75 & 3/31/79 & Some Thruway Survivors

*Medicare: 96.40

	OPT	COV	MED	Employee Share	Employer Share	Full Share LWOP
Empire BlueCross BlueShield HMO - Upstate (280)						
Individual	280	1	0	267.45	396.93	664.38
Medicare	280	1	1	171.05	493.33	567.98
Family	280	4	0	267.45	1,466.73	1,734.18
1 Medicare	280	4	1	171.05	1,563.13	1,637.78
2 Medicares	280	4	2	74.65	1,659.53	1,541.38
Empire BlueCross BlueShield HMO - Downstate (290)						
Individual	290	1	0	309.39	459.00	768.39
Medicare	290	1	1	212.99	555.40	671.99
Family	290	4	0	309.39	1,696.58	2,005.97
1 Medicare	290	4	1	212.99	1,792.98	1,909.57
2 Medicares	290	4	2	116.59	1,889.38	1,813.17
Capital District PHP - Central (300)						
Individual	300	1	0	223.96	373.33	597.29
Medicare	300	1	1	127.56	469.73	500.89
Family	300	4	0	223.96	1,269.17	1,493.13
1 Medicare	300	4	1	127.56	1,365.57	1,396.73
2 Medicares	300	4	2	31.16	1,461.97	1,300.33
Capital District PHP - W. Hudson Valley (310)						
Individual	310	1	0	231.41	385.86	617.27
Medicare	310	1	1	135.01	482.26	520.87
Family	310	4	0	231.41	1,311.49	1,542.90
1 Medicare	310	4	1	135.01	1,407.89	1,446.50
2 Medicares	310	4	2	38.61	1,504.29	1,350.10
Empire BlueCross BlueShield HMO - Mid-Hudson (320)						
Individual	320	1	0	310.31	460.39	770.70
Medicare	320	1	1	213.91	556.79	674.30
Family	320	4	0	310.31	1,701.63	2,011.94
1 Medicare	320	4	1	213.91	1,798.03	1,915.54
2 Medicares	320	4	2	117.51	1,894.43	1,819.14
MVP Health Care - Central Region (330)						
Individual	330	1	0	197.71	329.39	527.10
Medicare	330	1	1	101.31	425.79	430.70
Family	330	4	0	197.71	1,120.23	1,317.94
1 Medicare	330	4	1	101.31	1,216.63	1,221.54
2 Medicares	330	4	2	4.91	1,313.03	1,125.14
MVP Health Care - Mid Hudson (340)						
Individual	340	1	0	193.17	321.80	514.97
Medicare	340	1	1	96.77	418.20	418.57
Family	340	4	0	193.17	1,094.50	1,287.67
1 Medicare	340	4	1	96.77	1,190.90	1,191.27
2 Medicares	340	4	2	0.37	1,287.30	1,094.87
GHI HMO - HV & Ulster Regions (350)						
Individual	350	1	0	327.84	473.51	801.35
Medicare	350	1	1	231.44	569.91	704.95
Family	350	4	0	327.84	1,784.86	2,112.70
1 Medicare	350	4	1	231.44	1,881.26	2,016.30
2 Medicares	350	4	2	135.04	1,977.66	1,919.90
MVP Health Care -North Regions (360)						
Individual	360	1	0	231.00	384.83	615.83
Medicare	360	1	1	134.60	481.23	519.43
Family	360	4	0	231.00	1,308.83	1,539.83
1 Medicare	360	4	1	134.60	1,405.23	1,443.43
2 Medicares	360	4	2	38.20	1,501.63	1,347.03