

## 2020 - 2021 NYCDs Plan Choices with Rates

		<b>Current Plans</b>				
Plan		<b>Option 1</b>	<b>Option 2</b>	<b>Option 3</b>	<b>Option 4</b>	<b>Option 5</b>
		<b>Platinum PPO 5/15</b>	<b>Gold EPO \$50</b>	<b>Gold EPO 30/60</b>	<b>Silver EPO HSA \$2000</b>	<b>Bronze EPO HSA \$5500</b>
<b>Network</b>		Freedom	Freedom	Liberty	Freedom	Freedom
<b>Gatekeeper</b>		Non-Gated	Non-Gated	Gated	Non-Gated	Non-Gated
<b>Office visit Co-Pay</b>						
	PCP	\$5.00	\$50.00	\$30.00	\$25.00	-
	Specialist	\$15.00	\$50.00	\$60.00	\$50.00	-
	Various Other In Network services Co-pays (e.g. Emergency Room, Out-pat surgery, Mental Health)	\$50-\$200	\$50-\$300	\$500 per day Hospital up to \$2000	\$50-\$250	-
<b>In Network Deductible</b>						
	Individual	N/A	\$750.00	\$1,000.00	\$2,000.00	\$5,500.00
	Family	N/A	\$1,500.00	\$2,000.00	\$4,000.00	\$11,000.00
<b>Out of Network Deductible</b>						
	Individual	\$2,000.00	Not Covered	Not Covered	Not Covered	Not Covered
	Family	\$4,000.00	Not Covered	Not Covered	Not Covered	Not Covered
<b>In Network Co-insurance</b>		0%	10%	0%	20%	30%
<b>Out of Network Co-insurance</b>		30%	Not Covered	Not Covered	Not Covered	Not Covered
<b>In Network Maximum out of Pocket*</b>						
	Individual	\$2,500.00	\$5,200.00	\$5,400.00	\$6,400.00	\$6,700.00
	Family	\$5,000.00	\$10,400.00	\$10,800.00	\$12,800.00	\$13,400.00
<b>Out of Network Maximum out of Pocket*</b>						
	Individual	\$5,000.00	Not Covered	Not Covered	Not Covered	Not Covered
	Family	\$10,000.00	Not Covered	Not Covered	Not Covered	Not Covered
<b>Pharmacy</b>						
	Rx Deductible	N/A	N/A	N/A	N/A	N/A
	Rx Co-pays	\$5/\$30/\$60	\$10/\$35/\$75	\$15/\$35/\$75	\$15/\$35/\$75	\$10/\$40/\$80
<b>Monthly Rates</b>						
	Single	\$1,400.76	\$1,113.55	\$997.62	\$912.39	\$768.92
	Parent/Child(ren)	\$2,381.29	\$1,893.03	\$1,695.95	\$1,551.06	\$1,307.16
	Employee/Spouse	\$2,801.51	\$2,227.10	\$1,995.23	\$1,824.78	\$1,537.83
	Family	\$3,992.16	\$3,173.61	\$2,843.20	\$2,600.31	\$2,191.40

\*Out of pocket maximums include office visit co-pays/hospital co-pays/co-insurance and deductibles

The information above is intended to be used for reference purposes only. Refer to your plan documents for full policy details.