



# RENSSELAER COUNTY HEALTH INSURANCE COSTS: JANUARY 1, 2023

## EMPLOYEES HIRED PRIOR TO 9/28/2006

### Full Monthly Premium Rates

Coverage	<a href="#">NYSHIP Empire Plan</a>	<a href="#">CDPHP HMO</a>	<a href="#">MVP HMO</a>	<a href="#">Empire Blue Cross EPO</a>
Single	\$1,345.06	\$957.43	\$946.80	\$1,836.73
Two Person	\$3,175.87	\$1,914.85	\$2,177.64	\$3,581.64
Family	\$3,175.87	\$2,489.31	\$2,319.66	\$5,326.86

### \*\*\* Full-Time Employee Bi-Weekly Share of Premium Cost at 20% \*\*\*

Coverage	<a href="#">NYSHIP Empire Plan</a>	<a href="#">CDPHP HMO</a>	<a href="#">MVP HMO</a>	<a href="#">Empire Blue Cross EPO</a>
Single	\$124.16	\$88.38	\$87.40	\$169.54
Two Person	\$293.16	\$176.76	\$201.01	\$330.61
Family	\$293.16	\$229.78	\$214.12	\$491.71

### Employee Annual Share of Premium Cost at 20%

Coverage	<a href="#">NYSHIP Empire Plan</a>	<a href="#">CDPHP HMO</a>	<a href="#">MVP HMO</a>	<a href="#">Empire Blue Cross EPO</a>
Single	\$3,228.14	\$2,297.83	\$2,272.32	\$4,408.15
Two Person	\$7,622.09	\$4,595.64	\$5,226.34	\$8,595.94
Family	\$7,622.09	\$5,974.34	\$5,567.18	\$12,784.46

### Plan Benefit Highlights

Coverage	<a href="#">NYSHIP Empire Plan</a>	<a href="#">CDPHP HMO</a>	<a href="#">MVP HMO</a>	<a href="#">Empire Blue Cross EPO</a>
<b>In Network</b>				
Doctor Co-Pay	\$25.00	\$25.00	\$25.00	\$25.00
Specialist Co-Pay	\$25.00	\$25.00	\$40.00	\$25.00
Drug Co-Pay	\$5G/\$30B/\$60NF	\$10G/\$25B/\$40NF	\$10G/\$30B/\$50NF	\$10G/\$25B/\$50NF
Inpatient Co-Pay	\$0	\$0	\$500	\$100
<b>Out of Network</b>				
Deductible	\$1,250.00	NA	NA	NA
Coinsurance	20%	NA	NA	NA
Inpatient Co-Pay	10%	\$0	\$500	\$0

\*The payroll deduction for family dental coverage will be \$24.86 for 2023. There is no payroll deduction for individual dental coverage.\*

NOTE-THE EMPLOYEE SHARE LISTED ABOVE IS FOR FULL-TIME EMPLOYEES. IF YOU ARE NOT A FULL-TIME EMPLOYEE, THE HEALTH INSURANCE COVERAGE WILL COST YOU MORE, DEPENDING UPON THE NUMBER OF HOURS WORKED PER WEEK.