



RENSSELAER COUNTY HEALTH INSURANCE COSTS: JANUARY 1, 2024

NON-MEDICARE ELIGIBLE RETIREES

Plan Options and Monthly Premiums

Coverage	NYSHIP Empire Plan	CDPHP HMO	MVP HMO	Empire Blue Cross EPO
Single	\$1,445.66	\$1,044.38	\$994.86	\$2,075.50
Two Person	\$3,367.09	\$2,193.20	\$2,288.18	\$4,047.25
Family	\$3,367.09	\$2,715.39	\$2,437.41	\$6,019.35

Plan Benefit Highlights

Coverage	NYSHIP Empire Plan	CDPHP HMO	MVP HMO	Empire Blue Cross EPO
In Network				
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
Out of Network				
Deductible	\$1,250.00	NA	NA	NA
Coinsurance	20%	NA	NA	NA
Inpatient Co-Pay	10%	\$0	\$500	\$0

Retiree Monthly Share of Premium

Coverage	NYSHIP Empire Plan	CDPHP HMO	MVP HMO	Empire Blue Cross EPO
Single	\$722.83	\$522.19	\$497.43	\$1,037.75
Two Person	\$1,971.76	\$1,268.92	\$1,338.09	\$2,319.39
Family	\$1,971.76	\$1,608.35	\$1,435.09	\$3,601.25