



# RENSSELAER COUNTY HEALTH INSURANCE COSTS: JANUARY 1, 2025

## NON-MEDICARE ELIGIBLE RETIREES

### Plan Options and Monthly Premiums

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	\$1,479.53	\$1,182.59	\$1,070.16	\$2,605.19
Two Person	\$3,367.80	\$2,483.44	\$2,461.37	\$5,081.41
Family	\$3,367.80	\$3,074.74	\$2,621.89	\$7,555.57

### 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

### Retiree Monthly Share of Premium

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	\$739.77	\$591.30	\$535.08	\$1,302.60
Two Person	\$1,967.14	\$1,436.85	\$1,439.37	\$2,912.14
Family	\$1,967.14	\$1,821.20	\$1,543.70	\$4,520.35