Rate Guide for the Individual Market



An Anthem Company

2016 Calendar Year (1/1/16-12/31/16)

On-exchange plans

Offered by Empire on the New York State of Health Marketplace.

		Empire HMO 5850 X, Bronze, NS, INN, Pediatric Dental, Dep 25 1H1K	Empire HMO 6000 X, Bronze, NS, INN, Pediatric Dental, Dep 25 1H1D	Empire HMO 4000 X, for HSA, Bronze, ST, INN, Pediatric Dental, Dep 25 1H14	Empire HMO 5850 X, Bronze, NS, INN, Pediatric Dental, Dep 25, \$0 PCP Office Visit 1XK7	Empire HMO 2000 X, Silver, ST, INN, Pediatric Dental, Dep 25 1H1R	Empire HMO 2250 X, Silver, NS, INN, Pediatric Dental, Dep 25 1H2M	Empire HMO 2750 X, for HSA, Silver, NS, INN, Pediatric Dental, Dep 25 1H29	Empire Blue Cross Blue Shield HMO 2750 X, for HSA, Silver, NS, INN, Pediatric Dental, Dep 25, a Multi-State Plan 1HOQ	Empire HMO 600 X, Gold, ST, INN, Pediatric Dental, Dep 25 1H33	Empire HMO 1000 X, Gold, NS, INN, Pediatric Dental, Dep 25 1H3C	Empire Blue Cross Blue Shield HMO 1000 X, Gold, NS, INN, Pediatric Dental, Dep 25, a Multi- State Plan 1HOY	Empire HMO O X, Platinum, ST, INN, Pediatric Dental, Dep 25 1H3N	Empire HMO 250 X, Platinum, NS, INN, Pediatric Dental, Dep 25 1H44	Empire HMO 6850 X, Catastrophic, ST, INN, Pediatric Dental 1H49
Long Island	Individual	\$400.40	\$402.50	\$408.17	\$408.33	\$509.36	\$466.95	\$475.03	\$475.24	\$594.28	\$565.25	\$565.62	\$691.01	\$667.39	\$204.37
	Individual/ Spouse	\$800.80	\$805.00	\$816.34	\$816.66	\$1,018.72	\$933.90	\$950.06	\$950.48	\$1,188.56	\$1,130.50	\$1,131.24	\$1,382.02	\$1,334.78	\$408.74
	Parent/Children	\$680.68	\$684.25	\$693.89	\$694.16	\$865.91	\$793.82	\$807.55	\$807.91	\$1,010.28	\$960.93	\$961.55	\$1,174.72	\$1,134.56	\$347.43
	Family	\$1,141.14	\$1,147.13	\$1,163.28	\$1,163.74	\$1,451.68	\$1,330.81	\$1,353.84	\$1,354.43	\$1,693.70	\$1,610.96	\$1,612.02	\$1,969.38	\$1,902.06	\$582.45
New York City	Individual	\$435.02	\$437.30	\$443.46	\$443.63	\$553.40	\$507.33	\$516.11	\$516.34	\$645.66	\$614.13	\$614.53	\$750.76	\$725.10	\$222.04
	Individual/ Spouse	\$870.04	\$874.60	\$886.92	\$887.26	\$1,106.80	\$1,014.66	\$1,032.22	\$1,032.68	\$1,291.32	\$1,228.26	\$1,229.06	\$1,501.52	\$1,450.20	\$444.08
	Parent/Children	\$739.53	\$743.41	\$753.88	\$754.17	\$940.78	\$862.46	\$877.39	\$877.78	\$1,097.62	\$1,044.02	\$1,044.70	\$1,276.29	\$1,232.67	\$377.47
	Family	\$1,239.81	\$1,246.31	\$1,263.86	\$1,264.35	\$1.577.19	\$1,445.89	\$1,470.91	\$1,471.57	\$1,840.13	\$1,750.27	\$1,751.41	\$2,139.67	\$2,066.54	\$632.81
Mid-Hudson	Individual	\$477.73	\$480.23	\$487.00	\$487.19	\$607.73	\$557.13	\$566.78	\$567.03	\$709.05	\$674.42	\$674.86	\$824.46	\$796.28	\$243.84
	Individual/ Spouse	\$955.46	\$960.46	\$974.00	\$974.38	\$1,215.46	\$1,114.26	\$1,133.56	\$1,134.06	\$1,418.10	\$1,348.84	\$1,349.72	\$1,648.92	\$1,592.56	\$487.68
	Parent/Children	\$812.14	\$816.39	\$827.90	\$828.22	\$1,033.14	\$947.12	\$963.53	\$963.95	\$1,205.39	\$1,146.51	\$ 1,147.26	\$1,401.58	\$1,353.68	\$414.53
	Family	\$1,361.53	\$1,368.66	\$1,387.95	\$1,388.49	\$1,732.03	\$1,587.82	\$1,615.32	\$1,616.04	\$2,020.79	\$1,922.10	\$1,923.35	\$2,349.71	\$2,269.40	\$694.94
Albany	Individual	\$405.05	\$407.17	\$412.90	\$413.06	\$515.27	\$472.37	\$480.55	\$480.76	\$601.17	\$571.81	\$572.18	\$699.02	\$675.13	\$206.74
	Individual/ Spouse	\$810.10	\$814.34	\$825.80	\$826.12	\$1,030.54	\$944.74	\$961.10	\$ 961.52	\$1,202.34	\$1,143.62	\$1,144.36	\$1,398.04	\$ 1,350.26	\$413.48
	Parent/Children	\$688.59	\$692.19	\$701.93	\$702.20	\$875.96	\$803.03	\$816.94	\$817.29	\$1,021.99	\$972.08	\$972.71	\$1,188.33	\$1,147.72	\$351.46
	Family	\$1,154.39	\$1,160.43	\$1,176.77	\$1,177.22	\$1,468.52	\$1,346.25	\$1,369.57	\$1,370.17	\$1,713.33	\$1,629.66	\$1,630.71	\$1,992.21	\$1,924.12	\$589.21

This is intended for broker use only and should not be distributed to consumers or employer groups.

Services provided by Empire HealthChoice HMO, Inc. and/or Empire HealthChoice Assurance, Inc., licensees of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans.

Note: The plans described here are available for effective dates starting January 1, 2016. They can be purchased from Empire directly or on the NY State of Health, The Official Health Plan Marketplace. Open Enrollment begins November 1, 2015 and ends January 31, 2016.

Rate Guide for the Individual Market

Empire BLUE CROSS BLUE SHIELD

An Anthem Company

2016 Calendar Year (1/1/16-12/31/16)

Off-exchange plans

		Empire HMO 5850, Bronze, NS, INN, Pediatric Dental, Dep 25 1H1M	Empire HMO 6000, Bronze, NS, INN, Pediatric Dental, Dep 25 1H1F	Empire HMO 4000 for HSA, Bronze, ST, INN, Pediatric Dental, Dep 25 1H19	Empire HMO 5850, Bronze, NS, INN, Pediatric Dental, Dep 25, \$0 PCP Office Visit 1XK9	Empire HMO 2000, Silver, ST, INN, Pediatric Dental, Dep 25 1H25	Empire HMO 2250, Silver, NS, INN, Pediatric Dental, Dep 25 1H2V	Empire HMO 2750 for HSA, Silver, NS, INN, Pediatric Dental, Dep 25 282C	Empire HMO 600, Gold, ST, INN, Pediatric Dental, Dep 25 1H38	Empire HMO 600, Gold, ST, INN, Pediatric Dental, Dep 25 1H3E	Empire HMO 0, Platinum, ST, INN, Pediatric Dental, Dep 25 1H3T	Empire HMO 250, Platinum, NS, INN, Pediatric Dental, Dep 25 1H45	Empire HMO 6850, Catastrophic, ST, INN, Pediatric Dental 1H4A
Long Island	Individual	\$400.40	\$402.50	\$408.17	\$408.33	\$509.36	\$466.95	\$475.03	\$594.28	\$565.25	\$691.01	\$667.39	\$204.37
	Individual/ Spouse	\$800.80	\$805.00	\$816.34	\$816.66	\$1,018.72	\$933.90	\$950.06	\$1,188.56	\$1,130.50	\$1,382.02	\$1,334.78	\$408.74
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