

**2024 New York Small Group (1-100) Oxford Products: Q2 2024 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 3** in the Oxford service area, which includes: Dutchess, Orange, Putnam, Sullivan, and Ulster counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



<b>Platinum Plans</b>			
<b>NY P FRDM NG 5/15/100 PPO 24</b>			
PCP/Spec:	\$5/\$15	Single	\$1,497.54
Ded and Coinsurance:	In: \$0, 0% Out: \$2,000/\$4,000, 30%	Parent/Child (ren)	\$2,545.82
Max out of Pocket:	In: \$3,750/\$7,500 Out: \$5,500/\$11,000	Employee/ Spouse*	\$2,995.08
RX plan:	Non-T1 Ded \$100 then \$5/\$35/\$70 Broad Ntwk	Family	\$4,267.99
<b>NY P FRDM NG 20/40/100 EPO 24</b>			
PCP/Spec:	\$20/\$40	Single	\$1,415.69
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$2,464.67
Max out of Pocket:	In: \$3,250/\$6,500	Employee/ Spouse*	\$2,831.38
RX plan:	Non-T1 Ded \$100 then \$5/\$35/\$70 Broad Ntwk	Family	\$4,034.72
<b>NY P FRDM NG 5/15/100 EPO 24</b>			
PCP/Spec:	\$5/\$15	Single	\$1,443.94
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$2,464.67
Max out of Pocket:	In: \$3,750/\$7,500	Employee/ Spouse*	\$2,887.88
RX plan:	Non-T1 Ded \$100 then \$5/\$35/\$70 Broad Ntwk	Family	\$4,115.23
<b>NY P FRDM NG 20/40/100 PPO 24</b>			
PCP/Spec:	\$20/\$40	Single	\$1,466.06
Ded and Coinsurance:	In: \$0, 0% Out: \$3,000/\$6,000, 30%	Parent/Child (ren)	\$2,492.30
Max out of Pocket:	In: \$3,250/\$6,500 Out: \$8,000/\$16,000	Employee/ Spouse*	\$2,932.12
RX plan:	Non-T1 Ded \$100 then \$5/\$35/\$70 Broad Ntwk	Family	\$4,178.27
<b>NY P FRDM NG 20/40/100 PPO FAIR 24</b>			
PCP/Spec:	\$20/\$40	Single	\$1,755.59
Ded and Coinsurance:	In: \$0, 0% Out: \$10,000/\$20,000, 20%	Parent/Child (ren)	\$2,984.50
Max out of Pocket:	In: \$3,250/\$6,500 Out: \$25,000/\$50,000	Employee/ Spouse*	\$3,511.18
RX plan:	Non-T1 Ded \$100 then \$5/\$35/\$70 Broad Ntwk	Family	\$5,003.43
<b>NY P MTRO GT 15/25/100 EPO 24</b>			
PCP/Spec:	\$15/\$25	Single	\$1,171.75
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$1,991.98
Max out of Pocket:	In: \$3,500/\$7,000	Employee/ Spouse*	\$2,343.50
RX plan:	Non-T1 Ded \$150 then \$10/\$65/\$95 Std Select	Family	\$3,339.49
<b>NY P LBTY GT 10/25/250/90 EPO LA 24</b>			
PCP/Spec:	\$10/\$25	Single	\$1,232.65
Ded and Coinsurance:	In: \$250/\$500, 10%	Parent/Child (ren)	\$2,095.51
Max out of Pocket:	In: \$2,750/\$5,500	Employee/ Spouse*	\$2,465.30
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,513.05
<b>NY P LBTY NG 5/35/500/100 EPO 24</b>			
PCP/Spec:	Tier I: \$5/\$35 Tier II: \$25/\$70	Single	\$1,298.91
Ded and Coinsurance:	In: \$500/\$1,000, 0%	Parent/Child (ren)	\$2,208.15
Max out of Pocket:	In: \$2,450/\$4,900	Employee/ Spouse*	\$2,597.82
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,701.89

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<b>Gold Plans</b>				
<b>NY G LBTY GT 30/60/1250/100 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60	Single	\$1,100.10	\$19.32
Ded and Coinsurance:	In: \$1,250/\$2,500, 0%	Parent/Child (ren)	\$1,870.17	\$32.84
Max out of Pocket:	In: \$7,000/\$14,000	Employee/ Spouse*	\$2,200.20	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,135.29	\$55.06
<b>NY G FRDM NG 15/35/1750/90 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$15/\$35	Single	\$1,208.03	\$19.32
Ded and Coinsurance:	In: \$1,750/\$3,500, 10%	Parent/Child (ren)	\$2,053.65	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$2,416.06	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$40/\$80 Broad Ntwk	Family	\$3,442.89	\$55.06
<b>NY G FRDM NG 25/40/1750/80 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$40	Single	\$1,198.90	\$19.32
Ded and Coinsurance:	In: \$1,750/\$3,500, 20%	Parent/Child (ren)	\$2,038.13	\$32.84
Max out of Pocket:	In: \$6,500/\$13,000	Employee/ Spouse*	\$2,397.80	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$40/\$80 Broad Ntwk	Family	\$3,416.87	\$55.06
<b>NY G FRDM NG 25/40/1500/80 PPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$40	Single	\$1,248.18	\$19.32
Ded and Coinsurance:	In: \$1,500/\$3,000, 20% Out: \$4,000/\$8,000, 40%	Parent/Child (ren)	\$2,121.91	\$32.84
Max out of Pocket:	In: \$7,250/\$14,500 Out: \$10,500/\$21,000	Employee/ Spouse*	\$2,496.36	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$40/\$80 Broad Ntwk	Family	\$3,557.31	\$55.06
<b>NY G FRDM NG 50/50/1000/90 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$50/\$50	Single	\$1,212.07	\$19.32
Ded and Coinsurance:	In: \$1,000/\$2,000, 10%	Parent/Child (ren)	\$2,060.52	\$32.84
Max out of Pocket:	In: \$6,700/\$13,400	Employee/ Spouse*	\$2,424.14	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$40/\$80 Broad Ntwk	Family	\$3,454.40	\$55.06
<b>NY G FRDM NG 1600/90 PPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$1,156.96	\$19.32
Ded and Coinsurance:	In: \$1,600/\$3,200, 10% Out: \$4,000/\$8,000, 40%	Parent/Child (ren)	\$1,966.83	\$32.84
Max out of Pocket:	In: \$5,750/\$11,500 Out: \$10,500/\$21,000	Employee/ Spouse*	\$2,313.92	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$3,297.34	\$55.06
<b>NY G FRDM NG 1600/90 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$1,114.00	\$19.32
Ded and Coinsurance:	In: \$1,600/\$3,200, 10%	Parent/Child (ren)	\$1,893.80	\$32.84
Max out of Pocket:	In: \$5,750/\$11,500	Employee/ Spouse*	\$2,228.00	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$3,174.90	\$55.06
<b>NY G MTRO GT 25/40/1250/80 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$40	Single	\$994.54	\$19.32
Ded and Coinsurance:	In: \$1,250/\$2,500, 20%	Parent/Child (ren)	\$1,690.72	\$32.84
Max out of Pocket:	In: \$6,500/\$13,000	Employee/ Spouse*	\$1,989.08	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$65/\$95 Std Select	Family	\$2,834.44	\$55.06
<b>NY G MTRO GT 25/40/600/80 EPO HNY 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$40 after Deductible	Single	\$850.76	\$19.32
Ded and Coinsurance:	In: \$600/\$1,200, 20%	Parent/Child (ren)	\$1,446.29	\$32.84
Max out of Pocket:	In: \$5,900/\$11,800	Employee/ Spouse*	\$1,701.52	\$38.64
RX plan:	\$10/\$35/\$70 Std Select	Family	\$2,424.67	\$55.06
<b>NY G LBTY NG 30/60/1800/70 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60	Single	\$1,085.18	\$19.32
Ded and Coinsurance:	In: \$1,800/\$3,600, 30%	Parent/Child (ren)	\$1,844.81	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$2,170.36	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,092.76	\$55.06
<b>NY G MTRO NG 25/40/1250/80 EPO ME 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$40	Single	\$1,030.32	\$19.32
Ded and Coinsurance:	In: \$1,250/\$2,500, 20%	Parent/Child (ren)	\$1,751.54	\$32.84
Max out of Pocket:	In: \$6,500/\$13,000	Employee/ Spouse*	\$2,060.64	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$65/\$95 Std Select	Family	\$2,936.41	\$55.06
<b>NY G FRDM NG 30/60/2250/70 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60	Single	\$1,147.74	\$19.32
Ded and Coinsurance:	In: \$2,250/\$4,500, 30%	Parent/Child (ren)	\$1,951.16	\$32.84
Max out of Pocket:	In: \$8,250/\$16,500	Employee/ Spouse*	\$2,295.48	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$40/\$80 Broad Ntwk	Family	\$3,271.06	\$55.06
<b>NY G LBTY NG 25/50/100 EPO ZD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	PCP:Adult: \$25 & Kid: \$5 /Spec:\$50	Single	\$1,214.01	\$19.32
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$2,063.82	\$32.84
Max out of Pocket:	In: \$7,000/\$14,000	Employee/ Spouse*	\$2,428.02	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,459.93	\$55.06
<b>NY G LBTY NG 1600/90 EPO HSA PR 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$1,052.44	\$19.32
Ded and Coinsurance:	In: \$1,600/\$3,200, 10%	Parent/Child (ren)	\$1,789.15	\$32.84
Max out of Pocket:	In: \$5,750/\$11,500	Employee/ Spouse*	\$2,104.88	\$38.64
RX plan:	Ded Med/Rx then \$10/\$50/\$90 Broad Ntwk	Family	\$2,999.45	\$55.06
<b>NY G LBTY NG 20/40/1500/80 EPO PD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Tier I: \$20/\$40 Tier II: \$40/\$80	Single	\$1,103.80	\$19.32
Ded and Coinsurance:	In: \$1,500/\$3,000, 20%	Parent/Child (ren)	\$1,876.46	\$32.84
Max out of Pocket:	In: \$8,750/\$17,500	Employee/ Spouse*	\$2,207.60	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$3,145.83	\$55.06
<b>NY G FRDM NG 2000/100 EPO HSA PR 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$1,115.69	\$19.32
Ded and Coinsurance:	In: \$2,000/\$4,000, 0%	Parent/Child (ren)	\$1,896.67	\$32.84
Max out of Pocket:	In: \$7,050/\$14,100	Employee/ Spouse*	\$2,231.38	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$3,179.72	\$55.06
<b>NY G FRDM NG 25/50/100 EPO ZD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	PCP:Adult: \$25 & Kid: \$5 /Spec:\$50	Single	\$1,287.93	\$19.32
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$2,189.48	\$32.84
Max out of Pocket:	In: \$7,000/\$14,000	Employee/ Spouse*	\$2,575.86	\$38.64
RX plan:	Non-T1 Ded \$150 then \$10/\$65/\$95 Broad Ntwk	Family	\$3,670.60	\$55.06

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<b>Silver Plans</b>				
<b>NY S LBTY NG 40/80/3250/60 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$40/\$80	Single	\$951.50	\$19.32
Ded and Coinsurance:	In: \$3,250/\$6,500, 40%	Parent/Child (ren)	\$1,617.55	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,903.00	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$2,711.78	\$55.06
<b>NY S FRDM NG 40/80/3250/60 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$40/\$80	Single	\$1,006.65	\$19.32
Ded and Coinsurance:	In: \$3,250/\$6,500, 40%	Parent/Child (ren)	\$1,711.31	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$2,013.30	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$2,868.95	\$55.06
<b>NY S LBTY NG 30/75/4000/50 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$75	Single	\$938.13	\$19.32
Ded and Coinsurance:	In: \$4,000/\$8,000, 50%	Parent/Child (ren)	\$1,594.82	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,876.26	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/50%, max \$800 Broad Ntwk	Family	\$2,673.67	\$55.06
<b>NY S MTRO GT 30/80/3750/60 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$80	Single	\$831.68	\$19.32
Ded and Coinsurance:	In: \$3,750/\$7,500, 40%	Parent/Child (ren)	\$1,413.86	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,663.36	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$65/\$95 Std Select	Family	\$2,370.29	\$55.06
<b>NY S FRDM NG 30/60/2250/70 PPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60 after Deductible	Single	\$1,014.98	\$19.32
Ded and Coinsurance:	In: \$2,250/\$4,500, 30% Out: \$6,000/\$12,000, 50%	Parent/Child (ren)	\$1,725.47	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000 Out: \$15,500/\$31,000	Employee/ Spouse*	\$2,029.96	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$2,829.69	\$55.06
<b>NY S LBTY GT 30/60/4500/50 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60	Single	\$918.27	\$19.32
Ded and Coinsurance:	In: \$4,500/\$9,000, 50%	Parent/Child (ren)	\$1,561.06	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,836.54	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$2,617.07	\$55.06
<b>NY S FRDM NG 40/80/3250/60 PPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$40/\$80	Single	\$1,045.34	\$19.32
Ded and Coinsurance:	In: \$3,250/\$6,500, 40% Out: \$6,000/\$12,000, 50%	Parent/Child (ren)	\$1,777.08	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900 Out: \$15,500/\$31,000	Employee/ Spouse*	\$2,090.68	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$2,979.22	\$55.06
<b>NY S FRDM NG 30/60/3000/80 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60 after Deductible	Single	\$978.06	\$19.32
Ded and Coinsurance:	In: \$3,000/\$6,000, 20%	Parent/Child (ren)	\$1,662.70	\$32.84
Max out of Pocket:	In: \$7,150/\$14,300	Employee/ Spouse*	\$1,956.12	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$2,787.47	\$55.06
<b>NY S FRDM NG 2500/60 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$947.11	\$19.32
Ded and Coinsurance:	In: \$2,500/\$5,000, 40%	Parent/Child (ren)	\$1,610.09	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,894.22	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$2,699.26	\$55.06
<b>NY S MTRO NG 30/80/3750/60 EPO ME 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$80	Single	\$861.60	\$19.32
Ded and Coinsurance:	In: \$3,750/\$7,500, 40%	Parent/Child (ren)	\$1,464.72	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,723.20	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$65/\$95 Std Select	Family	\$2,455.56	\$55.06
<b>NY S LBTY NG 30/60/3000/80 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60 after Deductible	Single	\$923.74	\$19.32
Ded and Coinsurance:	In: \$3,000/\$6,000, 20%	Parent/Child (ren)	\$1,570.36	\$32.84
Max out of Pocket:	In: \$7,150/\$14,300	Employee/ Spouse*	\$1,847.48	\$38.64
RX plan:	Ded Med/Rx then \$10/\$50/\$90 Broad Ntwk	Family	\$2,632.66	\$55.06
<b>NY S MTRO GT 35/50/4000/70 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$35/\$50 after Deductible	Single	\$781.71	\$19.32
Ded and Coinsurance:	In: \$4,000/\$8,000, 30%	Parent/Child (ren)	\$1,328.91	\$32.84
Max out of Pocket:	In: \$7,200/\$14,400	Employee/ Spouse*	\$1,563.42	\$38.64
RX plan:	Ded Med/Rx then \$10/\$65/50%, max \$800 Std Select	Family	\$2,227.87	\$55.06
<b>NY S MTRO NG 50/100/100 EPO ZD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	PCP:Adult: \$50 & Kid: \$5 /Spec:\$100	Single	\$976.76	\$19.32
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$1,660.49	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,953.52	\$38.64
RX plan:	Non-T1 Ded \$200 then \$15/\$65/\$95 Std Select	Family	\$2,783.77	\$55.06
<b>NY S LBTY NG 4000/80 EPO HSA PR 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$874.45	\$19.32
Ded and Coinsurance:	In: \$4,000/\$8,000, 20%	Parent/Child (ren)	\$1,486.57	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,748.90	\$38.64
RX plan:	Ded Med/Rx then \$10/\$50/\$90 Broad Ntwk	Family	\$2,492.18	\$55.06
<b>NY S LBTY NG 50/100/100 EPO ZD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	PCP:Adult: \$50 & Kid: \$5 /Spec:\$100	Single	\$1,075.11	\$19.32
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$1,827.69	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$2,150.22	\$38.64
RX plan:	Non-T1 Ded \$200 then \$15/\$65/\$95 Broad Ntwk	Family	\$3,064.06	\$55.06
<b>NY S LBTY NG 25/45/5000/50 EPO 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Tier I: \$25/\$45 Tier II: \$45/\$75	Single	\$946.64	\$19.32
Ded and Coinsurance:	In: \$5,000/\$10,000, 50%	Parent/Child (ren)	\$1,609.29	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$1,893.28	\$38.64
RX plan:	Non-T1 Ded \$200 then \$10/\$50/\$90 Broad Ntwk	Family	\$2,697.92	\$55.06
<b>NY S FRDM NG 50/100/100 EPO ZD 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	PCP:Adult: \$50 & Kid: \$5 /Spec:\$100	Single	\$1,136.85	\$19.32
Ded and Coinsurance:	In: \$0, 0%	Parent/Child (ren)	\$1,932.65	\$32.84
Max out of Pocket:	In: \$9,450/\$18,900	Employee/ Spouse*	\$2,273.70	\$38.64
RX plan:	Non-T1 Ded \$200 then \$15/\$65/\$95 Broad Ntwk	Family	\$3,240.02	\$55.06

**2024 New York Small Group (1-100) Oxford Products: Q2 2024 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 3** in the Oxford service area, which includes: Dutchess, Orange, Putnam, Sullivan, and Ulster counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



<b>Bronze Plans</b>				
<b>NY B FRDM NG 5000/50 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$882.47	\$19.32
Ded and Coinsurance:	In: \$5,000/\$10,000, 50%	Parent/Child (ren)	\$1,500.20	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,764.94	\$38.64
RX plan:	Ded Med/Rx then \$10/\$40/\$80 Broad Ntwk	Family	\$2,515.04	\$55.06
<b>NY B LBTY NG 7250/100 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$842.91	\$19.32
Ded and Coinsurance:	In: \$7,250/\$14,500, 0%	Parent/Child (ren)	\$1,432.95	\$32.84
Max out of Pocket:	In: \$7,250/\$14,500	Employee/ Spouse*	\$1,685.82	\$38.64
RX plan:	Ded Med/Rx then 0%/0%/0% Broad Ntwk	Family	\$2,402.29	\$55.06
<b>NY B MTRO GT 7250/100 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	Deductible and Coinsurance	Single	\$739.99	\$19.32
Ded and Coinsurance:	In: \$7,250/\$14,500, 0%	Parent/Child (ren)	\$1,257.98	\$32.84
Max out of Pocket:	In: \$7,250/\$14,500	Employee/ Spouse*	\$1,479.98	\$38.64
RX plan:	Ded Med/Rx then 0%/0%/0% Std Select	Family	\$2,108.97	\$55.06
<b>NY B LBTY NG 25/75/5750/70 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$25/\$75 after Deductible	Single	\$829.38	\$19.32
Ded and Coinsurance:	In: \$5,750/\$11,500, 30%	Parent/Child (ren)	\$1,409.95	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,658.76	\$38.64
RX plan:	Ded Med/Rx then 30%/30%/30% Broad Ntwk	Family	\$2,363.73	\$55.06
<b>NY B LBTY NG 30/60/6750/80 PPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$30/\$60 after Deductible	Single	\$854.56	\$19.32
Ded and Coinsurance:	In: \$6,750/\$13,500, 20% Out: \$12,500/\$25,000, 20%	Parent/Child (ren)	\$1,452.75	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000 Out: \$31,250/\$62,500	Employee/ Spouse*	\$1,709.12	\$38.64
RX plan:	Ded Med/Rx then \$10/\$50/\$90 Broad Ntwk	Family	\$2,435.50	\$55.06
<b>NY B MTRO GT 40/75/6500/50 EPO HSA 24</b>		<b>Tier</b>	<b>Rate (select counties)</b>	<b>Dep 29 Rider</b>
PCP/Spec:	\$40/\$75 after Deductible	Single	\$722.56	\$19.32
Ded and Coinsurance:	In: \$6,500/\$13,000, 50%	Parent/Child (ren)	\$1,228.35	\$32.84
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,445.12	\$38.64
RX plan:	Ded Med/Rx then \$10/\$65/\$95 Std Select	Family	\$2,059.30	\$55.06

\* Employee / Spouse rate is the rate for Employee / Domestic Partner coverage if additional coverage is available and purchased by the group.

<sup>1</sup> Oxford insurance products are underwritten by Oxford Health Insurance, Inc. ©2017 Oxford Health Plans LLC. All rights reserved.