

2025 New York Small Group (1-100) Oxford Products: Q4 2025 Rates

Use the table below to review monthly rates for New York small group Oxford¹ products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester 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.



Platinum Plans				
NY P FRDM NG 20/40/100 EPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$20/\$40	Single	\$1,627.37	\$1,659.91
Ded and Coinsurance:	In: \$0/\$0, 100%	Parent/Child (ren)	\$2,766.52	\$2,821.86
Max out of Pocket:	In: \$3,250/\$6,500	Employee/ Spouse*	\$3,254.73	\$3,319.83
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$4,637.99	\$4,730.75
NY P FRDM NG 5/15/100 EPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$5/\$15	Single	\$1,658.04	\$1,691.21
Ded and Coinsurance:	In: \$0/\$0, 100%	Parent/Child (ren)	\$2,818.68	\$2,875.06
Max out of Pocket:	In: \$3,750/\$7,500	Employee/ Spouse*	\$3,316.08	\$3,382.43
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$4,725.42	\$4,819.96
NY P FRDM NG 10/25/250/90 EPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$10/\$25	Single	\$1,575.05	\$1,606.54
Ded and Coinsurance:	In: \$250/\$500, 90%	Parent/Child (ren)	\$2,677.58	\$2,731.12
Max out of Pocket:	In: \$2,750/\$5,500	Employee/ Spouse*	\$3,150.09	\$3,213.08
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$4,488.88	\$4,578.64
NY P FRDM NG 15/25/100 EPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$15/\$25	Single	\$1,631.63	\$1,664.26
Ded and Coinsurance:	In: \$0/\$0, 100%	Parent/Child (ren)	\$2,773.77	\$2,829.24
Max out of Pocket:	In: \$3,500/\$7,000	Employee/ Spouse*	\$3,263.26	\$3,328.51
RX plan:	\$150D on T2 & T3 \$10/\$65/\$95	Family	\$4,650.14	\$4,743.13
NY P FRDM NG 5/15/100 PPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$5/\$15	Single	\$1,717.71	\$1,752.07
Ded and Coinsurance:	In: \$0/\$0, 100% Out: \$2,000/\$4,000, 70%	Parent/Child (ren)	\$2,920.11	\$2,978.52
Max out of Pocket:	In: \$3,750/\$7,500 Out: \$5,500/\$11,000	Employee/ Spouse*	\$3,435.42	\$3,504.13
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$4,895.47	\$4,993.39
NY P FRDM NG 20/40/100 PPO 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$20/\$40	Single	\$1,683.54	\$1,717.21
Ded and Coinsurance:	In: \$0/\$0, 100% Out: \$3,000/\$6,000, 70%	Parent/Child (ren)	\$2,862.02	\$2,919.26
Max out of Pocket:	In: \$3,250/\$6,500 Out: \$8,000/\$16,000	Employee/ Spouse*	\$3,367.08	\$3,434.42
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$4,798.09	\$4,894.04
NY P FRDM NG 20/40/100 PPO FAIR 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	\$20/\$40	Single	\$2,049.83	\$2,090.83
Ded and Coinsurance:	In: \$0/\$0, 100% Out: \$10,000/\$20,000, 80%	Parent/Child (ren)	\$3,484.71	\$3,554.41
Max out of Pocket:	In: \$3,250/\$6,500 Out: \$25,000/\$50,000	Employee/ Spouse*	\$4,099.66	\$4,181.66
RX plan:	\$100D on T2 & T3 \$5/\$35/\$70	Family	\$5,842.02	\$5,958.86

2025 New York Small Group (1-100) Oxford Products: Q4 2025 Rates

Use the table below to review monthly rates for New York small group Oxford¹ products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester 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.



Gold Plans			
Plan Name	Tier	Rate (select counties)	Dep 29 Rider
NY G FRDM NG 1650/90 EPO HSA 25			
PCP/Spec: Ded + 90%/Ded + 90%	Single	\$1,317.36	\$1,343.71
Ded and Coinsurance: In: \$1,650/\$3,300, 90%	Parent/Child (ren)	\$2,239.52	\$2,284.31
Max out of Pocket: In: \$5,750/\$11,500	Employee/ Spouse*	\$2,634.73	\$2,687.41
RX plan: Ded Med/Rx \$10/\$40/\$80	Family	\$3,754.49	\$3,829.57
NY G FRDM NG 50/50/1000/90 EPO 25			
PCP/Spec: \$50/\$50	Single	\$1,397.20	\$1,425.14
Ded and Coinsurance: In: \$1,000/\$2,000, 90%	Parent/Child (ren)	\$2,349.52	\$2,422.74
Max out of Pocket: In: \$6,700/\$13,400	Employee/ Spouse*	\$2,794.39	\$2,850.29
RX plan: \$150D on T2 & T3 \$10/\$40/\$80	Family	\$3,982.01	\$4,061.66
NY G FRDM NG 15/35/1750/90 EPO 25			
PCP/Spec: \$15/\$35	Single	\$1,386.06	\$1,413.78
Ded and Coinsurance: In: \$1,750/\$3,500, 90%	Parent/Child (ren)	\$2,366.00	\$2,403.42
Max out of Pocket: In: \$8,000/\$16,000	Employee/ Spouse*	\$2,772.12	\$2,827.55
RX plan: \$150D on T2 & T3 \$10/\$40/\$80	Family	\$3,950.27	\$4,029.27
NY G FRDM NG 25/40/1750/80 EPO 25			
PCP/Spec: \$25/\$40	Single	\$1,379.21	\$1,406.80
Ded and Coinsurance: In: \$1,750/\$3,500, 80%	Parent/Child (ren)	\$2,344.67	\$2,391.56
Max out of Pocket: In: \$6,500/\$13,000	Employee/ Spouse*	\$2,758.43	\$2,813.59
RX plan: \$150D on T2 & T3 \$10/\$40/\$80	Family	\$3,930.76	\$4,009.37
NY G MTRO GT 25/40/1250/80 EPO 25			
PCP/Spec: \$25/\$40	Single	\$1,170.35	\$1,193.75
Ded and Coinsurance: In: \$1,250/\$2,500, 80%	Parent/Child (ren)	\$1,989.59	\$2,029.38
Max out of Pocket: In: \$6,500/\$13,000	Employee/ Spouse*	\$2,340.70	\$2,387.50
RX plan: \$150D on T2 & T3 \$10/\$65/\$95	Family	\$3,335.50	\$3,402.19
NY G MTRO NG 25/40/1250/80 EPO ME 25			
PCP/Spec: \$25/\$40	Single	\$1,212.65	\$1,236.92
Ded and Coinsurance: In: \$1,250/\$2,500, 80%	Parent/Child (ren)	\$2,001.51	\$2,102.76
Max out of Pocket: In: \$6,500/\$13,000	Employee/ Spouse*	\$2,425.30	\$2,473.83
RX plan: \$150D on T2 & T3 \$10/\$65/\$95	Family	\$3,456.06	\$3,525.22
NY G MTRO GT 25/40/600/80 EPO HNY 25			
PCP/Spec: Ded + \$25/Ded + \$40	Single	\$996.45	\$1,016.37
Ded and Coinsurance: In: \$600/\$1,200, 80%	Parent/Child (ren)	\$1,693.97	\$1,727.84
Max out of Pocket: In: \$7,900/\$15,800	Employee/ Spouse*	\$1,992.90	\$2,032.75
RX plan: \$10/\$35/\$70	Family	\$2,839.88	\$2,896.67
NY G FRDM NG 30/60/2250/70 EPO 25			
PCP/Spec: \$30/\$60	Single	\$1,330.99	\$1,357.61
Ded and Coinsurance: In: \$2,250/\$4,500, 70%	Parent/Child (ren)	\$2,262.69	\$2,307.95
Max out of Pocket: In: \$7,250/\$14,500	Employee/ Spouse*	\$2,661.99	\$2,715.23
RX plan: \$150D on T2 & T3 \$10/\$40/\$80	Family	\$3,793.34	\$3,869.20
NY G LBTY NG 30/60/1800/70 EPO 25			
PCP/Spec: \$30/\$60	Single	\$1,263.69	\$1,288.96
Ded and Coinsurance: In: \$1,800/\$3,600, 70%	Parent/Child (ren)	\$2,148.27	\$2,191.24
Max out of Pocket: In: \$7,500/\$15,000	Employee/ Spouse*	\$2,527.38	\$2,577.92
RX plan: \$200D on T2 & T3 \$10/\$50/\$90	Family	\$3,601.51	\$3,673.54
NY G LBTY NG 25/50/100 EPO ZD 25			
PCP/Spec: \$25/\$50	Single	\$1,404.33	\$1,432.42
Ded and Coinsurance: In: \$0/\$0, 100%	Parent/Child (ren)	\$2,387.36	\$2,435.11
Max out of Pocket: In: \$7,000/\$14,000	Employee/ Spouse*	\$2,808.65	\$2,864.84
RX plan: \$200D on T2 & T3 \$10/\$50/\$90	Family	\$4,002.34	\$4,082.39
NY G LBTY NG 1650/90 EPO HSA PR 25			
PCP/Spec: Ded + 90%/Ded + 90%	Single	\$1,249.49	\$1,274.47
Ded and Coinsurance: In: \$1,650/\$3,300, 90%	Parent/Child (ren)	\$2,124.12	\$2,166.60
Max out of Pocket: In: \$5,750/\$11,500	Employee/ Spouse*	\$2,498.97	\$2,548.95
RX plan: Ded Med/Rx \$10/\$50/\$90	Family	\$3,561.04	\$3,632.26
NY G FRDM NG 2000/100 EPO HSA PR 25			
PCP/Spec: Ded + 100%/Ded + 100%	Single	\$1,322.20	\$1,348.64
Ded and Coinsurance: In: \$2,000/\$4,000, 100%	Parent/Child (ren)	\$2,247.74	\$2,292.69
Max out of Pocket: In: \$7,050/\$14,100	Employee/ Spouse*	\$2,644.39	\$2,697.27
RX plan: Ded Med/Rx \$10/\$40/\$80	Family	\$3,768.26	\$3,843.62
NY G FRDM NG 25/50/100 EPO ZD 25			
PCP/Spec: \$25/\$50	Single	\$1,477.74	\$1,507.30
Ded and Coinsurance: In: \$0/\$0, 100%	Parent/Child (ren)	\$2,512.16	\$2,562.41
Max out of Pocket: In: \$7,000/\$14,000	Employee/ Spouse*	\$2,955.48	\$3,014.60
RX plan: \$150D on T2 & T3 \$10/\$65/\$95	Family	\$4,211.56	\$4,295.81
NY G LBTY NG 30/60/1250/100 EPO 25			
PCP/Spec: \$30/\$60	Single	\$1,320.66	\$1,347.08
Ded and Coinsurance: In: \$1,250/\$2,500, 100%	Parent/Child (ren)	\$2,245.12	\$2,290.03
Max out of Pocket: In: \$7,000/\$14,000	Employee/ Spouse*	\$2,641.32	\$2,694.15
RX plan: \$200D on T2 & T3 \$10/\$50/\$90	Family	\$3,763.89	\$3,839.17
NY G FRDM NG 25/40/1500/80 PPO 25			
PCP/Spec: \$25/\$40	Single	\$1,436.39	\$1,465.10
Ded and Coinsurance: In: \$1,500/\$3,000, 80% Out: \$4,000/\$8,000, 60%	Parent/Child (ren)	\$2,441.86	\$2,490.67
Max out of Pocket: In: \$7,250/\$14,500 Out: \$10,500/\$21,000	Employee/ Spouse*	\$2,872.77	\$2,930.20
RX plan: \$150D on T2 & T3 \$10/\$40/\$80	Family	\$4,093.69	\$4,175.53
NY G FRDM NG 1650/90 PPO HSA 25			
PCP/Spec: Ded + 90%/Ded + 90%	Single	\$1,366.00	\$1,393.32
Ded and Coinsurance: In: \$1,650/\$3,300, 90% Out: \$4,000/\$8,000, 60%	Parent/Child (ren)	\$2,322.20	\$2,368.64
Max out of Pocket: In: \$5,750/\$11,500 Out: \$10,500/\$21,000	Employee/ Spouse*	\$2,732.01	\$2,786.64
RX plan: Ded Med/Rx \$10/\$40/\$80	Family	\$3,893.11	\$3,970.96

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Silver Plans			
NY S LBTY NG 30/60/3000/80 EPO HSA 25			
PCP/Spec:	Ded + \$30/Ded + \$60	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,000/\$6,000, 80%	Single	\$1,107.14 \$1,129.28
Max out of Pocket:	In: \$7,150/\$14,300	Parent/Child (ren)	\$1,882.13 \$1,919.78
RX plan:	Ded Med/Rx \$10/\$50/\$90	Employee/ Spouse*	\$2,214.27 \$2,258.56
		Family	\$3,155.33 \$3,218.45
NY S FRDM NG 2500/60 EPO HSA 25			
PCP/Spec:	Ded + 60%/Ded + 60%	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$2,500/\$5,000, 60%	Single	\$1,130.78 \$1,153.39
Max out of Pocket:	In: \$8,000/\$16,000	Parent/Child (ren)	\$1,922.32 \$1,960.75
RX plan:	Ded Med/Rx \$10/\$40/\$80	Employee/ Spouse*	\$2,261.55 \$2,306.77
		Family	\$3,222.72 \$3,287.15
NY S FRDM NG 30/60/3000/80 EPO HSA 25			
PCP/Spec:	Ded + \$30/Ded + \$60	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,000/\$6,000, 80%	Single	\$1,167.14 \$1,190.49
Max out of Pocket:	In: \$7,150/\$14,300	Parent/Child (ren)	\$1,984.14 \$2,023.83
RX plan:	Ded Med/Rx \$10/\$40/\$80	Employee/ Spouse*	\$2,334.28 \$2,380.98
		Family	\$3,326.35 \$3,392.89
NY S FRDM NG 40/80/3250/60 EPO 25			
PCP/Spec:	\$40/\$80	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,250/\$6,500, 60%	Single	\$1,171.15 \$1,194.57
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,920.96 \$2,030.77
RX plan:	\$200D on T2 & T3 \$10/\$50/\$90	Employee/ Spouse*	\$2,342.30 \$2,389.14
		Family	\$3,337.78 \$3,404.53
NY S LBTY NG 40/80/3250/60 EPO 25			
PCP/Spec:	\$40/\$80	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,250/\$6,500, 60%	Single	\$1,111.62 \$1,133.85
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,989.76 \$1,927.55
RX plan:	\$200D on T2 & T3 \$10/\$50/\$90	Employee/ Spouse*	\$2,223.24 \$2,267.71
		Family	\$3,168.12 \$3,231.48
NY S MTRO GT 35/50/4000/70 EPO HSA 25			
PCP/Spec:	Ded + \$35/Ded + \$50	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$4,000/\$8,000, 70%	Single	\$952.80 \$971.85
Max out of Pocket:	In: \$7,200/\$14,400	Parent/Child (ren)	\$1,619.76 \$1,652.15
RX plan:	Ded Med/Rx \$10/\$65/50% up to \$800	Employee/ Spouse*	\$1,905.61 \$1,943.71
		Family	\$2,715.49 \$2,769.79
NY S MTRO GT 30/80/3750/60 EPO 25			
PCP/Spec:	\$30/\$80	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,750/\$7,500, 60%	Single	\$982.62 \$1,002.28
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,730.46 \$1,703.87
RX plan:	\$200D on T2 & T3 \$10/\$65/\$95	Employee/ Spouse*	\$1,965.25 \$2,004.56
		Family	\$2,800.47 \$2,856.50
NY S LBTY NG 30/75/4000/50 EPO 25			
PCP/Spec:	\$30/\$75	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$4,000/\$8,000, 50%	Single	\$1,093.60 \$1,115.48
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,859.12 \$1,896.32
RX plan:	\$200D on T2 & T3 \$10/\$50/50% up to \$800	Employee/ Spouse*	\$2,187.21 \$2,230.96
		Family	\$3,116.77 \$3,179.12
NY S MTRO NG 30/80/3750/60 EPO ME 25			
PCP/Spec:	\$30/\$80	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,750/\$7,500, 60%	Single	\$1,018.13 \$1,038.49
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,730.82 \$1,765.44
RX plan:	\$200D on T2 & T3 \$10/\$65/\$95	Employee/ Spouse*	\$2,036.26 \$2,076.98
		Family	\$2,901.67 \$2,959.70
NY S MTRO NG 50/100/100 EPO ZD 25			
PCP/Spec:	\$50/\$100	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$0/\$0, 100%	Single	\$1,149.62 \$1,172.61
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,934.36 \$1,993.44
RX plan:	\$200D on T2 & T3 \$15/\$65/\$95	Employee/ Spouse*	\$2,299.25 \$2,345.23
		Family	\$3,276.42 \$3,341.95
NY S LBTY NG 4000/80 EPO HSA PR 25			
PCP/Spec:	Ded + 80%/Ded + 80%	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$4,000/\$8,000, 80%	Single	\$1,051.10 \$1,072.12
Max out of Pocket:	In: \$8,000/\$16,000	Parent/Child (ren)	\$1,786.87 \$1,822.60
RX plan:	Ded Med/Rx \$10/\$50/\$90	Employee/ Spouse*	\$2,102.19 \$2,144.24
		Family	\$2,995.62 \$3,055.54
NY S LBTY NG 50/100/100 EPO ZD 25			
PCP/Spec:	\$50/\$100	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$0/\$0, 100%	Single	\$1,248.91 \$1,273.88
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$2,123.14 \$2,165.60
RX plan:	\$200D on T2 & T3 \$15/\$65/\$95	Employee/ Spouse*	\$2,497.81 \$2,547.75
		Family	\$3,559.39 \$3,630.55
NY S FRDM NG 50/100/100 EPO ZD 25			
PCP/Spec:	\$50/\$100	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$0/\$0, 100%	Single	\$1,315.81 \$1,342.13
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$2,236.88 \$2,281.62
RX plan:	\$200D on T2 & T3 \$15/\$65/\$95	Employee/ Spouse*	\$2,631.63 \$2,684.26
		Family	\$3,750.06 \$3,825.06
NY S LBTY NG 30/60/4500/50 EPO 25			
PCP/Spec:	\$30/\$60	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$4,500/\$9,000, 50%	Single	\$1,108.89 \$1,131.07
Max out of Pocket:	In: \$9,200/\$18,400	Parent/Child (ren)	\$1,885.12 \$1,922.82
RX plan:	\$200D on T2 & T3 \$10/\$50/\$90	Employee/ Spouse*	\$2,217.78 \$2,262.14
		Family	\$3,160.34 \$3,223.56
NY S FRDM NG 30/60/2250/70 PPO HSA 25			
PCP/Spec:	Ded + \$30/Ded + \$60	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$2,250/\$4,500, 70% Out: \$6,000/\$12,000, 50%	Single	\$1,206.82 \$1,230.96
Max out of Pocket:	In: \$8,000/\$16,000 Out: \$15,500/\$31,000	Parent/Child (ren)	\$2,051.59 \$2,092.64
RX plan:	Ded Med/Rx \$10/\$40/\$80	Employee/ Spouse*	\$2,413.64 \$2,461.92
		Family	\$3,439.44 \$3,508.24
NY S FRDM NG 40/80/3250/60 PPO 25			
PCP/Spec:	\$40/\$80	Tier	Rate (select counties) Dep 29 Rider
Ded and Coinsurance:	In: \$3,250/\$6,500, 60% Out: \$6,000/\$12,000, 50%	Single	\$1,214.54 \$1,238.82
Max out of Pocket:	In: \$9,200/\$18,400 Out: \$15,500/\$31,000	Parent/Child (ren)	\$2,064.72 \$2,106.00
RX plan:	\$200D on T2 & T3 \$10/\$50/\$90	Employee/ Spouse*	\$2,429.08 \$2,477.65
		Family	\$3,461.44 \$3,530.65

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Bronze Plans				
NY B FRDM NG 5000/50 EPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + 50%/Ded + 50%	Single	\$1,057.94	\$1,079.11
Ded and Coinsurance:	In: \$5,000/\$10,000, 50%	Parent/Child (ren)	\$1,798.50	\$1,834.48
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$2,115.89	\$2,158.21
RX plan:	Ded Med/Rx \$10/\$40/\$80	Family	\$3,015.14	\$3,075.46
NY B MTRO GT 40/75/6500/50 EPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + \$40/Ded + \$75	Single	\$884.83	\$902.53
Ded and Coinsurance:	In: \$6,500/\$13,000, 50%	Parent/Child (ren)	\$1,504.21	\$1,534.30
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,769.66	\$1,805.06
RX plan:	Ded Med/Rx \$10/\$40/\$80	Family	\$2,521.76	\$2,572.22
NY B LBTY NG 7250/100 EPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + 100%/Ded + 100%	Single	\$1,014.98	\$1,035.29
Ded and Coinsurance:	In: \$7,250/\$14,500, 100%	Parent/Child (ren)	\$1,725.47	\$1,759.99
Max out of Pocket:	In: \$7,250/\$14,500	Employee/ Spouse*	\$2,029.97	\$2,070.58
RX plan:	Ded Med/Rx \$0/\$0/\$0	Family	\$2,892.70	\$2,950.58
NY B MTRO GT 7250/100 EPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + 100%/Ded + 100%	Single	\$902.67	\$920.72
Ded and Coinsurance:	In: \$7,250/\$14,500, 100%	Parent/Child (ren)	\$1,534.55	\$1,565.22
Max out of Pocket:	In: \$7,250/\$14,500	Employee/ Spouse*	\$1,805.35	\$1,841.44
RX plan:	Ded Med/Rx \$0/\$0/\$0	Family	\$2,572.63	\$2,624.05
NY B LBTY NG 25/75/5750/70 EPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + \$25/Ded + \$75	Single	\$999.20	\$1,019.17
Ded and Coinsurance:	In: \$5,750/\$11,500, 70%	Parent/Child (ren)	\$1,698.63	\$1,732.60
Max out of Pocket:	In: \$8,000/\$16,000	Employee/ Spouse*	\$1,998.39	\$2,038.35
RX plan:	Ded Med/Rx 70%/70%/70%	Family	\$2,847.71	\$2,904.64
NY B FRDM NG 30/60/6750/80 PPO HSA 25		Tier	Rate (select counties)	Dep 29 Rider
PCP/Spec:	Ded + \$30/Ded + \$60	Single	\$1,081.37	\$1,103.01
Ded and Coinsurance:	In: \$6,750/\$13,500, 80% Out: \$12,500/\$25,000, 80%	Parent/Child (ren)	\$1,838.33	\$1,875.12
Max out of Pocket:	In: \$8,000/\$16,000 Out: \$31,250/\$62,500	Employee/ Spouse*	\$2,162.74	\$2,206.02
RX plan:	Ded Med/Rx \$10/\$50/\$90	Family	\$3,081.91	\$3,143.57

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

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