



Rates for Effective Date - 1/1/2018 - 2/1/2018 - 3/1/2018
Four Tier - Westchester

Platinum	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Platinum EPO 2K	PCP/Specialist: \$10/\$25 Deductible, Coinsurance: \$0, 0% Max OOP: \$2,000/\$4,000 Rx: \$10/\$30/\$75	\$829.44	\$1,653.92	\$1,406.58	\$2,354.73
Oscar Classic Platinum EPO 3K	PCP/Specialist: \$10/\$25 Deductible, Coinsurance: \$0, 0% Max OOP: \$3,000/\$6,000 Rx: \$10/\$30/\$75	\$823.62	\$1,642.31	\$1,396.70	\$2,338.18
Oxford Liberty Advantage Platinum EPO 15/35**	PCP/Specialist: \$15/\$35 Referral Required Deductible, Coinsurance: \$250/\$500, 10% Max OOP: \$3,000/\$6,000 Rx: \$5/\$30/\$60 after \$150/member Rx deductible (n/a Tier 1)	\$986.04	\$1,967.12	\$1,672.79	\$2,801.04
Gold	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Gold EPO	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$0, 0% Max OOP: \$5,000/\$10,000 Rx: \$10/\$50/\$100	\$742.91	\$1,480.85	\$1,259.47	\$2,108.11
Oscar Classic Gold EPO 1K	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$1,000/\$2,000, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$50/\$100	\$700.89	\$1,396.84	\$1,188.05	\$1,988.39
Oscar Simple Gold EPO	PCP/Specialist: \$10/\$50 Deductible, Coinsurance: \$4,000/\$8,000, n/a Max OOP: \$4,000/\$8,000 Rx: \$10/\$50/Deductible	\$684.11	\$1,363.26	\$1,159.52	\$1,940.55
Oxford Liberty Gold EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$1,000/\$2,000, 0% Max OOP: \$4,000/\$8,000 Rx: \$15/\$35/\$75 after \$100/member Rx deductible (n/a Tier 1)	\$852.92	\$1,700.88	\$1,446.49	\$2,421.65
Oxford Liberty Advantage Gold EPO 25/45**	PCP/Specialist: \$25/\$45 Referral Required Deductible, Coinsurance: \$1,500/\$3,000, 20% Max OOP: \$6,000/\$12,000 Rx: \$5/\$45/\$75 after \$150/member Rx deductible (n/a Tier 1)	\$812.30	\$1,619.66	\$1,377.45	\$2,305.91
Oxford Metro Gold EPO 25/40 NG	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$65/\$90 after \$100/member Rx deductible (n/a Tier 1)	\$751.15	\$1,497.35	\$1,273.49	\$2,131.62
Oxford Metro Gold EPO 25/40**	PCP/Specialist: \$25/\$40 Referral Required Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,500/\$11,000 Rx: \$10/\$65/50%, max \$800 per script	\$710.00	\$1,415.05	\$1,203.53	\$2,014.34

Silver	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Silver EPO 3K	PCP/Specialist: \$25/\$75 Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,350/\$14,700 Rx: \$20/\$50/\$100	\$618.18	\$1,231.43	\$1,047.45	\$1,752.68
Oscar Classic Silver EPO 4.5K	PCP/Specialist: \$25/\$75 Deductible, Coinsurance: \$4,500/\$9,000, 50% Max OOP: \$7,350/\$14,700 Rx: \$10/D&C/D&C	\$561.93	\$1,118.90	\$951.82	\$1,592.34
Oscar Simple Silver EPO	PCP/Specialist: \$10/\$50 Deductible, Coinsurance: \$7,000/\$14,000, n/a Max OOP: \$7,000/\$14,000 Rx: \$10/Deductible/Deductible	\$592.63	\$1,180.31	\$1,004.01	\$1,679.84
Oxford Liberty Advantage Silver EPO 30/70**	PCP/Specialist: \$30/\$70 Referral Required Deductible, Coinsurance: \$4,000/\$8,000, 40% Max OOP: \$7,350/\$14,700 Rx: \$15/\$50/\$90 after \$150/member Rx deductible (n/a Tier 1)	\$675.54	\$1,346.12	\$1,144.95	\$1,916.11
Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$15/\$45/\$75 after \$200/member Rx deductible (n/a Tier 1)	\$736.88	\$1,468.81	\$1,249.23	\$2,090.95
Oxford Liberty Prim Adv Silver EPO 2K	PCP/Specialist: \$25/\$50 after deductible (n/a PCP) Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$6,000/\$12,000 Rx: \$15/\$35/\$75 after deductible (n/a Tier 1)	\$705.70	\$1,406.46	\$1,196.23	\$2,002.09
Oxford Metro Silver EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$10/\$65/50%, max \$800 per script	\$609.56	\$1,214.18	\$1,032.80	\$1,728.10
Bronze	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Bronze EPO	PCP/Specialist: Deductible then 50% coinsurance Deductible, Coinsurance: \$4,000/\$8,000, 50% Max OOP: \$7,350/\$14,700 Rx: Deductible then \$20/\$50/\$100	\$501.35	\$997.75	\$848.83	\$1,419.69
Oscar Simple Bronze EPO	PCP/Specialist: Covered in full after deductible Deductible, Coinsurance: \$7,350/\$14,700, n/a Max OOP: \$7,350/\$14,700 Rx: Deductible/Deductible/Deductible	\$488.85	\$972.73	\$827.57	\$1,384.05
Oxford Liberty Bronze EPO HSA 70%	PCP/Specialist: \$25/\$75 after deductible Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then 30%/30%/30%	\$642.91	\$1,280.87	\$1,089.47	\$1,823.13
Oxford Metro Bronze EPO HSA 100%**	PCP/Specialist: Ded then 0% coins, Referral Required Deductible, Coinsurance: \$6,550/\$13,100, 0% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then \$0/\$0/\$0	\$513.81	\$1,022.68	\$870.02	\$1,455.21

Carrier rates are subject to NYS Department of Financial Services approval and final verification at enrollment. Max OOP: \$6,550/\$13,100, 0%.

All plans above include \$4.95 for HealthPass Program Benefits (non-carrier/agent services) and a 2.9% bill Rx: Deductible then 30%/30%/30%.

Domestic Partner (DP) coverage is available with all carriers. Rates for DP will be the same as rates for Employee/Spouse and Family.

* These are benefit highlights only. Please refer to the official SBC for summary of benefits at www.healthpass.com/forms.

** Gated plan which requires the selection of a Primary Care Physician (PCP) and referrals to see specialists.



Rates for Effective Date - 1/1/2018 - 2/1/2018 - 3/1/2018
Four Tier - Ulster, Sullivan, Putnam, Dutchess & Orange

Platinum	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Advantage Platinum EPO 15/35**	PCP/Specialist: \$15/\$35 Referral Required Deductible, Coinsurance: \$250/\$500, 10% Max OOP: \$3,000/\$6,000 Rx: \$5/\$30/\$60 after \$150/member Rx deductible (n/a Tier 1)	\$1,085.23	\$2,165.49	\$1,841.42	\$3,083.73
Gold	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Gold EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$1,000/\$2,000, 0% Max OOP: \$4,000/\$8,000 Rx: \$15/\$35/\$75 after \$100/member Rx deductible (n/a Tier 1)	\$938.64	\$1,872.33	\$1,592.22	\$2,665.96
Oxford Liberty Advantage Gold EPO 25/45**	PCP/Specialist: \$25/\$45 Referral Required Deductible, Coinsurance: \$1,500/\$3,000, 20% Max OOP: \$6,000/\$12,000 Rx: \$5/\$45/\$75 after \$150/member Rx deductible (n/a Tier 1)	\$893.93	\$1,782.92	\$1,516.22	\$2,538.55
Oxford Metro Gold EPO 25/40 NG	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$65/\$90 after \$100/member Rx deductible (n/a Tier 1)	\$826.60	\$1,648.23	\$1,401.75	\$2,346.64
Oxford Metro Gold EPO 25/40**	PCP/Specialist: \$25/\$40 Referral Required Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,500/\$11,000 Rx: \$10/\$65/50%, max \$800 per script	\$781.29	\$1,557.62	\$1,324.72	\$2,217.51
Silver	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Advantage Silver EPO 30/70**	PCP/Specialist: \$30/\$70 Referral Required Deductible, Coinsurance: \$4,000/\$8,000, 40% Max OOP: \$7,350/\$14,700 Rx: \$15/\$50/\$90 after \$150/member Rx deductible (n/a Tier 1)	\$743.33	\$1,481.72	\$1,260.21	\$2,109.35
Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$15/\$45/\$75 after \$200/member Rx deductible (n/a Tier 1)	\$810.87	\$1,616.80	\$1,375.02	\$2,301.83
Oxford Liberty Prim Adv Silver EPO 2K	PCP/Specialist: \$25/\$50 after deductible (n/a PCP) Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$6,000/\$12,000 Rx: \$15/\$35/\$75 after deductible (n/a Tier 1)	\$776.55	\$1,548.15	\$1,316.67	\$2,204.01
Oxford Metro Silver EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$10/\$65/50%, max \$800 per script	\$670.70	\$1,336.45	\$1,136.73	\$1,902.33
Bronze	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Bronze EPO HSA 70%	PCP/Specialist: \$25/\$75 after deductible Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then 30%/30%/30%	\$707.41	\$1,409.87	\$1,199.14	\$2,006.96
Oxford Metro Bronze EPO HSA 100%**	PCP/Specialist: Ded then 0% coins, Referral Required Deductible, Coinsurance: \$6,550/\$13,100, 0% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then \$0/\$0/\$0	\$565.26	\$1,125.58	\$957.49	\$1,601.86

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** Gated plan which requires the selection of a Primary Care Physician (PCP) and referrals to see specialists.



Rates for Effective Date - 4/1/2018 - 5/1/2018 - 6/1/2018

Four Tier - Westchester

Platinum	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Platinum EPO 2K	PCP/Specialist: \$10/\$25 Deductible, Coinsurance: \$0, 0% Max OOP: \$2,000/\$4,000 Rx: \$10/\$30/\$75	\$845.93	\$1,686.90	\$1,434.61	\$2,401.74
Oscar Classic Platinum EPO 3K	PCP/Specialist: \$10/\$25 Deductible, Coinsurance: \$0, 0% Max OOP: \$3,000/\$6,000 Rx: \$10/\$30/\$75	\$840.00	\$1,675.05	\$1,424.54	\$2,384.84
Oxford Liberty Advantage Platinum EPO 15/35**	PCP/Specialist: \$15/\$35 Referral Required Deductible, Coinsurance: \$250/\$500, 10% Max OOP: \$3,000/\$6,000 Rx: \$5/\$30/\$60 after \$150/member Rx deductible (n/a Tier 1)	\$1,008.62	\$2,012.29	\$1,711.19	\$2,865.41
Gold	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Gold EPO	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$0, 0% Max OOP: \$5,000/\$10,000 Rx: \$10/\$50/\$100	\$757.66	\$1,510.38	\$1,284.56	\$2,150.18
Oscar Classic Gold EPO 1K	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$1,000/\$2,000, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$50/\$100	\$714.82	\$1,424.67	\$1,211.72	\$2,028.06
Oscar Simple Gold EPO	PCP/Specialist: \$10/\$50 Deductible, Coinsurance: \$4,000/\$8,000, n/a Max OOP: \$4,000/\$8,000 Rx: \$10/\$50/Deductible	\$697.69	\$1,390.43	\$1,182.61	\$1,979.26
Oxford Liberty Gold EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$1,000/\$2,000, 0% Max OOP: \$4,000/\$8,000 Rx: \$15/\$35/\$75 after \$100/member Rx deductible (n/a Tier 1)	\$872.44	\$1,739.93	\$1,479.68	\$2,477.30
Oxford Liberty Advantage Gold EPO 25/45**	PCP/Specialist: \$25/\$45 Referral Required Deductible, Coinsurance: \$1,500/\$3,000, 20% Max OOP: \$6,000/\$12,000 Rx: \$5/\$45/\$75 after \$150/member Rx deductible (n/a Tier 1)	\$830.90	\$1,656.84	\$1,409.06	\$2,358.91
Oxford Metro Gold EPO 25/40 NG	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$65/\$90 after \$100/member Rx deductible (n/a Tier 1)	\$768.33	\$1,531.72	\$1,302.70	\$2,180.60
Oxford Metro Gold EPO 25/40**	PCP/Specialist: \$25/\$40 Referral Required Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,500/\$11,000 Rx: \$10/\$65/50%, max \$800 per script	\$726.24	\$1,447.53	\$1,231.14	\$2,060.61

Silver	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Silver EPO 3K	PCP/Specialist: \$25/\$75 Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,350/\$14,700 Rx: \$20/\$50/\$100	\$630.45	\$1,255.95	\$1,068.30	\$1,787.63
Oscar Classic Silver EPO 4.5K	PCP/Specialist: \$25/\$75 Deductible, Coinsurance: \$4,500/\$9,000, 50% Max OOP: \$7,350/\$14,700 Rx: \$10/D&C/D&C	\$573.07	\$1,141.19	\$970.75	\$1,624.09
Oscar Simple Silver EPO	PCP/Specialist: \$10/\$50 Deductible, Coinsurance: \$7,000/\$14,000, n/a Max OOP: \$7,000/\$14,000 Rx: \$10/Deductible/Deductible	\$604.38	\$1,203.83	\$1,023.99	\$1,713.35
Oxford Liberty Advantage Silver EPO 30/70**	PCP/Specialist: \$30/\$70 Referral Required Deductible, Coinsurance: \$4,000/\$8,000, 40% Max OOP: \$7,350/\$14,700 Rx: \$15/\$50/\$90 after \$150/member Rx deductible (n/a Tier 1)	\$690.97	\$1,377.00	\$1,171.19	\$1,960.11
Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$15/\$45/\$75 after \$200/member Rx deductible (n/a Tier 1)	\$753.72	\$1,502.51	\$1,277.87	\$2,138.96
Oxford Liberty Prim Adv Silver EPO 2K	PCP/Specialist: \$25/\$50 after deductible (n/a PCP) Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$6,000/\$12,000 Rx: \$15/\$35/\$75 after deductible (n/a Tier 1)	\$721.84	\$1,438.73	\$1,223.67	\$2,048.09
Oxford Metro Silver EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$10/\$65/50%, max \$800 per script	\$623.49	\$1,242.03	\$1,056.47	\$1,767.80
Bronze	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oscar Classic Bronze EPO	PCP/Specialist: Deductible then 50% coinsurance Deductible, Coinsurance: \$4,000/\$8,000, 50% Max OOP: \$7,350/\$14,700 Rx: Deductible then \$20/\$50/\$100	\$511.28	\$1,017.61	\$865.71	\$1,447.99
Oscar Simple Bronze EPO	PCP/Specialist: Covered in full after deductible Deductible, Coinsurance: \$7,350/\$14,700, n/a Max OOP: \$7,350/\$14,700 Rx: Deductible/Deductible/Deductible	\$498.52	\$992.09	\$844.02	\$1,411.63
Oxford Liberty Bronze EPO HSA 70%	PCP/Specialist: \$25/\$75 after deductible Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then 30%/30%/30%	\$657.59	\$1,310.25	\$1,114.45	\$1,865.00
Oxford Metro Bronze EPO HSA 100%**	PCP/Specialist: Ded then 0% coins, Referral Required Deductible, Coinsurance: \$6,550/\$13,100, 0% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then \$0/\$0/\$0	\$525.53	\$1,046.12	\$889.94	\$1,488.61

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All plans above include \$4.95 for HealthPass Program Benefits (non-carrier/agent services) and a 2.9% billing and administrative fee.
Domestic Partner (DP) coverage is available with all carriers. Rates for DP will be the same as rates for Employee/Spouse and Family.
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** Gated plan which requires the selection of a Primary Care Physician (PCP) and referrals to see specialists.

1/12/2018



Rates for Effective Date - 4/1/2018 - 5/1/2018 - 6/1/2018

Four Tier - Ulster, sullivan, Putnam, Dutchess & Orange

Platinum	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Advantage Platinum EPO 15/35**	PCP/Specialist: \$15/\$35 Referral Required Deductible, Coinsurance: \$250/\$500, 10% Max OOP: \$3,000/\$6,000 Rx: \$5/\$30/\$60 after \$150/member Rx deductible (n/a Tier 1)	\$1,110.10	\$2,215.24	\$1,883.70	\$3,154.61
Gold	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Gold EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$1,000/\$2,000, 0% Max OOP: \$4,000/\$8,000 Rx: \$15/\$35/\$75 after \$100/member Rx deductible (n/a Tier 1)	\$960.14	\$1,915.34	\$1,628.78	\$2,727.25
Oxford Liberty Advantage Gold EPO 25/45**	PCP/Specialist: \$25/\$45 Referral Required Deductible, Coinsurance: \$1,500/\$3,000, 20% Max OOP: \$6,000/\$12,000 Rx: \$5/\$45/\$75 after \$150/member Rx deductible (n/a Tier 1)	\$914.40	\$1,823.85	\$1,551.01	\$2,596.88
Oxford Metro Gold EPO 25/40 NG	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,000/\$10,000 Rx: \$10/\$65/\$90 after \$100/member Rx deductible (n/a Tier 1)	\$845.51	\$1,686.07	\$1,433.90	\$2,400.54
Oxford Metro Gold EPO 25/40**	PCP/Specialist: \$25/\$40 Referral Required Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$5,500/\$11,000 Rx: \$10/\$65/50%, max \$800 per script	\$799.16	\$1,593.38	\$1,355.11	\$2,268.46
Silver	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Advantage Silver EPO 30/70**	PCP/Specialist: \$30/\$70 Referral Required Deductible, Coinsurance: \$4,000/\$8,000, 40% Max OOP: \$7,350/\$14,700 Rx: \$15/\$50/\$90 after \$150/member Rx deductible (n/a Tier 1)	\$760.33	\$1,515.72	\$1,289.10	\$2,157.79
Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$15/\$45/\$75 after \$200/member Rx deductible (n/a Tier 1)	\$829.43	\$1,653.91	\$1,406.57	\$2,354.72
Oxford Liberty Prim Adv Silver EPO 2K	PCP/Specialist: \$25/\$50 after deductible (n/a PCP) Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$6,000/\$12,000 Rx: \$15/\$35/\$75 after deductible (n/a Tier 1)	\$794.32	\$1,583.68	\$1,346.87	\$2,254.64
Oxford Metro Silver EPO 30/60**	PCP/Specialist: \$30/\$60 Referral Required Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$7,150/\$14,300 Rx: \$10/\$65/50%, max \$800 per script	\$686.02	\$1,367.10	\$1,162.78	\$1,946.01
Bronze	BENEFIT HIGHLIGHTS* IN=In Network; OON=Out of Network; OOP=Out of Pocket	Employee	Emp/Spouse	Emp/Child(ren)	Family
Oxford Liberty Bronze EPO HSA 70%	PCP/Specialist: \$25/\$75 after deductible Deductible, Coinsurance: \$3,000/\$6,000, 30% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then 30%/30%/30%	\$723.58	\$1,442.21	\$1,226.62	\$2,053.04
Oxford Metro Bronze EPO HSA 100%**	PCP/Specialist: Ded then 0% coins, Referral Required Deductible, Coinsurance: \$6,550/\$13,100, 0% Max OOP: \$6,550/\$13,100, 0% Rx: Deductible then \$0/\$0/\$0	\$578.16	\$1,151.38	\$979.42	\$1,638.62

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