

Employee – July 1, 2020 Health Plan Rates Comparison Chart

The new 2020 rates outlined below will take effect on July 1, 2020. Changes on your premium deductions (if applicable) will be reflected in your July 16, 2020 paycheck. For employees who are paid on a lag basis, premium deductions (if applicable) will be reflected on July 30, 2020 paycheck.

(NOTE: GHI-CBP Rates are subject to change)

	Jul-20			Jul-19				
	Individual	Family		Individual	Family		Individual	Family
Aetna EPO	Aetna EPO	Aetna EPO		Aetna EPO	Aetna EPO			
Basic	\$169.80	\$711.32		\$128.07	\$579.31	Increased	\$41.73	\$132.01
Prescription Drugs	\$844.95	\$2,389.80		\$759.82	\$2149.03	Increased	\$85.13	\$240.77
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$1014.75	\$3,101.12		\$887.89	\$2,728.34	Increased	\$126.86	\$372.78
CIGNA	CIGNA	CIGNA		CIGNA	CIGNA			
Basic	\$475.68	\$1278.67		\$376.38	\$1020.35	Increased	\$99.30	\$258.32
Prescription Drugs	\$142.17	\$430.19		\$137.20	\$409.91	Increased	\$4.97	\$20.28
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$617.85	\$1,708.86		\$513.58	\$1,430.26	Increased	\$104.27	\$278.60
DC37 Med Team	DC37 Med Team	DC37 Med Team		DC37 Med Team	DC37 Med Team			
Basic	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Prescription Drugs	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Empire Blue Access Gated EPO	Empire Blue Access Gated EPO	Empire Blue Access Gated EPO		Empire Blue Access Gated EPO	Empire Blue Access Gated EPO			
Basic	\$147.09	\$435.88		\$133.95	\$400.17	Increased	\$13.14	\$35.71
Prescription Drugs	\$124.84	\$306.07		\$119.98	\$294.14	Increased	\$4.86	\$11.93
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$271.93	\$741.95		\$253.93	\$694.31	Increased	\$18.00	\$47.64
Empire EPO	Empire EPO	Empire EPO		Empire EPO	Empire EPO			
Basic	\$493.66	\$1252.31		\$394.85	\$1004.68	Increased	\$98.81	\$247.63
Prescription Drugs	\$124.84	\$306.07		\$119.98	\$294.14	Increased	\$4.86	\$11.93
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$618.50	\$1558.38		\$514.83	\$1298.82	Increased	\$103.67	\$259.56
GHI-CBP/EBCBS	GHI-CBP/EBCBS	GHI-CBP/EBCBS		GHI-CBP/EBCBS	GHI-CBP/EBCBS			
Basic	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Prescription Drugs	\$36.45	\$64.79		\$35.48	\$63.01	Increased	\$0.97	\$1.78
Rider Other*	\$2.17	\$5.49		\$2.12	\$5.35	Increased	\$0.05	\$0.14
Total (Basic + Rider)	\$38.62	\$70.28		\$37.60	\$68.36	Increased	\$1.02	\$1.92
GHI HMO	GHI HMO	GHI HMO		GHI HMO	GHI HMO			
Basic	\$101.30	\$293.51		\$91.97	\$269.00	Increased	\$9.33	\$24.51
Prescription Drugs	\$185.70	\$473.51		\$169.03	\$431.00	Increased	\$16.67	\$42.51
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$287.00	\$767.02		\$261.00	\$700.00	Increased	\$26.00	\$67.02
HIP HMO Gold Preferred Plan (Grandfathered) - Name Changed 11/2019	HIP HMO Gold (Grandfathered)	HIP HMO Gold (Grandfathered)		HIP HMO Gold (Grandfathered)	HIP HMO Gold (Grandfathered)			
Basic	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Prescription Drugs	\$133.66	\$327.48		\$121.68	\$298.12	Increased	\$11.98	\$29.36
Rider Other*	\$3.94	\$9.65		\$3.81	\$9.34	Increased	\$0.13	\$0.31
Total (Basic + Rider)	\$137.60	\$337.13		\$125.49	\$307.46	Increased	\$12.11	\$29.67
HIP HMO Gold Preferred Plan (Standard) - Name Changed 11/2019	HIP HMO Gold (Standard)	HIP HMO Gold (Standard)		HIP HMO Gold (Standard)	HIP HMO Gold (Standard)			
Basic	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Prescription Drugs	\$60.86	\$111.58		\$55.41	\$101.58	Increased	\$5.45	\$10.00
Rider Other*	\$3.94	\$9.65		\$3.81	\$9.34	Increased	\$0.13	\$0.31
Total (Basic + Rider)	\$64.80	\$121.23		\$59.22	\$110.92	Increased	\$5.58	\$10.31
HIP POS	HIP POS	HIP POS		HIP POS	HIP POS			
Basic	\$562.70	\$1,378.63		\$489.77	\$1199.94	Increased	\$72.93	\$178.69
Prescription Drugs	\$155.73	\$381.54		\$141.46	\$346.58	Increased	\$14.27	\$34.96
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$718.43	\$1,760.17		\$631.23	\$1,546.52	Increased	\$87.20	\$213.65
MetroPlus Gold	MetroPlus Gold	MetroPlus Gold		MetroPlus Gold	MetroPlus Gold			
Basic	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Prescription Drugs	\$106.14	\$239.36		\$104.81	\$236.34	Increased	\$1.33	\$3.02
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$106.14	\$239.36		\$104.81	\$236.34	Increased	\$1.33	\$3.02
Vytra	Vytra	Vytra		Vytra	Vytra			
Basic	\$80.23	\$276.21		\$71.61	\$252.13	Increased	\$8.62	\$24.08
Prescription Drugs	\$157.36	\$409.27		\$146.24	\$380.45	Increased	\$11.12	\$28.82
Rider Other*	\$0.00	\$0.00		\$0.00	\$0.00	No Change	\$0.00	\$0.00
Total (Basic + Rider)	\$237.59	\$685.48		\$217.85	\$632.58	Increased	\$19.74	\$52.90

*For GHI-CBP/EBCBS, "Rider Other" is for enhanced major medical coverage.

For HIP HMO, "Rider Other" is for private duty nursing & durable medical equipment.