



EMBLEMHEALTH EPO SELECT 35/55 PLAN

For Small Employer Groups: 2nd Quarter 2014 Premium Rates

OUR EPO SELECT 35/55 PLAN KEEPS THE CARE IN NETWORK — AND KEEPS THE COSTS DOWN

Quality Doctors and Hospitals

Access to EmblemHealth's Prime network, featuring:

- Leading physicians and other medical practitioners throughout the downstate region
- Prominent acute care hospitals including Lenox Hill Hospital, Montefiore Medical Center, North Shore-Long Island Jewish Health System, NYU Hospital Center, Staten Island University Hospital and many more.

Access to AdvantageCare Physicians, featuring:

- An alliance of established physician practices including Manhattan Physician's Group, Preferred Health Partners (Brooklyn), Queens-Long Island Medical Group and Staten Island Physician Practice

Additional EmblemHealth Benefits

- No-cost health management and prevention programs that include diabetes treatment, pregnancy management and stop-smoking initiatives
- Discounts on weight-loss programs, laser vision, acupuncture and more*
- A Nurse Advice Line available 24/7 for members to speak with a registered nurse
- Optional pediatric dental coverage is available

Online Member Convenience

Through **emblemhealth.com**, members can:

- Securely manage their health information
- Search online for doctors and office locations
- Review descriptions of their health benefits
- Order ID cards, download forms and update personal information

For more information about our full range of plan options, visit **emblemhealth.com** or call your EmblemHealth representative.

Our EPO Select 35/55 Plan features our Prime provider network, which is made up of thousands of quality primary and specialty-care doctors in the downstate region, and gives our customers access to the region's top hospitals.

For the most convenient, patient-centered coordinated care, our plans also feature access to AdvantageCare Physicians — one of the largest multispecialty physician practices in the New York metropolitan region, bringing together four well-known group practices. Most of these medical offices stay open late, provide in-office lab services, X-rays and (in some locations) on-site pharmacies. Their team-based approach focuses on the patient, delivering high-quality, better health outcomes.

* EmblemHealth cannot ensure that a particular vendor will remain in the program. These programs are not part of the EmblemHealth EPO Select 35/55 Plan and, therefore, are not underwritten by HIP Insurance Company of New York.

The following rates for the EmblemHealth EPO Select 35/55 Plan for small employer groups are effective April 1, 2014 through June 30, 2014.

Service	Limitations	EPO Select 35/55 (Silver)
In Network Only (except for emergency care)		Prime network
Coinsurance (member responsibility)	For applicable services only	30%
Annual deductible (individual/family)	Applies to hospital and medical services	\$2,000/\$4,000
Annual out-of-pocket maximum (individual/family)	Includes deductible, copays and coinsurance; does not include Gym Reimbursement	\$6,000 /\$12,000
Annual/lifetime maximum benefit		Unlimited
Preventive services (e.g., well-child care including immunizations; annual physical; mammography; prostate exam; bone density screening; colonoscopy and more)		Covered in full
Office visit copay (primary care/specialist)	Referral needed from member's PCP for specialist care	\$35/\$55 copay
Diagnostic lab and radiology		\$55 copay
Inpatient hospital admission	365 days per calendar year	30% coinsurance after deductible
Emergency room facility	Copay waived if admitted; covered in and out of network	\$200 copay
Emergency ambulance		\$150 copay
Urgent care facility	Note: in-network only	\$60 copay
Ambulatory surgery facility		30% coinsurance after deductible
Pediatric vision exams, lenses and frames	One exam per 12-month period; one set of lenses and frames, or contacts, per 12-month period; coverage up to age 19 end of month	\$35 copay per exam; 30% coinsurance for lenses/frames/contacts
Durable medical equipment (DME)	Standard equipment only; excludes orthotics	30% coinsurance
Gym Reimbursement	Incentive only available to subscriber and subscriber's covered spouse. Incentive is not applied to out-of-pocket maximum or deductible.	Subscriber reimbursed up to \$200 (covered spouse reimbursed up to \$100) per six-month period for completion of 50 exercise facility visits in each six-month period.
Prescription Drugs — Retail	30-day supply	\$100 deductible per person must be met by either Retail or Mail Order, before the following copay applies (Tier 1/Tier 2/Tier 3): \$15 / \$35 / \$75
Prescription Drugs — Mail Order	90-day supply	\$100 deductible per person must be met by either Retail or Mail Order, before the following copay applies (Tier 1/Tier 2/Tier 3): \$37.50 / \$87.50 / \$187.50

An extended dependent coverage rider is available for purchase, extending the age limit to 29 for all eligible dependents.

2nd Quarter Rates*, valid from April 1, 2014 through June 30, 2014

For New York City, Downstate and Mid-Hudson	Rate Tier	EPO Select 35/55 (Silver)
The rates listed at right apply to Bronx, Kings, New York, Queens, Richmond, Westchester, Rockland and Orange counties.	Employee	\$554.30
	Employee/spouse	\$1,108.60
	Employee/children	\$942.31
	Family	\$1,579.74

For Long Island	Rate Tier	EPO Select 35/55 (Silver)
The rates listed at right apply to Nassau and Suffolk counties.	Employee	\$568.15
	Employee/spouse	\$1,136.29
	Employee/children	\$965.85
	Family	\$1,619.22

***The listed rates do not include the additional monthly rate for the federally mandated Pediatric Dental benefit.**

All prescription drug program options include voluntary home delivery, clinical prior authorization and specialty pharmacy programs.

Certain services must be approved in advance by EmblemHealth.

The benefits described here are only brief highlights of the covered services and benefits available. Some covered services and/or benefits may have calendar year limits and/or maximums. The terms, limitations, conditions and exclusions of the insurance contract and certificate will govern.

The EmblemHealth EPO Select 35/55 Plan is underwritten by HIP Insurance Company of New York, and provides benefits only in network. Out-of-network services are not covered except for emergency hospital care. Please refer to HIP policy form number 151-23-SGOFHIXCERT (04/13) et al.