



Benefits Proposal


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 New York County, NY 10001
 Prepared By: Millenium Medical Solutions -

Health Plan Comparison Report (4L)

Effective Date: 01/01/2018 Prepared On: 09/29/2017
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	HealthFirst Platinum Pro EPO*		HealthFirst Gold Pro EPO*		HealthFirst Silver Pro EPO*		HealthFirst Bronze Pro EPO (HSA Compatible)*	
	In-Network	Out-Network	In-Network	Out-Network	In-Network	Out-Network	In-Network	Out-Network
Prescription Drugs								
Drug Card	10/30/60		10/50/85		20/60/110		20%/20%/20% IntDed	
Cost Share Information								
Individual/Family Deductible	N/A		N/A		\$2,600/\$5,200		\$5,000/\$10,000	
Individual/Family OOP Limit	\$2,000/\$4,000		\$5,000/\$10,000 (incl ded)		\$7,300/\$14,600 (incl ded)		\$6,550/\$13,100 (incl ded)	
Co-Insurance	10%		15%		30%		20%	
Office Visits								
Primary Care	\$20		\$25		\$35 ded waived		20% after ded	
Specialist	\$35		\$40		\$70 ded waived		20% after ded	
Inpatient Services								
Inpatient Hospital	\$500/admit		\$500/day; \$1,500 max/admit		30% after ded		20% after ded	
Mental Health Inpatient	\$500/admit		\$500/day; \$1,500 max/admit		30% after ded		20% after ded	
Outpatient Services								
Outpatient Facility	\$200		\$300		30% after ded		20% after ded	
Lab/X-Ray	PCP-\$20; SP-\$35		PCP-\$25; SP-\$40		PCP-\$35 ded waived; SP-\$70 ded waived		20% after ded	
Mental Health Outpatient	\$20		\$25		\$35 ded waived		20% after ded	
Emergency Care								
Emergency Room	\$250 (waived if admitted)		\$350 (waived if admitted)		\$600 (waived if admitted) after ded		20% after ded	
Urgent Care	\$50		\$60		\$70 ded waived		20% after ded	
Single	0 x	\$842.93	0 x	\$717.27	0 x	\$616.33	0 x	\$515.29
EE with Spouse	0 x	\$1,685.86	0 x	\$1,434.54	0 x	\$1,232.66	0 x	\$1,030.58
EE with Child(ren)	0 x	\$1,432.98	0 x	\$1,219.36	0 x	\$1,047.76	0 x	\$875.99
Family	0 x	\$2,402.35	0 x	\$2,044.22	0 x	\$1,756.54	0 x	\$1,468.58
Monthly Cost	0	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
Annual Cost		\$0.00		\$0.00		\$0.00		\$0.00

The rates and benefits in this report are for discussion and estimation purposes only and are not valid without approval from the insurance carriers. Final rates must be based on insurance carrier confirmation and final enrollment. Rx Legend: Generic/Preferred Brand/Non-Preferred Brand/Specialty/Deductible