

HEALTH REPUBLIC INDIVIDUAL PLANS

2015 RATES FOR LONG ISLAND, NEW YORK CITY, WESTCHESTER & ROCKLAND

	PRIMARY SELECT PLANS		ESSENTIAL CARE		
	Gold EPO	Silver EPO	Gold EPO	Silver EPO	Bronze EPO
IN-NETWORK					
Gatekeeper Required	No	No	No	No	No
Deductible - Single	\$250	\$2,000	\$600	\$2,000	\$3,000
Deductible - Family	\$500	\$4,000	\$1,200	\$4,000	\$6,000
Coinsurance	80%	80%	80%	80%	50%
Out-of-Pocket Maximum - Single	\$3,500	\$6,350	\$4,000	\$5,500	\$6,350
Out-of-Pocket Maximum - Family	\$7,000	\$12,700	\$8,000	\$11,000	\$12,700
Designated Primary Office Visit	\$0	\$0	\$25 after ded.	\$30 after ded.	Ded. + coinsurance
Other Primary Office Visit	\$25	\$30	\$30 after ded.	\$30 after ded.	Ded. + coinsurance
Physical Therapy Office Visit	\$30	\$30	\$30 after ded.	\$30 after ded.	Ded. + coinsurance
Specialist Office Visit Copay	\$75	\$75	\$40 after ded.	\$50 after ded.	Ded. + coinsurance
Inpatient Hospital Copay	\$100; then Ded. + coinsurance	\$100; then Ded. + coinsurance	\$1,000 hosp. and \$100 physician after ded.	\$1,500 hosp. and \$100 physician after ded.	Ded. + coinsurance
Outpatient Hospital Copay	\$100; then Ded. + coinsurance	\$100; then Ded. + coinsurance	\$100 hosp. and \$100 physician after ded.	\$100 hosp. and \$100 physician after ded.	Ded. + coinsurance
Emergency Room Copay	\$250 after ded.	\$250 after ded.	\$150 after ded.	\$150 after ded.	Ded. + coinsurance
Diagnostic Testing	\$75	\$75	\$40 after ded.	\$50 after ded.	Ded. + coinsurance
PRESCRIPTIONS					
Tier I Drugs	\$0	\$0	\$10 after ded.	\$10 after ded.	Ded. + coinsurance
Tier II Drugs	\$35 after ded.	\$35 after ded.	\$35 after ded.	\$35 after ded.	Ded. + coinsurance
Tier III Drugs	\$70 after ded.	\$70 after ded.	\$70 after ded.	\$70 after ded.	Ded. + coinsurance
RATE EXHIBIT					
Single	\$500.49	\$428.36	\$500.87	\$428.64	\$350.66
Employee + Spouse	\$1,000.95	\$856.70	\$1,001.73	\$857.26	\$701.29
Employee + Children	\$850.81	\$728.19	\$851.47	\$728.67	\$596.10
Family	\$1,426.36	\$1,220.80	\$1,427.46	\$1,221.60	\$999.34

Rates are subject to final NYS Department of Insurance approval. This is a brief summary of benefits and should only be used as a guide. You must refer to Health Republic's subscriber agreement for a complete description of requirements for coverage, covered services, limitations and exclusions. Plans do not include coverage for pediatric dental.

Health Republic does have 2 platinum plans available. However, as of 1/1/2015, they no longer pay commissions on those plans. We have made the decision not to be involved in the sale of plans that do not compensate brokers. Thank you for your understanding.

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