

HIP (2009 NEW BUSINESS RATES)

Through the Long Island Association – Enterprise Membership
New York Self-Employed Rates Effective 4/1/2009 to 03/31/2010

PLAN I: HIP PRIME HMO 30/50/1,000

Primary/Specialist office copay	\$30/\$50	Hosp. admission	\$1,000
Prescriptions (gen/brand/non-form)	\$20/\$30/\$50 after \$300 ded.	ER/Outpatient surg.	\$150
Vision	\$45 copay every 24 months for lenses		
Single	Employee + 1 Dependent	Employee + 2 or More Dependents	
\$516.59	\$986.75	\$1,563.34	

PLAN II: HIP SELECT PPO (30/50) with 20/30/50/300 Rx

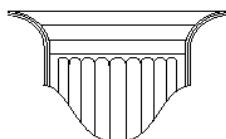
	<u>IN-NETWORK</u>		<u>OUT-OF-NETWORK</u>
Deductible	\$2,000		\$4,000
Coinsurance	80%; \$5,000 coinsurance max		60%; \$10,000 coinsurance max
Primary/Specialist office copay	\$30/\$50		Deductible + coinsurance
Hosp. admission; In & Outpatient surg	Deductible + coinsurance		Deductible + coinsurance
Emergency room	\$150 (waived if admitted)		\$150 (waived if admitted)
Prescriptions (gen/brand/non-form.)	\$20/\$30/\$50 after \$300 deductible		
Single	Employee + 1 Dependent	Employee + 2 or More Dependents	
\$419.49	\$795.10	\$1,258.68	

PLAN III: HIP SELECT PPO (30/50) with 10 generic Rx

	<u>IN-NETWORK</u>		<u>OUT-OF-NETWORK</u>
Deductible	\$2,000		\$4,000
Coinsurance	80%; \$5,000 coinsurance max		60%; \$10,000 coinsurance max
Primary/Specialist office copay	\$30/\$50		Deductible + coinsurance
Hosp. admission; In & Outpatient surg	Deductible + coinsurance		Deductible + coinsurance
Emergency room	\$150 (waived if admitted)		\$150 (waived if admitted)
Prescriptions (gen/brand/non-form.)	\$10 generic meds after \$100 deductible; Brand name drugs NOT COVERED		
Single	Employee + 1 Dependent	Employee + 2 or More Dependents	
\$380.01	\$723.01	\$1143.90	

Rates are for illustrative purposes only and are subject to home office and NYS Insurance Department approval. Please see association and insurance company literature for complete information. You must refer to the insurer's subscriber agreement for a complete description of requirements for coverage, covered services, limitations and exclusions.

- There is an annual membership fee of \$35
- Above plans are valid for sole proprietors.



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