

New York Liberty Plans at a Glance

Small Group Off-Exchange with Premiums: Mid-Hudson Region



Plan Feature	Platinum 1 Embedded	Platinum 3 Embedded	Platinum 4 Embedded	Platinum 5 Embedded	Gold 1 Embedded	Gold 2 HDHP Agg Emb	Gold 3 Embedded	Gold 4 Embedded	Gold 6 Embedded	NEW Gold 7 HDHP Agg Emb	Gold PPO In Net. Emb.	Gold PPO Out/Net. Agg.	Silver 1 Embedded	NEW Silver 2 Embedded	Silver 3 HDHP Agg Emb	Silver 4 HRA Embedded	Silver 7 Embedded	Silver 8 HDHP Embedded	NEW Silver 9 Embedded	Silver PPO HDHP In Net. II	Out/Net. Agg.	Bronze 1 Embedded	Bronze 2 Embedded	Bronze 3 HDHP Embedded	Bronze 5 HDHP Embedded	Bronze 6 HDHP Embedded	NEW Bronze 7 HDHP Embedded	
Plan Deductible	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0	\$850/\$1,700	\$1,600/\$3,200 Agg	\$800/\$1,600	\$0/\$0	\$350/\$700	\$1,300/\$2,600 Agg	\$700/\$1,400	\$4,000/\$8,000	\$2,100/\$4,200	\$3,400/\$6,800	\$2,200/\$4,400 Agg	\$2,500/\$5,000	\$3,000/\$6,000	\$3,700/\$7,400	\$4,000/\$8,000	\$1,850/\$3,700 Agg	\$4,000/\$8,000	\$3,900/\$7,800	\$5,000/\$10,000	\$5,900/\$11,800	\$5,350/\$10,700	\$6,550/\$13,100	\$4,800/\$9,600	
Out-of-Pocket Maximum	\$6,600	\$8,800	\$3,000	\$13,200	\$6,550/\$13,100	\$6,550/\$13,100 Emb	\$4,400/\$8,800	\$6,750/\$13,500	\$6,550/\$13,100	\$2,600/\$5,200 Emb	\$7,150/\$14,300	\$8,000/\$16,000	\$6,550/\$13,100	\$7,150/\$14,300	\$4,900/\$9,800 Emb	\$6,350/\$12,700	\$7,150/\$14,300	\$5,900/\$11,800	\$7,150/\$14,300	\$6,550/\$13,100 Emb	\$8,000/\$16,000	\$7,150/\$14,300	\$7,150/\$14,300	\$6,550/\$13,100	\$6,550/\$13,100	\$6,550/\$13,100	\$6,550/\$13,100	
Medical																												
Preventive Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	20%*	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	40%*	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care	3 visits at \$0, then \$5	\$30	\$40	\$15	3 visits at \$0, then \$15 NoDD	\$10*	\$10*	\$40	\$30 NoDD	15%*	\$40 NoDD	20%*	\$30 NoDD	3 visits at \$0, then \$40 NoDD	\$25*	\$20*	\$30 NoDD	\$0*	\$30 NoDD	20%*	40%*	\$35*	\$35*	\$30*	\$5*	\$0*	40%*	
Specialist Visit	\$45	\$40	\$60	\$25	\$50*	\$20*	\$40*	\$60	\$50 NoDD	15%*	\$60 NoDD	20%*	\$50*	\$70*	\$50*	\$50*	\$40*	\$0*	\$50 NoDD	20%*	40%*	\$80*	\$60*	\$50*	\$0%*	\$0*	40%*	
Hospital Facility Visit - Inpatient/Outpatient	\$300/\$100	\$150/\$100	\$500/\$250	\$550/\$300	\$500*/\$200*	\$200*/\$100*	\$800*/\$100*	\$750/\$300	\$1,000*/\$300*	15%*/15%*	\$500*/\$300*	20%*/20%*	20%*/\$300*	20%*/\$200*	\$500*/\$200*	\$800*/\$200*	\$500*/\$100*	\$0*/\$0*	20%*/20%*	20%*/20%*	40%*/40%*	50%*/\$300*	30%*/\$300*	30%*/\$100*	50%*/\$0*	50%*/\$0*	40%*/40%*	
Urgent Care	\$45	\$40	\$60	\$25	\$50 NoDD	\$20*	\$40*	\$60	\$50 NoDD	15%*	\$60*	\$60*	\$50*	\$70 NoDD	\$50*	\$50*	\$40*	\$0*	\$50 NoDD	20%*	20%*	\$80*	\$60*	\$50*	\$0%*	\$0*	40%*	
Emergency Room Visit	\$100	\$200	\$350	\$200	\$300 NoDD	\$75*	\$300*	\$500	\$100 NoDD	15%*	\$300*	\$350*	\$500 NoDD	\$300*	\$300*	\$50*	\$0*	\$150 NoDD	20%*	20%*	50%*	\$350*	\$300*	\$100*	\$0*	\$0*	40%*	
Telemedicine	\$5	\$30	\$40	\$15	\$15 NoDD	\$10*	\$10*	\$40	\$30 NoDD	15%*	\$40 NoDD	Not covered	\$30 NoDD	\$40 NoDD	\$25*	\$20*	\$30 NoDD	\$0*	\$30 NoDD	20%*	Not covered	\$35*	\$35*	\$30*	\$5*	\$0*	40%*	
Pharmacy																												
Prescription Deductible Individual/Family	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0	\$100/\$200 (name brand only)	Integrated w/ Medical	\$0/\$0	\$0/\$0	\$0/\$0	Integrated w/ Medical	\$0/\$0	Not covered	\$100/\$200 (name brand only)	Integrated w/ Medical	Integrated w/ Medical	\$0/\$0	\$0/\$0	Integrated w/ Medical	\$0/\$0	Integrated w/ Medical	Not covered	\$200/\$400	Integrated w/ Medical	Integrated w/ Medical	Integrated w/ Medical	Integrated w/ Medical	Integrated w/ Medical	
Prescription Co-payment	\$5/\$30/\$50	\$5/\$15/\$25	\$5/\$45/\$50	\$10/\$40/\$60	\$5/\$35/\$70*	\$5/\$15/\$25* (preventive drugs NoDD)	\$10/\$35/50%	\$10/\$40/\$60	\$10/\$40/\$60	\$5/\$35/\$70* (preventive drugs NoDD)	\$10/\$40/\$60	Not covered	\$8/\$35/\$70*	\$15/\$40/\$70*	\$10/\$40/\$60* (preventive drugs NoDD)	\$10/\$35/50%	\$10/\$40/\$60	\$10/\$40/\$60* (preventive drugs NoDD)	\$10/\$35/\$70	\$10/\$40/\$60* (preventive drugs NoDD)	Not covered	\$10/\$40/50%*	\$10/\$40/\$60*	\$5/\$30/50%* (preventive drugs NoDD)	\$5/\$30/50%* (preventive drugs NoDD)	\$0/\$0/\$0* (preventive drugs NoDD)	\$10/50%*/50%* (preventive drugs NoDD)	

Rates (Effective 4/1/2017 - 6/30/2017 Rates Do Not Include Pediatric Dental Coverage)

	Platinum 1	Platinum 3	Platinum 4	Platinum 5	Gold 1	Gold 2	Gold 3	Gold 4	Gold 6	NEW Gold 7	Gold PPO In Net	Gold PPO Out/Net	Silver 1	NEW Silver 2	Silver 3	Silver 4	Silver 7	Silver 8	NEW Silver 9	Silver PPO	Bronze 1	Bronze 2	Bronze 3	Bronze 5	Bronze 6	NEW Bronze 7
Single	\$873.35	\$867.83	\$866.91	\$865.08	\$744.92	\$700.86	\$731.10	\$782.92	\$778.60	\$715.54	\$770.72	\$633.88	\$578.67	\$617.40	\$605.04	\$628.11	\$591.86	\$672.59	\$643.33	\$521.82	\$496.23	\$508.23	\$510.63	\$509.83	\$501.03	
Single + Spouse	\$1,746.70	\$1,735.66	\$1,733.82	\$1,730.16	\$1,489.84	\$1,401.72	\$1,462.20	\$1,565.84	\$1,557.20	\$1,431.08	\$1,541.44	\$1,267.76	\$1,157.34	\$1,234.80	\$1,210.08	\$1,256.22	\$1,183.72	\$1,345.18	\$1,286.66	\$1,043.64	\$992.46	\$1,016.46	\$1,021.26	\$1,019.66	\$1,002.06	
Single + Child(ren)	\$1,484.70	\$1,475.31	\$1,473.75	\$1,470.64	\$1,266.36	\$1,191.46	\$1,242.87	\$1,330.96	\$1,323.62	\$1,216.42	\$1,310.22	\$1,077.60	\$983.74	\$1,049.58	\$1,028.57	\$1,067.79	\$1,006.16	\$1,143.40	\$1,093.66	\$887.09	\$843.59	\$863.99	\$868.07	\$866.71	\$851.75	
Single + Spouse + Child(ren)	\$2,489.05	\$2,473.32	\$2,470.69	\$2,465.48	\$2,123.02	\$1,997.45	\$2,083.64	\$2,231.32	\$2,219.01	\$2,039.29	\$2,196.55	\$1,806.56	\$1,649.21	\$1,759.59	\$1,724.36	\$1,790.11	\$1,686.80	\$1,916.88	\$1,833.49	\$1,487.19	\$1,414.26	\$1,448.46	\$1,455.30	\$1,453.02	\$1,427.94	

All plans include dependent care to age 26. NOTE: benefits that are listed in red represent a plan change from 2016 to 2017.

Access to our National Network

New for 2017: Telemedicine Benefit
Now you can access care anywhere, anytime with myVisitNow - 24/7 online doctor visits!

MVP WellLife Rewards

All MVP Liberty Plans include up to \$200 (per subscriber, per calendar year) for completing health-related activities, AND each plan includes a \$125 reimbursement (per subscriber, per calendar year) for kids sports, weight management, gym membership, massage therapy and tobacco cessation courses. **That's \$325!**

The Difference Between an Aggregate Plan and an Embedded Plan

Aggregate: For any policy with two or more members, the deductible and/or out-of-pocket maximum (OOPM) must be met by any one or any combination of members before the plan will make payments.

Embedded: Each member will pay towards, but never exceed, their individual deductible and/or OOPM until the larger Family deductible and/or OOPM is met. Once the Family deductible and/or OOPM has been met, the plan will begin payment of services for all members on the contract, regardless of the status of any remaining individual deductible and/or OOPM levels.

NoDD: Not subject to deductible.

Silver 4 Health Reimbursement Arrangement (HRA) comes with an Embedded HRA plan and requires an employer contribution of \$85.

†This plan features an Aggregate deductible and an Embedded out-of-pocket maximum. *Member amount after employer's contribution.

This plan overview is intended to provide a general outline of coverage. In the event of any conflict between this document and your Certificate of Coverage, Schedule and any applicable Rider(s), your Certificate of Coverage, Schedule and Rider(s) will be controlling. For plan details, call 1-800-TALK-MVP (825-5687) or visit mvphealthcare.com.

(See back for more information)

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New York Liberty Plans: Small Group Of Quality Benefits from a Name You Know and

In addition to quality coverage, MVP will continue to provide top-rated customer service

Tools to Manage Your Account

myMVP mobile app

With myMVP, you'll always have access to your important health plan information – no matter where you go. myMVP allows you to:

- View your Member ID card.
- Find a nearby doctor.
- Search your claim details and payment status.
- Access your Explanations of Benefits...right from your smartphone.



Visit the App Store or Google Play to download the myMVP app for free on your mobile device.

(MSG&DATA rates may apply.)

Wellness Benefits

All MVP Liberty Plans include WellLife Rewards (per subscriber, per calendar year) for completing a Health Risk Screening Form, completing courses online, and meeting recommended club memberships, youth sports and fitness, massage therapy and tobacco cessation courses.

Personalized guidance and support through our 24/7 Nurse Advice Line and full suite of online health services including a Personal Health Assessment and online health coaching.

Exclusive Member Discounts on a wide range of services including fitness clubs, vitamins, and acupuncture.