

# WE'RE EMPIRE. LIVING UP TO NEW YORK'S TOUGH STANDARDS — AND YOURS.

Get to know the power of a Blue Cross and Blue Shield plan.



## Increased access

- 150 acute care hospitals<sup>1</sup>
- 81,000+ doctors<sup>2</sup>
- 18 years more doctors rated "Best" by New York Magazine<sup>3</sup>
- 93% U.S. doctors are in the BlueCard® program<sup>4</sup>
- 96% U.S. hospitals are in the BlueCard® program<sup>4</sup>



## LiveHealth Online

All 2018 Empire Small Group plans are embedded with our LiveHealth Online telemedicine benefit.

- No appointments
- Board-certified doctors
- Doctors diagnose basic health issues and may prescribe medicine<sup>5</sup>
- Now at a discount of 50% — or more — on the copay of a primary care physician office visit



## Vision benefits include

- Adult vision benefits included with all Empire Small Group plans
- Covers yearly eye exams plus frames and lenses



## Embedded deductibles

- Most of our health savings account (HSA) plans have embedded deductibles



## Preventive drugs

- Preventive drugs are included in all Small Group HSA and health reimbursement account (HRA) plans
- Deductibles are waived for certain maintenance drugs for conditions like asthma, diabetes, osteoporosis, high cholesterol, heart health, clots and stroke



## Wellness incentives

- All Empire Small Group plans are equipped with the wellness/Get Active rewards benefit
- Members can earn up to \$700 in wellness incentives



## Empire Anywhere — Connect to care anywhere with our mobile app

- Find a doctor
- Get a virtual ID card
- Compare provider costs and quality
- Manage prescription benefits
- View claims



## Simple administration

- Managing employee benefits is easy with a single member ID card, invoice and application for medical, vision and pharmacy benefits

All coverage descriptions are subject to benefit certificate terms.

<sup>1</sup>Anthem Corporate Provider File August 2017.

<sup>2</sup>Empire internal data 2017 internal data and Netminder data report issued June 2017.

<sup>3</sup>Based on New York Magazine's 2017 "Best Doctors" issue reflecting data from Castle Connolly Medical Ltd.'s annual database.

<sup>4</sup>Blue Cross Blue Shield Association website: [About.BlueCrossBlueShield.com](http://About.BlueCrossBlueShield.com) (accessed January 2018) bcbcs.com.

<sup>5</sup>Prescription availability is subject to professional judgment.

A Small Group must have at least one active, full-time (FTE) employee (working at least 20 hours per week), but no more than 100 FTE employees. A Small Group can consist of one non-spouse employee plus the business owner; a group of 100 would consist of the business owner plus 99 employees. Empire Dental is offered to group with 2-50 FTE employees.

LiveHealth Online is the trade name of Health Management Corporation, a separate company, providing telehealth services on behalf of Empire BlueCross BlueShield.

Services provided by Empire HealthChoice HMO, Inc., and/or Empire HealthChoice Assurance, Inc. licensees of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans.

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# EMPIRE'S SMALL GROUP PLANS AT A GLANCE

## 3rd Quarter 2018 Rates — Platinum and Gold

Regions: 3 (Delaware, Dutchess, Orange, Putnam, Sullivan and Ulster); 4 (Bronx, Kings, New York, Queens, Richmond, Rockland and Westchester); and 8 (Nassau and Suffolk)



**Preferred Provider Organization (PPO)/Exclusive Provider Organization (EPO) Network:** Comprehensive coverage<sup>1</sup> within the Empire service area.<sup>2</sup>

**Blue Priority Network:** An EPO network with comprehensive coverage and access to in-network doctors that participate in our Enhanced Personal Health Care program. It's personalized care and strong benefits at a lower price.

**Pathway Network:** An EPO network with comprehensive coverage through Empire's 28-county service area. You get lower or no copays. It's good care at a competitive cost.

Plan feature	EPO				PPO				EPO												PPO			
	Empire Platinum Blue Priority EPO 15/0%/3500	Empire Platinum Pathway EPO 15/0%/3500	Empire Platinum EPO 15/0%/3500	Empire Platinum EPO 5/0%/2600	Empire Platinum PPO 250/10%/5250	Empire Platinum PPO 5/0%/2600	Empire Platinum PPO 15/0%/3500	Empire Platinum PPO 80th Percentile FAIR Health	Empire Gold Blue Priority EPO 1350/0%/3000 w/HSA	Empire Gold Blue Priority EPO 1250/20%/4000	Empire Gold Pathway EPO 500/20%/7350	Empire Gold Blue Priority EPO 35/10%/5850	Empire Gold Pathway EPO 35/10%/5850	Empire Gold EPO 1500/10%/7000	Empire Gold EPO 500/20%/7350	Empire Gold Pathway EPO 25/0%/6000	Empire Gold EPO 35/10%/5850	Empire Gold EPO 1000/10%/5000	Empire Gold EPO 25/0%/6000	Empire Gold PPO 1350/0%/3000 w/HSA	Empire Gold PPO 1000/10%/5000	Empire Gold PPO 1350/0%/3000 w/HSA	Empire Gold PPO 1000/10%/5000	
<b>Plan deductible</b>																								
Individual/family	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0	In: \$250/\$750 Out: \$2,000/\$4,000	In: \$0/\$0 Out: \$2,000/\$4,000	In: \$0/\$0 Out: \$2,000/\$4,000	\$1,350/\$2,700	\$1,250/\$2,500	\$500/\$1,500	\$0/\$0	\$0/\$0	\$1,500/\$3,000	\$500/\$1,500	\$0/\$0	\$0/\$0	\$1,000/\$3,000	\$0/\$0	In: \$1,350/\$2,700 Out: \$2,000/\$4,000	In: \$1,000/\$3,000	In: \$1,000/\$3,000 Out: \$2,000/\$4,000			
<b>Out-of-pocket maximum</b>																								
Individual/family	\$3,500/\$7,000	\$3,500/\$7,000	\$3,500/\$7,000	\$2,600/\$5,200	In: \$5,250/\$10,500 Out: \$10,500/\$21,000	In: \$2,600/\$5,200 Out: \$5,200/\$10,400	In: \$3,500/\$7,000 Out: \$7,000/\$14,000	\$3,000/\$6,000	\$4,000/\$8,000	\$7,350/\$14,700	\$5,850/\$11,700	\$5,850/\$11,700	\$7,000/\$14,000	\$7,350/\$14,700	\$6,000/\$12,000	\$5,850/\$11,700	\$5,000/\$10,000	\$6,000/\$12,000	In: \$3,000/\$6,000 Out: \$6,000/\$12,000	In: \$5,000/\$10,000 Out: \$10,000/\$20,000	In: \$5,000/\$10,000 Out: \$10,000/\$20,000			
<b>Medical</b>																								
Coinsurance	0%	0%	0%	0%	In: 10% Out: 30%	In: 0% Out: 30%	In: 0% Out: 20%	0%	20%	20%	10%	10%	10%	20%	0%	10%	10%	0%	In: 0% Out: 20%	In: 0% Out: 30%	In: 0% Out: 30%			
Primary care	\$15	\$15	\$15	\$5	\$10	\$5	\$15	Ded then \$10	\$25	\$25	\$35	\$35	\$30	\$25	\$25	\$35	\$30	\$25	\$25	\$30	\$25	Ded then \$10	\$30	
Specialist visit	\$15	\$15	\$15	\$10	\$20	\$10	\$15	Ded then \$30	\$50	\$50	\$50	\$50	\$60	\$50	\$50	\$50	\$50	\$50	\$50	\$50	\$50	Ded then \$30	\$50	
Urgent care	\$25	\$25	\$25	\$25	\$50	\$25	\$25	Ded then \$30	\$75	\$75	\$100	\$100	\$60	\$75	\$75	\$100	\$75	\$75	\$75	\$75	Ded then \$30	\$75		
Emergency room visit	\$150	\$150	\$150	\$100	\$200	\$100	\$150	Ded then \$150	\$250	\$300	\$350	\$350	\$300	\$300	\$300	\$350	\$300	\$300	\$300	\$300	Ded then \$150	\$300		
<b>Pharmacy</b>																								
Copay	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - \$5 Tier 2 - \$30 Tier 3 - \$60	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$80	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75	Tier 1 - \$10 Tier 2 - \$35 Tier 3 - \$75			
<b>Additional benefits</b>																								
LiveHealth Online	\$5	\$5	\$5	\$5	\$10	\$5	\$5	Ded then \$10	\$10	\$10	\$20	\$20	\$15	\$10	\$10	\$20	\$15	\$10	\$20	\$15	\$10	Ded then \$10	\$15	
Adult vision	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
BlueCard/ National PPO	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
<b>Q3 rates (effective 7/1/18 - 9/30/2018)</b>																								
Single	\$1,014.73	\$1,031.88	\$1,081.37	\$1,091.17	\$1,126.80	\$1,188.17	\$1,276.11	\$835.53	\$862.40	\$872.77	\$874.18	\$888.98	\$912.45	\$914.62	\$918.58	\$931.59	\$935.92	\$962.60	\$968.91	\$1,021.04				
Single + spouse	\$2,029.46	\$2,063.76	\$2,162.74	\$2,182.34	\$2,253.60	\$2,376.34	\$2,552.22	\$1,671.06	\$1,724.80	\$1,745.54	\$1,748.36	\$1,777.96	\$1,824.90	\$1,829.24	\$1,837.16	\$1,863.18	\$1,871.84	\$1,925.20	\$1,937.82	\$2,042.08				
Single + child(ren)	\$1,725.04	\$1,754.20	\$1,838.33	\$1,854.99	\$1,915.56	\$2,019.89	\$2,169.39	\$1,420.40	\$1,466.08	\$1,483.71	\$1,486.11	\$1,511.27	\$1,551.17	\$1,554.85	\$1,561.59	\$1,583.70	\$1,591.06	\$1,636.42	\$1,647.15	\$1,735.77				
Single + spouse + child(ren)	\$2,891.98	\$2,940.86	\$3,081.90	\$3,109.83	\$3,211.38	\$3,386.28	\$3,636.91	\$2,381.26	\$2,457.84	\$2,487.39	\$2,491.41	\$2,533.59	\$2,600.48	\$2,606.67	\$2,617.95	\$2,655.03	\$2,667.37	\$2,743.41	\$2,761.39	\$2,909.96				

All plans include dependent coverage to age 26, with option to extend dependent coverage to age 30.

<sup>1</sup>Blue Cross and Blue Shield Association PPO/EPO network comparison data from websites of other national carriers as of 2016. Network data include the BlueCard program's extensive networks of doctors, hospitals and other providers that participate in independent Blue Cross and Blue Shield plans across the country.

This overview represents in-network benefits. Please refer to the Evidence of Coverage (EOC) with the Schedule of Benefits (SOB) and any riders associated with the plan for complete coverage details and related terms and conditions. To find a specific SOB for any of these plans, visit [plan-summaries.empireblue.com/sobdps/](http://plan-summaries.empireblue.com/sobdps/) or [sbc.empireblue.com](http://sbc.empireblue.com).

# EMPIRE'S SMALL GROUP PLANS AT A GLANCE

## 3rd Quarter 2018 Rates – Silver and Bronze

Regions: 3 (Delaware, Dutchess, Orange, Putnam, Sullivan and Ulster); 4 (Bronx, Kings, New York, Queens, Richmond, Rockland and Westchester); and 8 (Nassau and Suffolk)



**Preferred Provider Organization (PPO)/Exclusive Provider Organization (EPO) Network:** Comprehensive coverage<sup>1</sup> within the Empire service area.<sup>2</sup>

**Blue Priority Network:** An EPO network with comprehensive coverage and access to in-network doctors that participate in our Enhanced Personal Health Care program. It's personalized care and strong benefits at a lower price.

**Pathway Network:** An EPO network with comprehensive coverage through Empire's 28-county service area. You get lower or no copays. It's good care at a competitive cost.

Plan feature	EPO												PPO				EPO									
	Empire Silver Pathway EPO 1500/30%/6650	Empire Silver Blue Priority EPO 3000/0%/5250 w/HSA	Empire Silver Blue Priority EPO 2500/30%/7350	Empire Silver Blue Priority EPO 1500/30%/6650	Empire Silver Pathway EPO 2500/30%/7350	Empire Silver EPO 3000/0%/5250 w/HSA	Empire Silver Pathway EPO 2750/30%/7350	Empire Silver EPO 3000/30%/7350	Empire Silver EPO 2700/20%/5000 w/HSA	Empire Silver EPO 2500/30%/7350	Empire Silver EPO 1500/30%/6650	Empire Silver EPO 2750/30%/7350	Empire Silver PPO 3000/0%/5250 w/HSA	Empire Silver PPO 2700/20%/5000 w/HSA	Empire Silver Blue Priority EPO 7350/0%/7350	Empire Bronze Pathway EPO 7350/0%/7350	Empire Bronze Blue Priority EPO 5500/35%/6650 w/HSA	Empire Bronze Blue Priority EPO 5500/20%/6650 w/HSA	Empire Bronze Pathway EPO 5500/35%/6650 w/HSA	Empire Bronze EPO 5500/35%/6650 w/HSA	Empire Bronze EPO 5500/20%/6650 w/HSA	Empire Bronze EPO 5500/20%/6650 w/HSA				
<b>Plan deductible</b>																										
Individual/family	\$1,500/\$3,000	\$3,000/\$6,000	\$2,500/\$5,000	\$1,500/\$3,000	\$2,500/\$5,000	\$3,000/\$6,000	\$2,750/\$5,500	\$3,000/\$6,000	\$2,700/\$5,400	\$2,500/\$5,000	\$1,500/\$3,000	\$2,750/\$5,500	In: \$3,000/\$6,000 Out: \$6,000/\$12,000	In: \$2,700/\$5,400 Out: \$5,400/\$10,800	\$7,350/\$14,700	\$7,350/\$14,700	\$7,350/\$14,700	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	\$5,500/\$11,000	
<b>Out-of-pocket maximum</b>																										
Individual/family	\$6,650/\$13,300	\$5,250/\$10,500	\$7,350/\$14,700	\$6,650/\$13,300	\$7,350/\$14,700	\$5,250/\$10,500	\$7,350/\$14,700	\$5,000/\$10,000	\$7,350/\$14,700	\$6,650/\$13,300	\$7,350/\$14,700	In: \$5,250/\$10,500 Out: \$10,500/\$21,000	In: \$5,000/\$10,000 Out: \$10,000/\$20,000	\$7,350/\$14,700	\$7,350/\$14,700	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300	\$6,650/\$13,300		
<b>Medical</b>																										
Coinsurance	30%	0%	30%	30%	30%	0%	30%	30%	20%	30%	30%	30%	In: 0% Out: 30%	In: 20% Out: 40%	0%	0%	35%	20%	35%	35%	35%	20%	35%	35%	20%	
Primary care	3 visits \$35 copay then ded/30% coins	Ded then \$25	\$40	3 visits \$35 copay then ded/30% coins	\$40	Ded then \$25	\$40	\$30	Ded then 20% coins	\$40	3 visits \$35 copay then ded/30% coins	\$40	Ded then \$25	Ded then 20% coins	Ded then 0% coins	Ded then 35% coins	Ded then \$50	Ded then 35% coins	Ded then 35% coins	Ded then \$50	Ded then 35% coins	Ded then 35% coins	Ded then \$50	Ded then 35% coins	Ded then \$50	
Specialist visit	3 visits \$35 copay then ded/30% coins	Ded then \$50	\$70	3 visits \$35 copay then ded/30% coins	\$70	Ded then \$50	\$70	\$60	Ded then 20% coins	\$70	3 visits \$35 copay then ded/30% coins	\$70	Ded then \$50	Ded then 20% coins	Ded then 0% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then \$75	
Urgent care	Ded then 30% coins	Ded then \$50	\$75	Ded then 30% coins	\$75	Ded then \$50	\$75	\$75	Ded then 20% coins	\$75	Ded then 30% coins	\$75	Ded then \$50	Ded then 20% coins	Ded then 0% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then 35% coins	Ded then \$75	Ded then 35% coins	Ded then \$75	
Emergency room visit	Ded then \$300	Ded then \$300	Ded then \$500	Ded then \$300	Ded then \$500	Ded then \$300	\$550	Ded then \$500	Ded then \$500	Ded then 20% coins	Ded then \$300	Ded then \$300	Ded then \$300	Ded then 20% coins	Ded then 0% coins	Ded then 35% coins	Ded then \$350	Ded then 35% coins	Ded then 35% coins	Ded then \$350	Ded then 35% coins	Ded then 35% coins	Ded then \$350	Ded then 35% coins	Ded then \$350	
<b>Pharmacy</b>																										
Copay	Tier 1 - \$15 Tier 2 - \$250 rx ded/\$40 Tier 3 - \$250 rx ded/\$80	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$80	Tier 1 - \$15 Tier 2 - \$100 rx ded/\$45 Tier 3 - \$100 rx ded/\$75	Tier 1 - \$15 Tier 2 - \$250 rx ded/\$40 Tier 3 - \$250 rx ded/\$80	Tier 1 - \$15 Tier 2 - \$100 rx ded/\$45 Tier 3 - \$100 rx ded/\$75	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$90	Tier 1 - \$15 Tier 2 - \$100 rx ded/\$45 Tier 3 - \$100 rx ded/\$75	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$80	Tier 1 - \$15 Tier 2 - \$250 rx ded/\$40 Tier 3 - \$250 rx ded/\$75	Tier 1 - \$15 Tier 2 - \$100 rx ded/\$45 Tier 3 - \$100 rx ded/\$75	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$80	Tier 1 - ded/\$10 Tier 2 - ded/\$40 Tier 3 - ded/\$80	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%	Tier 1 - ded/0% Tier 2 - ded/0% Tier 3 - ded/0%			
<b>Additional benefits</b>																										
LiveHealth Online	\$20	Ded then \$10	\$20	\$20	\$20	Ded then \$10	\$20	\$15	Ded then 20% coins	\$20	\$20	\$20	Ded then \$10	Ded then 20% coins	Ded then 0% coins	Ded then 35% coins	Ded then \$25	Ded then 35% coins	Ded then 35% coins	Ded then \$25	Ded then 35% coins	Ded then 35% coins	Ded then \$25	Ded then 35% coins	Ded then \$25	
Adult vision	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
BlueCard/ National PPO	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

## Q3 rates (effective 7/1/18 - 9/30/2018)

Single	\$708.66	\$725.53	\$752.49	\$754.38	\$765.22	\$773.13	\$774.64	\$775.02	\$781.15	\$801.88	\$803.86	\$811.78	\$841.85	\$849.96	\$604.78	\$615.06	\$634.38	\$635.51	\$645.13	\$676.04	\$677.27
Single + spouse	\$1,417.32	\$1,451.06	\$1,504.98	\$1,508.76	\$1,530.44	\$1,546.2															