

Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA01 - (Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$886.66	\$1,773.32	\$1,507.32	\$2,526.98	\$913.26	\$1,826.52	\$1,552.54	\$2,602.78
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$701.48	\$1,402.96	\$1,192.52	\$1,999.22	\$722.53	\$1,445.05	\$1,228.29	\$2,059.20
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$724.08	\$1,448.17	\$1,230.94	\$2,063.64	\$745.81	\$1,491.61	\$1,267.87	\$2,125.55
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$615.07	\$1,230.13	\$1,045.61	\$1,752.94	\$633.52	\$1,267.04	\$1,076.98	\$1,805.53
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$982.91	\$1,965.82	\$1,670.95	\$2,801.29	\$1,012.40	\$2,024.79	\$1,721.08	\$2,885.33
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$811.53	\$1,623.07	\$1,379.61	\$2,312.87	\$835.88	\$1,671.76	\$1,421.00	\$2,382.26
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$794.77	\$1,589.53	\$1,351.10	\$2,265.08	\$818.61	\$1,637.22	\$1,391.64	\$2,333.04
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$772.38	\$1,544.76	\$1,313.05	\$2,201.28	\$795.55	\$1,591.10	\$1,352.44	\$2,267.32
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$680.13	\$1,360.26	\$1,156.22	\$1,938.37	\$700.54	\$1,401.07	\$1,190.91	\$1,996.53
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$695.19	\$1,390.39	\$1,181.83	\$1,981.30	\$716.05	\$1,432.10	\$1,217.29	\$2,040.74
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$779.77	\$1,559.55	\$1,325.61	\$2,222.35	\$803.17	\$1,606.33	\$1,365.38	\$2,289.02
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$772.38	\$1,544.76	\$1,313.05	\$2,201.28	\$795.55	\$1,591.10	\$1,352.44	\$2,267.32
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$918.10	\$1,836.19	\$1,560.77	\$2,616.58	\$945.64	\$1,891.28	\$1,607.59	\$2,695.08
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$705.68	\$1,411.35	\$1,199.65	\$2,011.18	\$726.85	\$1,453.69	\$1,235.64	\$2,071.51
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$737.63	\$1,475.25	\$1,253.96	\$2,102.23	\$759.75	\$1,519.51	\$1,291.58	\$2,165.30

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA02 - (Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, Wyoming)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$973.16	\$1,946.32	\$1,654.37	\$2,773.51	\$1,002.36	\$2,004.71	\$1,704.01	\$2,856.71
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$769.92	\$1,539.84	\$1,308.86	\$2,194.27	\$793.02	\$1,586.03	\$1,348.13	\$2,260.09
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$794.73	\$1,589.45	\$1,351.03	\$2,264.97	\$818.57	\$1,637.14	\$1,391.57	\$2,332.92
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$675.07	\$1,350.15	\$1,147.62	\$1,923.96	\$695.32	\$1,390.65	\$1,182.05	\$1,981.68
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,078.80	\$2,157.61	\$1,833.97	\$3,074.59	\$1,111.17	\$2,222.34	\$1,888.98	\$3,166.83
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$890.71	\$1,781.42	\$1,514.20	\$2,538.52	\$917.43	\$1,834.86	\$1,559.63	\$2,614.67
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$872.30	\$1,744.61	\$1,482.92	\$2,486.07	\$898.47	\$1,796.95	\$1,527.41	\$2,560.65
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$847.73	\$1,695.47	\$1,441.15	\$2,416.04	\$873.17	\$1,746.33	\$1,484.38	\$2,488.52
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$746.49	\$1,492.97	\$1,269.03	\$2,127.48	\$768.88	\$1,537.76	\$1,307.10	\$2,191.31
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$763.02	\$1,526.03	\$1,297.13	\$2,174.60	\$785.91	\$1,571.82	\$1,336.04	\$2,239.84
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$855.85	\$1,711.70	\$1,454.94	\$2,439.17	\$881.52	\$1,763.05	\$1,498.59	\$2,512.34
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$847.73	\$1,695.47	\$1,441.15	\$2,416.04	\$873.17	\$1,746.33	\$1,484.38	\$2,488.52
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$1,007.67	\$2,015.34	\$1,713.03	\$2,871.85	\$1,037.90	\$2,075.80	\$1,764.43	\$2,958.01
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$774.52	\$1,549.05	\$1,316.69	\$2,207.39	\$797.76	\$1,595.52	\$1,356.19	\$2,273.61
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$809.59	\$1,619.18	\$1,376.30	\$2,307.33	\$833.88	\$1,667.75	\$1,417.59	\$2,376.55

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA03 - (Delaware, Dutchess, Orange, Putnam, Sullivan, Ulster)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,113.73	\$2,227.46	\$1,893.34	\$3,174.13	\$1,147.14	\$2,294.28	\$1,950.14	\$3,269.35
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$881.13	\$1,762.26	\$1,497.92	\$2,511.22	\$907.56	\$1,815.12	\$1,542.86	\$2,586.55
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$909.52	\$1,819.04	\$1,546.18	\$2,592.13	\$936.81	\$1,873.61	\$1,592.57	\$2,669.90
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$772.58	\$1,545.17	\$1,313.39	\$2,201.86	\$795.76	\$1,591.52	\$1,352.79	\$2,267.92
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,234.63	\$2,469.26	\$2,098.87	\$3,518.70	\$1,271.67	\$2,543.34	\$2,161.84	\$3,624.26
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$1,019.37	\$2,038.73	\$1,732.92	\$2,905.19	\$1,049.95	\$2,099.89	\$1,784.91	\$2,992.35
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$998.30	\$1,996.61	\$1,697.12	\$2,845.17	\$1,028.25	\$2,056.51	\$1,748.03	\$2,930.52
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03	\$999.29	\$1,998.58	\$1,698.79	\$2,847.98
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$854.31	\$1,708.62	\$1,452.33	\$2,434.79	\$879.94	\$1,759.88	\$1,495.90	\$2,507.83
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$873.23	\$1,746.46	\$1,484.49	\$2,488.71	\$899.43	\$1,798.86	\$1,529.03	\$2,563.37
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$979.47	\$1,958.94	\$1,665.10	\$2,791.49	\$1,008.85	\$2,017.71	\$1,715.05	\$2,875.24
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03	\$999.29	\$1,998.58	\$1,698.79	\$2,847.98
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$1,153.22	\$2,306.44	\$1,960.47	\$3,286.68	\$1,187.82	\$2,375.63	\$2,019.29	\$3,385.28
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$886.40	\$1,772.80	\$1,506.88	\$2,526.24	\$912.99	\$1,825.98	\$1,552.08	\$2,602.02
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$926.53	\$1,853.06	\$1,575.10	\$2,640.61	\$954.32	\$1,908.65	\$1,622.35	\$2,719.83

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA04 - (Bronx, Kings, New York, Queens, Richmond, Rockland, Westchester)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,081.29	\$2,162.58	\$1,838.19	\$3,081.68	\$1,113.73	\$2,227.46	\$1,893.34	\$3,174.13
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$855.46	\$1,710.93	\$1,454.29	\$2,438.07	\$881.13	\$1,762.26	\$1,497.92	\$2,511.22
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$883.03	\$1,766.06	\$1,501.15	\$2,516.63	\$909.52	\$1,819.04	\$1,546.18	\$2,592.13
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$750.08	\$1,500.16	\$1,275.14	\$2,137.73	\$772.58	\$1,545.17	\$1,313.39	\$2,201.86
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,198.67	\$2,397.34	\$2,037.74	\$3,416.21	\$1,234.63	\$2,469.26	\$2,098.87	\$3,518.70
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$989.68	\$1,979.35	\$1,682.45	\$2,820.57	\$1,019.37	\$2,038.73	\$1,732.92	\$2,905.19
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$969.23	\$1,938.45	\$1,647.69	\$2,762.30	\$998.30	\$1,996.61	\$1,697.12	\$2,845.17
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$941.93	\$1,883.85	\$1,601.28	\$2,684.49	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$829.43	\$1,658.86	\$1,410.03	\$2,363.87	\$854.31	\$1,708.62	\$1,452.33	\$2,434.79
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$847.80	\$1,695.59	\$1,441.25	\$2,416.22	\$873.23	\$1,746.46	\$1,484.49	\$2,488.71
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$950.94	\$1,901.88	\$1,616.60	\$2,710.19	\$979.47	\$1,958.94	\$1,665.10	\$2,791.49
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$941.93	\$1,883.85	\$1,601.28	\$2,684.49	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$1,119.63	\$2,239.26	\$1,903.37	\$3,190.95	\$1,153.22	\$2,306.44	\$1,960.47	\$3,286.68
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$860.58	\$1,721.16	\$1,462.99	\$2,452.66	\$886.40	\$1,772.80	\$1,506.88	\$2,526.24
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$899.54	\$1,799.09	\$1,529.22	\$2,563.70	\$926.53	\$1,853.06	\$1,575.10	\$2,640.61

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA05 - (Livingston, Monroe, Ontario, Seneca, Wayne, Yates)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: Covered in full DW/\$50 AD/\$90 AD	\$756.90	\$1,513.81	\$1,286.74	\$2,157.17	\$779.61	\$1,559.22	\$1,325.34	\$2,221.89
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$598.83	\$1,197.65	\$1,018.00	\$1,706.65	\$616.79	\$1,233.58	\$1,048.54	\$1,757.85
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$618.12	\$1,236.24	\$1,050.80	\$1,761.64	\$636.66	\$1,273.33	\$1,082.33	\$1,814.49
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$525.06	\$1,050.11	\$892.60	\$1,496.41	\$540.81	\$1,081.62	\$919.37	\$1,541.30
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: Covered in full DW/\$50 AD/\$90 AD	\$839.07	\$1,678.14	\$1,426.42	\$2,391.35	\$864.24	\$1,728.48	\$1,469.21	\$2,463.09
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$692.77	\$1,385.55	\$1,177.71	\$1,974.40	\$713.56	\$1,427.11	\$1,213.05	\$2,033.63
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$678.46	\$1,356.92	\$1,153.38	\$1,933.61	\$698.81	\$1,397.63	\$1,187.98	\$1,991.62
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$659.35	\$1,318.70	\$1,120.89	\$1,879.14	\$679.13	\$1,358.26	\$1,154.52	\$1,935.52
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$580.60	\$1,161.20	\$987.02	\$1,654.71	\$598.02	\$1,196.04	\$1,016.63	\$1,704.35
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$593.46	\$1,186.92	\$1,008.88	\$1,691.35	\$611.26	\$1,222.52	\$1,039.15	\$1,742.10
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$665.66	\$1,331.32	\$1,131.62	\$1,897.13	\$685.63	\$1,371.26	\$1,165.57	\$1,954.04
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$659.35	\$1,318.70	\$1,120.89	\$1,879.14	\$679.13	\$1,358.26	\$1,154.52	\$1,935.52
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$783.74	\$1,567.48	\$1,332.36	\$2,233.66	\$807.25	\$1,614.51	\$1,372.33	\$2,300.67
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$602.41	\$1,204.81	\$1,024.09	\$1,716.86	\$620.48	\$1,240.96	\$1,054.81	\$1,768.37
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$629.68	\$1,259.36	\$1,070.46	\$1,794.59	\$648.57	\$1,297.14	\$1,102.57	\$1,848.42

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA06 - (Broome, Cayuga, Chemung, Cortland, Onondaga, Schuylar, Steuben, Tioga, Tompkins)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$854.22	\$1,708.44	\$1,452.17	\$2,434.52	\$879.85	\$1,759.69	\$1,495.74	\$2,507.56
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$675.82	\$1,351.63	\$1,148.89	\$1,926.08	\$696.09	\$1,392.18	\$1,183.36	\$1,983.86
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$697.59	\$1,395.19	\$1,185.91	\$1,988.14	\$718.52	\$1,437.04	\$1,221.49	\$2,047.78
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$592.56	\$1,185.13	\$1,007.36	\$1,688.81	\$610.34	\$1,220.68	\$1,037.58	\$1,739.47
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$946.95	\$1,893.90	\$1,609.81	\$2,698.81	\$975.36	\$1,950.72	\$1,658.11	\$2,779.77
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$781.84	\$1,563.69	\$1,329.13	\$2,228.25	\$805.30	\$1,610.60	\$1,369.01	\$2,295.10
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$765.69	\$1,531.38	\$1,301.67	\$2,182.21	\$788.66	\$1,577.32	\$1,340.72	\$2,247.68
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$744.12	\$1,488.24	\$1,265.01	\$2,120.75	\$766.45	\$1,532.89	\$1,302.96	\$2,184.37
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$655.25	\$1,310.50	\$1,113.92	\$1,867.46	\$674.91	\$1,349.81	\$1,147.34	\$1,923.48
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$669.76	\$1,339.52	\$1,138.59	\$1,908.81	\$689.85	\$1,379.71	\$1,172.75	\$1,966.08
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$751.24	\$1,502.49	\$1,277.12	\$2,141.05	\$773.78	\$1,547.56	\$1,315.43	\$2,205.28
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$744.12	\$1,488.24	\$1,265.01	\$2,120.75	\$766.45	\$1,532.89	\$1,302.96	\$2,184.37
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$884.51	\$1,769.02	\$1,503.66	\$2,520.85	\$911.04	\$1,822.09	\$1,548.77	\$2,596.47
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$679.86	\$1,359.72	\$1,155.76	\$1,937.60	\$700.25	\$1,400.51	\$1,190.43	\$1,995.73
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$710.64	\$1,421.28	\$1,208.09	\$2,025.32	\$731.96	\$1,463.92	\$1,244.33	\$2,086.08

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA07 - (Chenango, Clinton, Essex, Franklin, Hamilton, Herkimer, Jefferson, Lewis, Madison, Oneida, Oswego, Otsego, St. Lawrence)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$886.66	\$1,773.32	\$1,507.32	\$2,526.98	\$913.26	\$1,826.52	\$1,552.54	\$2,602.78
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$701.48	\$1,402.96	\$1,192.52	\$1,999.22	\$722.53	\$1,445.05	\$1,228.29	\$2,059.20
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$724.08	\$1,448.17	\$1,230.94	\$2,063.64	\$745.81	\$1,491.61	\$1,267.87	\$2,125.55
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$615.07	\$1,230.13	\$1,045.61	\$1,752.94	\$633.52	\$1,267.04	\$1,076.98	\$1,805.53
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$982.91	\$1,965.82	\$1,670.95	\$2,801.29	\$1,012.40	\$2,024.79	\$1,721.08	\$2,885.33
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$811.53	\$1,623.07	\$1,379.61	\$2,312.87	\$835.88	\$1,671.76	\$1,421.00	\$2,382.26
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$794.77	\$1,589.53	\$1,351.10	\$2,265.08	\$818.61	\$1,637.22	\$1,391.64	\$2,333.04
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$772.38	\$1,544.76	\$1,313.05	\$2,201.28	\$795.55	\$1,591.10	\$1,352.44	\$2,267.32
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$680.13	\$1,360.26	\$1,156.22	\$1,938.37	\$700.54	\$1,401.07	\$1,190.91	\$1,996.53
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$695.19	\$1,390.39	\$1,181.83	\$1,981.30	\$716.05	\$1,432.10	\$1,217.29	\$2,040.74
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$779.77	\$1,559.55	\$1,325.61	\$2,222.35	\$803.17	\$1,606.33	\$1,365.38	\$2,289.02
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$772.38	\$1,544.76	\$1,313.05	\$2,201.28	\$795.55	\$1,591.10	\$1,352.44	\$2,267.32
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$918.10	\$1,836.19	\$1,560.77	\$2,616.58	\$945.64	\$1,891.28	\$1,607.59	\$2,695.08
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$705.68	\$1,411.35	\$1,199.65	\$2,011.18	\$726.85	\$1,453.69	\$1,235.64	\$2,071.51
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$737.63	\$1,475.25	\$1,253.96	\$2,102.23	\$759.75	\$1,519.51	\$1,291.58	\$2,165.30

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Plan Options ³	Primary Care Physician / Specialist Office Visit	Inpatient Hospital / Outpatient Surgery	Emergency Room	Network Deductible ¹ (Individual / Family)	Network Plan Coinsurance	Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Out-of-Network Deductible ¹ (Individual / Family)	Out-of-Network Plan Coinsurance	Out-of-Network Maximum Out-of-Pocket Limit ¹ (Individual / Family)	Prescription Drugs	Monthly Premium - NYRA08 - (Nassau, Suffolk)							
											S	E/S	P/C	F	S	E/S	P/C	F
											(26 dep age):	(26 dep age):	(26 dep age):	(26 dep age):	(30 dep age):	(30 dep age):	(30 dep age):	(30 dep age):
NY Gold AWH OAEPO 1200 80/60 CY	T1: \$30 DW T2: \$60 AD	T1: 20% AD T2: 40% AD	T1: \$750 DW T2: Paid at the designated level	T1: \$1,200/\$2,400 T2: \$3,500/\$7,000	T1: 20% T2: 40%	T1: \$4,500/\$9,000 T2: \$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,081.29	\$2,162.58	\$1,838.19	\$3,081.68	\$1,113.73	\$2,227.46	\$1,893.34	\$3,174.13
NY Silver AWH OAEPO 3200 80/60 HSA PY	T1: 20% AD T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,200/\$6,400 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$7,500/\$15,000 T2: \$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$855.46	\$1,710.93	\$1,454.29	\$2,438.07	\$881.13	\$1,762.26	\$1,497.92	\$2,511.22
NY Silver AWH OAEPO 3500 80/60 CY	T1: \$50 DW T2: 40% AD	T1: 20% AD T2: 40% AD	T1: 20% AD T2: Paid at the designated level	T1: \$3,500/\$7,000 T2: \$5,000/\$10,000	T1: 20% T2: 40%	T1: \$9,100/\$18,200 T2: \$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$883.03	\$1,766.06	\$1,501.15	\$2,516.63	\$909.52	\$1,819.04	\$1,546.18	\$2,592.13
NY Bronze AWH OAEPO 5400 60/50 CY	T1: 40% AD T2: 50% AD	T1: 40% AD T2: 50% AD	T1: 40% AD T2: Paid at the designated level	T1: \$5,400/\$10,800 T2: \$7,550/\$15,100	T1: 40% T2: 50%	T1: \$8,700/\$17,400 T2: \$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$750.08	\$1,500.16	\$1,275.14	\$2,137.73	\$772.58	\$1,545.17	\$1,313.39	\$2,201.86
NY Gold OAEPO 1400 80% CY	\$30 DW	20% AD	\$750 DW	\$1,400/\$2,800	20%	\$6,500/\$13,000	NA	NA	NA	Deductible: \$150 Individual/ \$300 Family Retail: \$10 Covered in full DW/\$50 AD/\$90 AD	\$1,198.67	\$2,397.34	\$2,037.74	\$3,416.21	\$1,234.63	\$2,469.26	\$2,098.87	\$3,518.70
NY Silver OAEPO 3000 60% CY	\$50 DW	40% AD	40% AD	\$3,000/\$6,000	40%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$989.68	\$1,979.35	\$1,682.45	\$2,820.57	\$1,019.37	\$2,038.73	\$1,732.92	\$2,905.19
NY Silver OAEPO 3700 65% CY	\$50 DW	35% AD	35% AD	\$3,700/\$7,400	35%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$175 Individual/ \$350 Family Retail: \$10 DW/\$65 AD/\$120 AD	\$969.23	\$1,938.45	\$1,647.69	\$2,762.30	\$998.30	\$1,996.61	\$1,697.12	\$2,845.17
NY Silver OAEPO 5000 50% HSA CY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$941.93	\$1,883.85	\$1,601.28	\$2,684.49	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03
NY Bronze OAEPO 6000 60% CY	40% AD	40% AD	40% AD	\$6,000/\$12,000	40%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$829.43	\$1,658.86	\$1,410.03	\$2,363.87	\$854.31	\$1,708.62	\$1,452.33	\$2,434.79
NY Bronze OAEPO 4800 50% CY	50% AD	50% AD	50% AD	\$4,800/\$9,600	50%	\$8,700/\$17,400	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 DW/\$65 AD/\$120 AD	\$847.80	\$1,695.59	\$1,441.25	\$2,416.22	\$873.23	\$1,746.46	\$1,484.49	\$2,488.71
NY Silver OAEPO 3500 80% HSA PY	20% AD	20% AD	20% AD	\$3,500/\$7,000	20%	\$7,500/\$15,000	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$950.94	\$1,901.88	\$1,616.60	\$2,710.19	\$979.47	\$1,958.94	\$1,665.10	\$2,791.49
NY Silver OAEPO 5000 50% HSA PY*	50% AD	50% AD	50% AD	\$5,000/\$10,000	50%	\$5,400/\$10,800	NA	NA	NA	Deductible: Integrated with Medical Deductible Retail: \$10 AD/\$50 AD/\$90 AD	\$941.93	\$1,883.85	\$1,601.28	\$2,684.49	\$970.18	\$1,940.37	\$1,649.31	\$2,765.03
NY Signature Gold OAEPO 2000 90% CY	Covered in full DW	10% AD	\$750 DW	\$2,000/\$4,000	10%	\$7,000/\$14,000	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$1,119.63	\$2,239.26	\$1,903.37	\$3,190.95	\$1,153.22	\$2,306.44	\$1,960.47	\$3,286.68
NY Signature Silver OAEPO 5500 70% CY	Covered in full DW	30% AD	30% AD	\$5,500/\$11,000	30%	\$9,100/\$18,200	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$860.58	\$1,721.16	\$1,462.99	\$2,452.66	\$886.40	\$1,772.80	\$1,506.88	\$2,526.24
NY Signature Silver OAEPO 7200 70% CY	Covered in full DW	30% AD	30% AD	\$7,200/\$14,400	30%	\$8,700/\$17,400	NA	NA	NA	Deductible: \$100 Individual/ \$200 Family Retail: \$5 DW/\$65 AD/50% AD	\$899.54	\$1,799.09	\$1,529.22	\$2,563.70	\$926.53	\$1,853.06	\$1,575.10	\$2,640.61

Health insurance plans are offered and/or underwritten by Aetna Life Insurance Company (Aetna).



Footnotes

- 1 Amounts over the allowable charge and failure to pre-certify penalty do not apply toward out-of-pocket limit; network/out-of-network deductibles and out of pocket accumulate separately. In-network preferred/in-network out of pocket amounts accumulate combined. Tier 1 and Tier 2 deductibles and out of pocket amounts accumulate combined. Certain services may not apply toward the deductible.
- 2 These plans are available to employees who live, work or reside in the service area.
- 3 These HSA compatible plans are Administered on a plan year and calendar year basis.

In New York policies are insured by Aetna Life Insurance Company (Aetna). Each insurer has sole financial responsibility for its own products.

This material is for information only. An application must be completed to obtain coverage. Rates and benefits vary by location. Health insurance plans contain exclusions and limitations. These quoted rates are for a 12-month period from the effective date of coverage and are valid only for the benefits level and conditions stated and such other terms and conditions as set forth in the Aetna Group Policy or official renewal letters. Any changes in benefits level, conditions stated or other terms of the policy may require change in rates. These rates apply only to the Aetna service areas stated above. These rates are subject to final approval by Aetna. Rates have been filed with the NY State Department of Financial Services. Aetna reserves the right to modify the final rates based on actual enrollment. Investment service are independently offered by the PayFlex. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to www.Aetna.com.

