

Basic plan and optional rider costs

(Rates in effect as of July 2002. All rates are subject to change.)

Huge increases hit thousands

This summer, sharply rising health care costs led to unusually high increases in the premium rates of the HMO plans the city offers.

Tens of thousands of municipal employees and retirees enrolled in HMO plans were hit by increases in premium co-payments of 20 percent or more in July.

Ordinarily, the city only lets municipal employees and retirees switch plans during the annual health-care open enrollment period in the fall.

But because of the huge increases, the city made an exception this year for participants who claimed the hikes represented an economic hardship.

The rate increases did not affect city workers in GHI, HIP and DC 37 Med Team/Choice—except for those with riders—because those plans don't have premium co-payments.

The hikes also did not affect Medicare-eligible retirees in the GHI-CBP/EBCBS Senior Care Plan, which also has no premium co-pay.

City Employees	Weekly		Bi-Weekly	
	Individual	Family	Individual	Family
Aetna HMO				
BASIC PLAN	\$16.72	\$ 28.50	\$ 21.45	\$ 57.01
OPTIONAL RIDER Prescription Drugs	12.57	31.28	25.13	62.55
TOTAL:	\$23.29	\$ 59.78	\$ 46.58	\$119.56
Aetna QPOS				
BASIC PLAN	\$46.23	\$113.91	\$ 92.47	\$227.82
OPTIONAL RIDER Prescription Drugs	12.57	31.28	25.13	62.55
TOTAL:	\$58.80	\$145.19	\$117.60	\$290.37
CIGNA Healthcare				
BASIC PLAN	\$ 4.06	\$ 20.96	\$ 8.12	\$ 41.92
OPTIONAL RIDER Prescription Drugs	10.35	27.42	20.70	54.85
TOTAL:	\$14.41	\$ 48.38	\$ 28.82	\$ 96.77
DC 37 Med Team/Choice (DC 37 employees only)				
BASIC PLAN (No Rider available)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Empire EPO				
BASIC PLAN	\$30.26	\$ 77.97	\$ 60.52	\$155.94
OPTIONAL RIDER Prescription Drugs	10.79	26.45	21.58	52.89
TOTAL:	\$41.05	\$104.42	\$ 82.10	\$208.83
Empire HMO—NJ				
BASIC PLAN	\$ 4.84	\$ 10.77	\$ 9.69	\$ 21.53
OPTIONAL RIDER Prescription Drugs	10.79	26.45	21.58	52.89
TOTAL:	\$15.63	\$ 37.22	\$ 31.27	\$ 74.42
Empire HMO—NY				
BASIC PLAN	\$ 4.28	\$ 18.76	\$ 8.55	\$ 37.52
OPTIONAL RIDER Prescription Drugs	10.79	26.45	21.58	52.89
TOTAL:	\$15.07	\$ 45.21	\$ 30.13	\$ 90.41
GHI-CBP/Empire Blue Cross & Blue Shield				
BASIC PLAN	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
OPTIONAL RIDER Prescription Drugs	11.67	21.39	23.34	42.79
Outpatient Mental Health & Inpatient Chemical Dependency Treatment	0.34	0.78	0.68	1.55
Enhanced NYC Non-Par Provider Reimbursement Schedule	1.02	2.60	2.04	5.20
TOTAL:	\$13.03	\$ 24.77	\$ 26.06	\$ 49.54
GHI HMO				
BASIC PLAN	\$ 3.94	\$ 14.89	\$ 7.88	\$ 29.78
OPTIONAL RIDER Prescription Drugs	8.57	21.86	17.15	43.72
TOTAL:	\$12.51	\$ 36.75	\$ 25.03	\$ 73.50
HealthNet				
BASIC PLAN	\$14.66	\$ 44.79	\$ 29.32	\$ 89.59
OPTIONAL RIDER Prescription Drugs	19.70	50.92	39.39	101.84
TOTAL:	\$34.36	\$ 95.71	\$ 68.71	\$191.43
HIP Prime HMO				
BASIC PLAN	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
OPTIONAL RIDER Prescription Drugs	11.70	28.68	23.41	57.35
Appliances & Private Duty Nursing	0.54	1.33	1.09	2.66
TOTAL:	\$12.24	\$ 30.01	\$ 24.50	\$ 60.01
HIP Prime POS				
BASIC PLAN	\$20.42	\$ 50.05	\$ 40.84	\$100.10
OPTIONAL RIDER Prescription Drugs	13.19	32.31	26.37	64.61
TOTAL:	\$33.61	\$ 82.36	\$ 67.21	\$164.71
Metroplus (HHC employees only)				
BASIC PLAN	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
OPTIONAL RIDER Prescription Drugs	11.58	27.70	23.16	55.40
TOTAL:	\$11.58	\$ 27.70	\$ 23.16	\$ 55.40
Vytra				
BASIC PLAN	\$ 0.00	\$ 4.03	\$ 0.00	\$ 8.06
OPTIONAL RIDER Prescription Drugs	8.59	17.35	13.19	34.70
TOTAL:	\$ 6.59	\$ 21.38	\$ 13.19	\$ 42.76

Retirees	Monthly		
	Non-Medicare		Medicare
	Individual	Family	(Per Person)
Aetna HMO			
BASIC PLAN	\$ 46.60	\$123.86	In most areas, there is no change in deductions for basic coverage.
OPTIONAL RIDER Prescription Drugs	54.60	135.90	
TOTAL:	\$101.20	\$259.76	Affected retirees will be notified by mail.
Aetna QPOS			
BASIC PLAN	\$200.90	\$494.96	There are no changes in prescription drug deductions.
OPTIONAL RIDER Prescription Drugs	54.60	135.90	
TOTAL:	\$255.50	\$630.86	
BCBS Health Options of Florida (Dade/Broward Counties only)			
BASIC PLAN	Family coverage only; Split Contract with 1 person Non-Medicare (No Drug coverage and 1 person Medicare)		No change in deductions
OPTIONAL RIDER Prescription Drugs			
TOTAL:		\$214.70	
CIGNA			
BASIC PLAN	\$ 17.65	\$ 91.08	No change in deductions
OPTIONAL RIDER Prescription Drugs	44.97	119.16	
TOTAL:	\$ 62.62	\$210.24	
Empire HMO New Jersey			
BASIC PLAN	\$ 21.05	\$ 46.78	\$ 61.14
OPTIONAL RIDER Prescription Drugs	46.89	114.92	
TOTAL:	\$ 67.94	\$161.70	\$183.14
Empire HMO New York			
BASIC PLAN	\$ 18.58	\$ 81.51	BlueChoice Sr. Plan Increase of 12.74 Basic only in Nassau County
OPTIONAL RIDER Prescription Drugs	46.89	114.92	
TOTAL:	\$ 65.47	\$196.43	\$183.14
Empire EPO			
BASIC PLAN	\$131.48	\$338.79	\$ 61.14
OPTIONAL RIDER Prescription Drugs	46.89	114.92	
TOTAL:	\$178.37	\$153.71	\$183.14
GHI-CBP/EBCBS			
BASIC PLAN	\$ -0-	\$ -0-	\$ -0-
OPTIONAL RIDER Prescription Drugs	50.71	92.96	
EBCBS 365-Day Hospitalization	In Basic Plan		2.63
GHI Outpatient Mental Health & Inpatient Chemical Dependency	1.48	3.37	Not available
GHI Enhanced NYC Non-Par Provider Reimbursement Schedule	4.44	11.29	Not available
TOTAL:	\$ 56.63	\$107.62	\$139.75
GHI HMO			
BASIC PLAN	\$ 17.12	\$ 64.69	\$ 1.44
OPTIONAL RIDER Prescription Drugs	37.25	94.98	
TOTAL:	\$ 54.37	\$159.67	\$194.92
GHI TYPE C/EBCBS			
BASIC PLAN	\$ -0-	\$ -0-	\$ -0-
OPTIONAL RIDER GHI Prescription Drugs	50.71	92.96	
EBCBS 365-Day Hospitalization	17.66	42.10	2.63
TOTAL:	\$ 68.37	\$135.06	\$139.75
HealthNet			
BASIC PLAN	\$ 63.71	\$194.64	Smart Choice CT only Increase of \$6.46 for Basic coverage
OPTIONAL RIDER Prescription Drugs	85.59	221.26	
TOTAL:	\$149.30	\$415.90	\$182.58
HIP Prime HMO			
BASIC PLAN	\$ -0-	\$ -0-	HIP VIP HIP MCP
OPTIONAL RIDER Prescription Drugs	50.86	124.61	
Appliances and Private Duty Nursing	2.36	5.79	No change in deductions
TOTAL:	\$ 53.22	\$130.40	\$134.43
HIP Prime POS			
BASIC PLAN	\$ 88.74	\$217.49	No change in deductions
OPTIONAL RIDER Prescription Drugs	57.30	140.38	
TOTAL:	\$146.04	\$357.87	
HUMANA of Florida			
BASIC PLAN	Split Contracts Only		No change in deductions
OPTIONAL RIDER Prescription Drugs	Affected Retirees will be notified of changes in deductions		
TOTAL:			
Metroplus			
BASIC PLAN	\$ -0-	\$ -0-	Not available
OPTIONAL RIDER Prescription Drugs	50.31	120.36	
TOTAL:	\$ 50.31	\$120.36	
Vytra			
BASIC PLAN	\$ -0-	\$ 17.51	Not available
OPTIONAL RIDER Prescription Drugs	28.65	75.40	
TOTAL:	\$ 28.65	\$ 92.91	