

**Empire HealthChoice HMO, Inc.  
Rate Manual**

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**Empire HealthChoice HMO, Inc**  
**Small Group OFF-Exchange Plans**  
gated in-network coverage only using the pathway network

Plan Name	Deductible Single/ Family	Office Visit			Coinsurance	Annual OOP Max Single/ Family	Pharmacy	Inpatient Hospital	Emergency Room (Facility)	Urgent Care	Outpt Hospital (Facility)	Maternity & Newborn Care	Rehab & Habilitation
		PCP	Specialist	Online Visits									
<b>GOLD</b>													
<b>Empire Gold Pathway HMO 1300/10%/6000 Plus w/HSA</b>	\$1300/\$2600	ded/coins	ded/coins	ded/coins	10%	\$6,000/ \$12,000	ded/10%	ded/coins	ded/coins	ded/coins	ded/coins	ded/coins	ded/coins
<b>Empire Gold Healthy New York Pathway HMO 600/0%/4000</b>	\$600/\$1200	ded/\$25	ded/\$40	ded/\$25	0% (20% only on DME/Supplies, Hearing Aids, Eyewear)	\$4,000/ \$8,000	\$10/\$35/\$70	ded/\$1000 per admission	ded/\$150	ded/\$60	ded/\$100	ded/\$1000 per admission	ded/PT/OT/ST copay per visit

**Plans include the following Pediatric Dental benefits:**

	Diagnostic & Preventive	Basic Services	Endodontic/ Periodontal/ Oral Surgery	Major Services	Medically Necessary Orthodontics
<b>Empire Gold Pathway HMO 1300/10%/6000 Plus w/HSA</b>	Medical ded applies	Medical ded applies	Med ded/50%	Med ded/50%	Med ded/50%
<b>Empire Gold Healthy New York Pathway HMO 600/0%/4000</b>	\$25 Copay after deductible	\$25 Copay after deductible	\$25 Copay after deductible	\$25 Copay after deductible	\$25 Copay after deductible

**Plans include the following Pediatric Vision benefits:**

	Routine Eye Exam	Lenses: Single, Bifocal, Trifocal	Lens Treatments					Frames	Elective Contact Lenses	Non-Elective Contact Lenses
			UV Coating	Standard Factory Scratch Coating	Standard Polycarbonate	Standard Transitions	Standard Progressive Lenses			
<b>Empire Gold Pathway HMO 1300/10%/6000 Plus w/HSA</b>	\$0 copay, Once per 12 month period	\$0 copay, Once per 12 month period	Covered in full	Covered in full	Covered in full	Covered in full	Covered in full	\$0 copay, Formulary, Once per -12 month period	\$0 copay, Formulary, Once per 12 month period	\$0 copay, Formulary, Once per 12 month period
<b>Empire Gold Healthy New York Pathway HMO 600/0%/4000</b>	\$25 copay after deductible, Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period	25% coinsurance after ded Once per 12 month period

# Rate Manual - Description of Benefits

## Empire HealthChoice HMO, Inc. Small Group - Off Exchange Sample Rate Calculation

**Plan:** Empire Gold Pathway HMO 1300 10 6450 Plus w HSA

**Rating Region:** New York City (Region 4)

**Effective Date:** January 1, 2015

**Riders:** Dependent Coverage through Age 29  
Unlimited Days of SNF Coverage

	Individual	Husband/ Wife	Parent/ Child(ren)	Family
Base Rates:	\$671.43	\$1,342.86	\$1,141.43	\$1,913.58
Rider: Dep Age	1.50%	1.50%	1.50%	1.50%
<u>Rider: SNF</u>	<u>0.07%</u>	<u>0.07%</u>	<u>0.07%</u>	<u>0.07%</u>
TOTAL	\$681.97	\$1,363.94	\$1,159.35	\$1,943.62

NOTE: Empire will be using a new rating system for 2015 and rounding rules have not yet been finalized. Therefore the amounts shown are approximate.

**Empire HealthChoice HMO, Inc.**  
**Small Group**  
 Effective January 1, 2015

<b>Rating Area Description</b>	<b>Area Factor</b>	<b>Counties Included</b>
Albany	0.9435	Albany, Columbia, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, and Washington
Long Island	0.9335	Nassau and Suffolk
Mid-Hudson	1.1051	Delaware, Dutchess, Orange, Putnam, Sullivan, and Ulster
New York City	1.0332	Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester
Upstate	1.4043	Clinton and Essex

**Empire HealthChoice HMO, Inc  
Rate Manual  
Index of Form Numbers**

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# Rate Manual

## Empire HealthChoice HMO, Inc. Small Group

Quarter 1: January - March 2014

Form Number(s): NY\_HMO\_GA\_012015, NY\_HMO-HNY\_GA\_012015

### Albany (Region 1)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$559.35	\$1,118.70	\$950.90	\$1,594.15
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$493.18	\$986.36	\$838.41	\$1,405.56

### Long Island (Region 8)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$553.42	\$1,106.84	\$940.81	\$1,577.25
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$487.95	\$975.90	\$829.52	\$1,390.66

### Mid-Hudson (Region 3)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$655.15	\$1,310.30	\$1,113.76	\$1,867.18
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$577.65	\$1,155.30	\$982.01	\$1,646.30

### New York City (Region 4)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$612.53	\$1,225.06	\$1,041.30	\$1,745.71
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$540.07	\$1,080.14	\$918.12	\$1,539.20

### Upstate (Region 7)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$832.53	\$1,665.06	\$1,415.30	\$2,372.71
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$734.04	\$1,468.08	\$1,247.87	\$2,092.01

# Rate Manual

## Empire HealthChoice HMO, Inc. Small Group

Quarter 2: April - June 2014

Form Number(s): NY\_HMO\_GA\_012015, NY\_HMO-HNY\_GA\_012015

### Albany (Region 1)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$575.01	\$1,150.02	\$977.52	\$1,638.78
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$506.99	\$1,013.98	\$861.88	\$1,444.92

### Long Island (Region 8)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$568.91	\$1,137.82	\$967.15	\$1,621.39
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$501.61	\$1,003.22	\$852.74	\$1,429.59

### Mid-Hudson (Region 3)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$673.49	\$1,346.98	\$1,144.93	\$1,919.45
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$593.82	\$1,187.64	\$1,009.49	\$1,692.39

### New York City (Region 4)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$629.68	\$1,259.36	\$1,070.46	\$1,794.59
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$555.19	\$1,110.38	\$943.82	\$1,582.29

### Upstate (Region 7)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$855.84	\$1,711.68	\$1,454.93	\$2,439.14
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$754.60	\$1,509.20	\$1,282.82	\$2,150.61

# Rate Manual

## Empire HealthChoice HMO, Inc. Small Group

Quarter 3: July - September 2014

Form Number(s): NY\_HMO\_GA\_012015, NY\_HMO-HNY\_GA\_012015

### Albany (Region 1)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$591.12	\$1,182.24	\$1,004.90	\$1,684.69
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$521.19	\$1,042.38	\$886.02	\$1,485.39

### Long Island (Region 8)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$584.85	\$1,169.70	\$994.25	\$1,666.82
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$515.67	\$1,031.34	\$876.64	\$1,469.66

### Mid-Hudson (Region 3)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$692.36	\$1,384.72	\$1,177.01	\$1,973.23
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$610.46	\$1,220.92	\$1,037.78	\$1,739.81

### New York City (Region 4)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$647.32	\$1,294.64	\$1,100.44	\$1,844.86
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$570.74	\$1,141.48	\$970.26	\$1,626.61

### Upstate (Region 7)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$879.82	\$1,759.64	\$1,495.69	\$2,507.49
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$775.74	\$1,551.48	\$1,318.76	\$2,210.86

# Rate Manual

## Empire HealthChoice HMO, Inc. Small Group

Quarter 4: October - December 2014

Form Number(s): NY\_HMO\_GA\_012015, NY\_HMO-HNY\_GA\_012015

### Albany (Region 1)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$607.67	\$1,215.34	\$1,033.04	\$1,731.86
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$535.79	\$1,071.58	\$910.84	\$1,527.00

### Long Island (Region 8)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$601.23	\$1,202.46	\$1,022.09	\$1,713.51
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$530.11	\$1,060.22	\$901.19	\$1,510.81

### Mid-Hudson (Region 3)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$711.76	\$1,423.52	\$1,209.99	\$2,028.52
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$627.56	\$1,255.12	\$1,066.85	\$1,788.55

### New York City (Region 4)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$665.45	\$1,330.90	\$1,131.27	\$1,896.53
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$586.73	\$1,173.46	\$997.44	\$1,672.18

### Upstate (Region 7)

Index	HIOS Plan Name	Individual	Husband/ Wife	Parent/ Child(ren)	Family
1	Empire Gold Pathway HMO 1300/10%/6450 Plus w/HSA	\$904.46	\$1,808.92	\$1,537.58	\$2,577.71
2	Empire Gold Healthy New York Pathway HMO 600/0%/4000	\$797.47	\$1,594.94	\$1,355.70	\$2,272.79