

## **Child-Only Plans**

## with 2019 premiums for the New York City Region

Child-only rates for children up to age 21 are available with the MVP Premier<sup>sM</sup> Plans listed below. Rates are for the New York City Region, which includes these counties: Bronx<sup>^</sup>, Kings<sup>^</sup>, New York (Manhattan)<sup>^</sup>, Queens<sup>^</sup>, Richmond (Staten Island)<sup>^</sup>, Rockland, and Westchester.

	MVP Premier™ Plans (Standard)  Metal Level					
Plan Feature	Platinum 1	Gold 1	Gold 2	Silver 1	Bronze 1 HDHP	Bronze 2
Plan Deductible – 1 Child/3+ Children	\$0/\$0	\$600/\$1,200	\$650/\$1,300	\$1,700/\$3,400	\$5,500/\$11,000	\$4,000/\$8,000
Out-of-Pocket Maximum	\$2,000/\$4,000	\$4,000/\$8,000	\$5,000/\$10,000	\$7,500/\$15,000	\$6,550/\$13,100	\$7,600/\$15,200
Medical						
Preventive Care	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care	\$15	\$25*	3 visits at \$25, then \$25*	\$30*	50%*	50%*
Specialist Visit	\$35	\$40*	\$40*	\$50*	50%*	50%*
Hospital Facility Visit: Inpatient	\$500	\$1,000*	\$1,000*	\$1,500*	50%*	50%*
Hospital Facility Visit: Outpatient	\$100	\$100*	\$100*	\$100*	50%*	50%*
Urgent Care	\$55	\$60*	\$60*	\$70*	50%*	50%*
Emergency Room	\$100	\$150*	\$150*	\$250*	50%*	50%*
myVisitNow® (Telemedicine)	\$15	\$25*	\$25*	\$30*	50%*	50%*
Pharmacy						
Prescription Deductible	\$0	\$0	\$0	\$0	Integrated with Medical	Integrated with Medical
Prescription Co-payment	\$10/\$30/\$60	\$10/\$35/\$70	\$10/\$40/\$80	\$10/\$35/\$70	\$10*/\$35*/\$70*	\$10*/\$35*/\$70*
<b>Premiums</b> † (Effective 1/1/2019–12/31/2019)						
1 Child	\$413.35	\$335.44	\$337.88	\$283.46	\$189.47	\$187.50
2 Children	\$826.70	\$670.88	\$675.76	\$566.92	\$378.94	\$375.00
3+ Children	\$1,240.05	\$1,006.32	\$1,013.64	\$850.38	\$568.41	\$562.50

<sup>^</sup> MVP is not licensed to sell in this county.

Health benefit plans are issued or administered by MVP Health Plan, Inc.; MVP Health Insurance Company; MVP Select Care, Inc.; and MVP Health Services Corp., operating subsidiaries of MVP Health Care, Inc. Not all plans available in all states and counties.

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<sup>\*</sup> Member amount after deductible is met

<sup>†</sup> Rates do not include pediatric dental coverage.