

NY Individual On-Exchange

MVP Health Care® Premier & Premier Plus Plans

Rochester Region



Plan Feature	MVP Premier Plus SM Plans (Non-Standard)						MVP Premier SM Plans (Standard)		
	Platinum 1 Embedded	Platinum 2 Embedded	NEW Platinum National Embedded	Gold 1 Embedded	Gold 2 HDHP Agg/Emb [†]	NEW Gold National HDHP Agg/Emb [†]	Platinum Embedded	Gold Embedded	Gold 2 Embedded
Plan Deductible									
Individual/Family	\$0/\$0	\$0/\$0	\$0/\$0	\$950/\$1,900	\$1,350/\$2,700 Agg	\$1,350/\$2,700 Agg	\$0/\$0	\$600/\$1,200	\$650/\$1,300
Out-of-Pocket Maximum									
Individual/Family	\$2,200/\$4,400	\$2,400/\$4,800	\$2,300/\$4,600	\$5,500/\$11,000	\$4,100/\$8,200 Emb	\$5,600/\$11,200 Emb	\$2,000/\$4,000	\$4,000/\$8,000	\$5,000/\$10,000
Medical									
Preventive Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care	3 visits at \$0, then \$10	\$10	\$15	3 visits at \$0, then \$15 NoDD	\$5*	20%*	\$15	\$25*	3 visits at \$25, then \$25*
Specialist Visit	\$45	\$35	\$45	\$50*	\$25*	20%*	\$35	\$40*	\$40*
Hospital Facility Visit - Inpatient/Outpatient	\$300/\$100	\$300/\$200	\$500/\$200	\$500*/\$200*	\$400*/\$100*	20%*/20%*	\$500/\$100	\$1,000*/\$100*	\$1,000*/\$100*
Urgent Care	\$45	\$35	\$45	\$50 NoDD	\$25*	20%*	\$55	\$60*	\$60*
Emergency Room Visit	\$200	\$200	\$200	\$350 NoDD	\$75*	20%*	\$100	\$150*	\$150*
myVisitNow (Telemedicine)	\$10	\$10	\$15	\$15 NoDD	\$5*	20%*	\$15	\$25*	\$25*
Pharmacy									
Prescription Deductible Individual/Family	\$0/\$0	\$0/\$0	\$0/\$0	\$100/\$200 (Name Brand only)	Integrated w/ Medical	Integrated w/ Medical	\$0/\$0	\$0/\$0	\$0/\$0
Prescription Co-payment	\$10/\$40/\$60	\$5/\$30/\$50	\$5/\$30/\$50	\$10/\$40*/\$60*	\$5*/\$15*/\$25* (Preventive Drugs NoDD)	\$10*/\$40*/\$60* (Preventive Drugs NoDD)	\$10/\$30/\$60	\$10/\$35/\$70	\$10/\$40/\$80
Rates (Effective 1/1/2018–12/31/2018. Rates Do Not Include Pediatric Dental Coverage)									
Single	\$627.72	\$630.33	\$649.85	\$537.47	\$525.22	\$514.66	\$633.59	\$547.27	\$551.56
Single + Spouse	\$1,255.44	\$1,260.66	\$1,299.70	\$1,074.94	\$1,050.44	\$1,029.32	\$1,267.18	\$1,094.54	\$1,103.12
Single + Child(ren)	\$1,067.12	\$1,071.56	\$1,104.75	\$913.70	\$892.87	\$874.92	\$1,077.10	\$930.36	\$937.65
Single + Spouse + Child(ren)	\$1,789.00	\$1,796.44	\$1,852.07	\$1,531.79	\$1,496.88	\$1,466.78	\$1,805.73	\$1,559.72	\$1,571.95

All plans include dependent care to age 26. NOTE: Benefits that are listed in red represent a plan change from 2017–2018.

NoDD: Not subject to deductible. *Member amount after deductible is met.
[†]This plan features an Aggregate deductible and an Embedded out-of-pocket maximum.
 All MVP Premier and Premier Plus high deductible health plans (HDHPs) are HSA-qualified.
 All MVP Premier and Premier Plus plans pass for Medicare Creditable Coverage. For a full listing of plans, visit mvphealthcare.com and choose Employers, then Forms.
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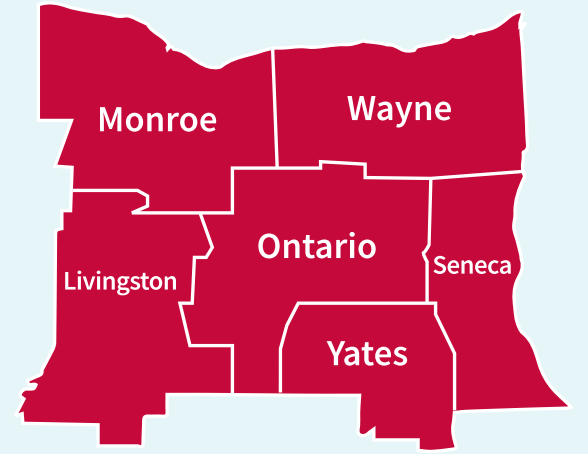
For plan details, call **1-800-TALK-MVP (825-5687)** or visit mvphealthcare.com.

See reverse side for Silver and Bronze plans.

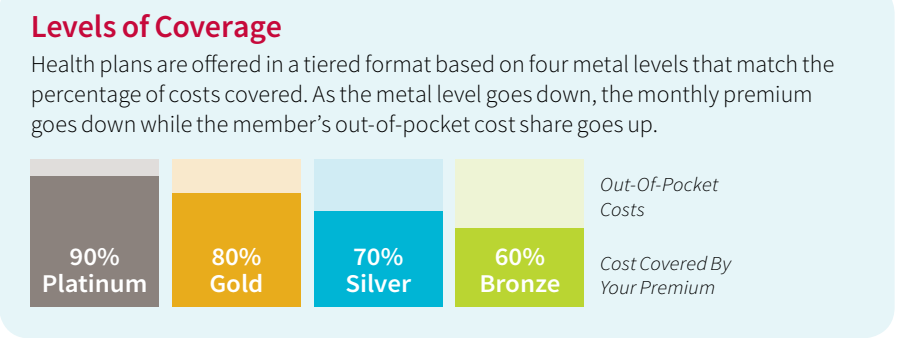
Rochester Region

Counties include:

- Livingston
- Monroe
- Ontario
- Seneca
- Wayne
- Yates



New for 2018:
“National” Plans include Cigna National Network
 Members enrolled in a new **National** plan have access to the Cigna HealthCare network—providing members full national coverage by allowing them access to providers outside the MVP regional network. Our complete network is composed of more than 500,000 providers nationally with more than 5,000 facilities. National plans are available at the Platinum and Gold levels.



Aggregate (Agg)
 For any policy with two or more members, the deductible must be met by any one or any combination of members before the plan will make payments.

Embedded (Emb)
 Each member will pay toward, but never exceed, their individual deductible and/or OOPM until the larger Family deductible and/or OOPM is met. Once the Family deductible and/or OOPM has been met, the plan will begin payment of services for all members on the contract, regardless of the status of any remaining individual deductible and/or OOPM levels.

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Plan Feature	MVP Premier Plus SM Plans (Non-Standard)						MVP Premier SM Plans (Standard)				
	Silver 1 Embedded	Silver 2 Embedded	Silver 3 HDHP Agg/Emb [†]	Bronze 1 Embedded	Bronze 2 Embedded	Bronze 3 HDHP Embedded	Silver Embedded	Silver 2 Embedded	Bronze 1 HDHP Embedded	Bronze 2 Embedded	MVP Secure [†] Embedded
Plan Deductible	\$1,800/\$3,600	\$3,400/\$6,800	\$2,500/\$5,000 Agg	\$4,500/\$9,000	\$5,100/\$10,200	\$5,900/\$11,800	\$2,000/\$4,000	\$2,350/\$4,700	\$5,500/\$11,000	\$4,000/\$8,000	\$7,350/\$14,700
Out-of-Pocket Maximum	\$6,800/\$13,600	\$6,350/\$12,700	\$5,000/\$10,000 Emb	\$7,350/\$14,700	\$7,150/\$14,300	\$6,550/\$13,100	\$6,750/\$13,500	\$7,150/\$14,300	\$6,550/\$13,100	\$7,150/\$14,300	\$7,350/\$14,700
Medical											
Preventive Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care	\$40 NoDD	3 visits at \$0, then \$40 NoDD	\$30*	\$40*	3 visits at \$0, then 40%*	\$30*	\$30*	3 visits at \$35, then \$35*	50%*	50%*	3 visits at \$0, then \$0*
Specialist Visit	\$60*	\$70*	\$60*	\$80*	40%*	\$50*	\$50*	\$55*	50%*	50%*	\$0*
Hospital Facility Visit - Inpatient/Outpatient	20%*/\$300*	20%*/\$200*	\$500*/\$200*	\$1,500*/\$300*	40%*/40%*	30%*/\$100*	\$1,500*/\$100*	\$1,500*/\$100*	50%*/50%*	50%*/50%*	\$0*
Urgent Care	\$60*	\$70 NoDD	\$60*	\$80*	40%*	\$50*	\$70*	\$70*	50%*	50%*	\$0*
Emergency Room Visit	\$500*	\$500 NoDD	\$300*	\$500*	40%*	\$500*	\$250*	\$250*	50%*	50%*	\$0*
myVisitNow (Telemedicine)	\$40 NoDD	\$40 NoDD	\$30*	\$40*	40%*	\$30*	\$30*	\$35*	50%*	50%*	\$0*
Pharmacy											
Prescription Deductible Individual/Family	\$0/\$0	Integrated w/ Medical	Integrated w/ Medical	\$200/\$400	Integrated w/ Medical	Integrated w/ Medical	\$0/\$0	\$0/\$0	Integrated w/ Medical	Integrated w/ Medical	Integrated w/ Medical
Prescription Co-payment	\$10/\$45/\$90	\$15*/\$40*/\$70*	\$10*/\$45*/\$90* (Preventive Drugs NoDD)	\$10*/\$45*/\$90*	\$5*/\$60*/\$80*	\$10*/\$45*/\$90* (Preventive Drugs NoDD)	\$10/\$35/\$70	\$10/\$40/\$80	\$10*/\$35*/\$70*	\$10*/\$35*/\$70*	\$0*/\$0*/\$0*

Rates (Effective 1/1/2018–12/31/2018. Rates Do Not Include Pediatric Dental Coverage)

Single	\$482.76	\$449.16	\$452.76	\$382.12	\$374.75	\$378.72	\$474.96	\$485.76	\$367.94	\$368.51	\$217.43
Single + Spouse	\$965.52	\$898.32	\$905.52	\$764.24	\$749.50	\$757.44	\$949.92	\$971.52	\$735.88	\$737.02	\$434.86
Single + Child(ren)	\$820.69	\$763.57	\$769.69	\$649.60	\$637.08	\$643.82	\$807.43	\$825.79	\$625.50	\$626.47	\$369.63
Single + Spouse + Child(ren)	\$1,375.87	\$1,280.11	\$1,290.37	\$1,089.04	\$1,068.04	\$1,079.35	\$1,353.64	\$1,384.42	\$1,048.63	\$1,050.25	\$619.68

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See reverse side for **Platinum and Gold plans.**

myVisitNowSM—24/7 Online Doctor Visits
 With myVisitNow from MVP, you can access urgent care providers via video, 24 hours a day, 365 days a year. You also have access to convenient self-scheduling with behavioral health specialists, nutritionists, dietitians, and lactation consultants—all from the comfort of your own home, or nearly anywhere in the U.S.!

Register an account today at **myvisitnow.com** and download the **myVisitNow mobile app**.
 myVisitNow from MVP Health Care is powered by American Well. Regulatory restrictions may apply.

Up to \$125 in Healthy Lifestyle Credits
 All plans for individuals include up to \$125, per subscriber, per calendar year, in reimbursement for gym and fitness club memberships, youth sports and fitness fees, healthy weight support programs, tobacco cessation courses, and massage therapy. Plans also include access to MVP's suite of online wellness tools and activities.

MVP Rx Members Save at CVS
 You can **save 20%** on more than 2,200 CVS-branded health care items with the *MVP-CVS ExtraCare Health Card*.
 • Includes over-the-counter medications, contact lens solution, first aid and oral hygiene products...literally thousands of items.
 • Use your discount at any CVS store nationwide or online at **cv.com**.

Open Enrollment: November 1, 2017–January 31, 2018
 New Yorkers can begin to enroll in Qualified Health Plans beginning November 1, 2017 for coverage starting January 1, 2018. The Open Enrollment Period will end on January 31, 2018.

Special Enrollment Period
 Certain life events—like marriage, having a baby, or a job change—may qualify you to enroll in a new health plan outside of the Open Enrollment period. To find out what other events qualify you for the Special Enrollment Period, call **1-800-TALK-MVP (825-5687)** or visit **mvphealthcare.com**.

MVP Premier Plans (Standard)
 Plans are based on the same plan designs that every health insurer must offer. Standard plans are designed by the State and the benefit details do not vary from one carrier to the next.

MVP Premier Plus Plans (Non-Standard)
 Plans contain unique features that enhance the value of the benchmark benefits offered in the Standard plan designs, such as lowering the member cost-sharing for the most common health care needs.

This plan overview is intended to provide a general outline of coverage. In the event of any conflict between this document and your Certificate of Coverage, Schedule and any applicable Rider(s), your Certificate of Coverage, Schedule and Rider(s) will be controlling.
 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.