

**2026 New York Small Group (1-100) Oxford Products: Q2 2026 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



| <b>Platinum Plans</b>                     |   |                    |                               |                     |
|---|---|--------------------|-------------------------------|---------------------|
| <b>NY P FRDM NG 20/40/100 EPO 26</b>      |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$20/\$40                                     | Single             | \$1,708.79                    | \$1,742.94          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100%                             | Parent/Child (ren) | \$2,904.95                    | \$2,962.99          |
| Max out of Pocket:                        | In: \$3,250/\$6,500                           | Employee/ Spouse*  | \$3,417.59                    | \$3,485.87          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$4,870.06                    | \$4,967.37          |
| <b>NY P FRDM NG 20/40/100 PPO 26</b>      |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$20/\$40                                     | Single             | \$1,750.00                    | \$1,784.97          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100% Out: \$3,000/\$6,000, 70%   | Parent/Child (ren) | \$2,975.00                    | \$3,034.44          |
| Max out of Pocket:                        | In: \$3,250/\$6,500 Out: \$8,000/\$16,000     | Employee/ Spouse*  | \$3,500.00                    | \$3,569.93          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$4,987.49                    | \$5,087.15          |
| <b>NY P FRDM NG 20/40/100 PPO FAIR 26</b> |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$20/\$40                                     | Single             | \$2,376.27                    | \$2,423.76          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100% Out: \$10,000/\$20,000, 80% | Parent/Child (ren) | \$4,039.67                    | \$4,120.39          |
| Max out of Pocket:                        | In: \$3,250/\$6,500 Out: \$25,000/\$50,000    | Employee/ Spouse*  | \$4,752.55                    | \$4,847.52          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$6,772.38                    | \$6,907.71          |
| <b>NY P FRDM NG 5/15/100 EPO 26</b>       |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$5/\$15                                      | Single             | \$1,739.05                    | \$1,773.80          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100%                             | Parent/Child (ren) | \$2,956.40                    | \$3,015.47          |
| Max out of Pocket:                        | In: \$3,750/\$7,500                           | Employee/ Spouse*  | \$3,478.11                    | \$3,547.61          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$4,956.30                    | \$5,055.34          |
| <b>NY P FRDM NG 5/15/100 PPO 26</b>       |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$5/\$15                                      | Single             | \$1,782.67                    | \$1,818.28          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100% Out: \$2,000/\$4,000, 70%   | Parent/Child (ren) | \$3,030.54                    | \$3,091.08          |
| Max out of Pocket:                        | In: \$3,750/\$7,500 Out: \$5,500/\$11,000     | Employee/ Spouse*  | \$3,565.35                    | \$3,636.57          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$5,080.62                    | \$5,182.11          |
| <b>NY P FRDM NG 10/25/250/90 EPO 26</b>   |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$10/\$25                                     | Single             | \$1,660.55                    | \$1,693.72          |
| Ded and Coinsurance:                      | In: \$250/\$500, 90%                          | Parent/Child (ren) | \$2,822.93                    | \$2,879.33          |
| Max out of Pocket:                        | In: \$2,750/\$5,500                           | Employee/ Spouse*  | \$3,321.09                    | \$3,387.45          |
| RX plan:                                  | 100D on T2 & T3 \$5/\$35/\$70                 | Family             | \$4,732.56                    | \$4,827.11          |
| <b>NY P FRDM NG 15/25/100 EPO 26</b>      |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                 | \$15/\$25                                     | Single             | \$1,715.31                    | \$1,749.57          |
| Ded and Coinsurance:                      | In: \$0/\$0, 100%                             | Parent/Child (ren) | \$2,916.03                    | \$2,974.27          |
| Max out of Pocket:                        | In: \$3,500/\$7,000                           | Employee/ Spouse*  | \$3,430.62                    | \$3,499.14          |
| RX plan:                                  | 150D on T2 & T3 \$10/\$65/\$95                | Family             | \$4,888.62                    | \$4,986.28          |

**2026 New York Small Group (1-100) Oxford Products: Q2 2026 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



| <b>Gold Plans</b>                           |  |                    |                               |                     |
|---|--|--------------------|-------------------------------|---------------------|
| <b>NY G FRDM NG 15/35/1750/90 EPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$15/\$35  | Single             | \$1,477.80                    | \$1,507.33          |
| Ded and Coinsurance:                        | In: \$1,750/\$3,500, 90%                           | Parent/Child (ren) | \$2,512.26                    | \$2,562.46          |
| Max out of Pocket:                          | In: \$8,000/\$16,000                               | Employee/ Spouse*  | \$2,955.61                    | \$3,014.65          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$40/\$80                     | Family             | \$4,211.74                    | \$4,295.87          |
| <b>NY G FRDM NG 1700/90 EPO HSA 26</b>      |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | Ded + 90%/Ded + 90%                                | Single             | \$1,397.41                    | \$1,425.33          |
| Ded and Coinsurance:                        | In: \$1,700/\$3,400, 90%                           | Parent/Child (ren) | \$2,575.60                    | \$2,623.05          |
| Max out of Pocket:                          | In: \$5,750/\$11,500                               | Employee/ Spouse*  | \$2,794.82                    | \$2,850.65          |
| RX plan:                                    | Ded Med/Rx \$10/\$40/\$80                          | Family             | \$3,982.62                    | \$4,062.17          |
| <b>NY G FRDM NG 1700/90 PPO HSA 26</b>      |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | Ded + 90%/Ded + 90%                                | Single             | \$1,432.26                    | \$1,460.87          |
| Ded and Coinsurance:                        | In: \$1,700/\$3,400, 90% Out: \$4,000/\$8,000, 60% | Parent/Child (ren) | \$2,434.83                    | \$2,483.47          |
| Max out of Pocket:                          | In: \$5,750/\$11,500 Out: \$10,500/\$21,000        | Employee/ Spouse*  | \$2,864.51                    | \$2,921.73          |
| RX plan:                                    | Ded Med/Rx \$10/\$40/\$80                          | Family             | \$4,081.93                    | \$4,163.47          |
| <b>NY G FRDM NG 25/40/1500/80 PPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$25/\$40  | Single             | \$1,514.15                    | \$1,544.39          |
| Ded and Coinsurance:                        | In: \$1,500/\$3,000, 80% Out: \$4,000/\$8,000, 60% | Parent/Child (ren) | \$2,574.06                    | \$2,625.47          |
| Max out of Pocket:                          | In: \$7,250/\$14,500 Out: \$10,500/\$21,000        | Employee/ Spouse*  | \$3,028.30                    | \$3,088.79          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$40/\$80                     | Family             | \$4,315.33                    | \$4,401.52          |
| <b>NY G FRDM NG 25/40/1750/80 EPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$25/\$40  | Single             | \$1,470.43                    | \$1,499.79          |
| Ded and Coinsurance:                        | In: \$1,750/\$3,500, 80%                           | Parent/Child (ren) | \$2,499.73                    | \$2,549.65          |
| Max out of Pocket:                          | In: \$6,500/\$13,000                               | Employee/ Spouse*  | \$2,940.86                    | \$2,999.59          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$40/\$80                     | Family             | \$4,190.72                    | \$4,274.41          |
| <b>NY G FRDM NG 30/60/2250/70 EPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$30/\$60  | Single             | \$1,422.24                    | \$1,450.64          |
| Ded and Coinsurance:                        | In: \$2,250/\$4,500, 70%                           | Parent/Child (ren) | \$2,417.81                    | \$2,466.09          |
| Max out of Pocket:                          | In: \$7,250/\$14,500                               | Employee/ Spouse*  | \$2,844.48                    | \$2,901.29          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$40/\$80                     | Family             | \$4,053.39                    | \$4,134.33          |
| <b>NY G FRDM NG 50/50/1000/90 EPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$50/\$50  | Single             | \$1,490.78                    | \$1,520.56          |
| Ded and Coinsurance:                        | In: \$1,000/\$2,000, 90%                           | Parent/Child (ren) | \$2,534.32                    | \$2,584.95          |
| Max out of Pocket:                          | In: \$6,700/\$13,400                               | Employee/ Spouse*  | \$2,981.56                    | \$3,041.12          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$40/\$80                     | Family             | \$4,281.52                    | \$4,333.60          |
| <b>NY G LBTY NG 1700/90 EPO HSA PR 26</b>   |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | Ded + 90%/Ded + 90%                                | Single             | \$1,340.82                    | \$1,367.60          |
| Ded and Coinsurance:                        | In: \$1,700/\$3,400, 90%                           | Parent/Child (ren) | \$2,279.39                    | \$2,324.93          |
| Max out of Pocket:                          | In: \$5,750/\$11,500                               | Employee/ Spouse*  | \$2,681.63                    | \$2,735.20          |
| RX plan:                                    | Ded Med/Rx \$10/\$50/\$90                          | Family             | \$3,821.32                    | \$3,897.66          |
| <b>NY G LBTY NG 25/50/100 EPO ZD 26</b>     |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$25/\$50  | Single             | \$1,497.59                    | \$1,527.51          |
| Ded and Coinsurance:                        | In: \$0/\$0, 100%                                  | Parent/Child (ren) | \$2,545.90                    | \$2,596.76          |
| Max out of Pocket:                          | In: \$7,300/\$14,600                               | Employee/ Spouse*  | \$2,995.18                    | \$3,055.02          |
| RX plan:                                    | 200D on T2 & T3 \$10/\$50/\$90                     | Family             | \$4,268.12                    | \$4,353.41          |
| <b>NY G LBTY NG 30/60/1800/70 EPO 26</b>    |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$30/\$60  | Single             | \$1,365.37                    | \$1,392.65          |
| Ded and Coinsurance:                        | In: \$1,800/\$3,600, 70%                           | Parent/Child (ren) | \$2,321.13                    | \$2,367.50          |
| Max out of Pocket:                          | In: \$7,500/\$15,000                               | Employee/ Spouse*  | \$2,730.74                    | \$2,785.30          |
| RX plan:                                    | 200D on T2 & T3 \$10/\$50/\$90                     | Family             | \$3,891.30                    | \$3,969.06          |
| <b>NY G FRDM NG 2200/100 EPO HSA PR 26</b>  |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | Ded + 100%/Ded + 100%                              | Single             | \$1,388.80                    | \$1,416.54          |
| Ded and Coinsurance:                        | In: \$2,200/\$4,400, 100%                          | Parent/Child (ren) | \$2,360.96                    | \$2,408.12          |
| Max out of Pocket:                          | In: \$8,300/\$16,600                               | Employee/ Spouse*  | \$2,777.61                    | \$2,833.09          |
| RX plan:                                    | Ded Med/Rx \$10/\$40/\$80                          | Family             | \$3,958.09                    | \$4,037.15          |
| <b>NY G FRDM NG 25/50/100 EPO ZD 26</b>     |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$25/\$50  | Single             | \$1,558.07                    | \$1,589.19          |
| Ded and Coinsurance:                        | In: \$0/\$0, 100%                                  | Parent/Child (ren) | \$2,648.71                    | \$2,701.63          |
| Max out of Pocket:                          | In: \$7,300/\$14,600                               | Employee/ Spouse*  | \$3,116.13                    | \$3,178.39          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$65/\$95                     | Family             | \$4,440.49                    | \$4,529.20          |
| <b>NY G LBTY NG 30/60/1250/100 EPO 26</b>   |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$30/\$60  | Single             | \$1,424.52                    | \$1,452.98          |
| Ded and Coinsurance:                        | In: \$1,250/\$2,500, 100%                          | Parent/Child (ren) | \$2,421.68                    | \$2,470.07          |
| Max out of Pocket:                          | In: \$7,000/\$14,000                               | Employee/ Spouse*  | \$2,849.04                    | \$2,905.96          |
| RX plan:                                    | 200D on T2 & T3 \$10/\$50/\$90                     | Family             | \$4,059.87                    | \$4,140.99          |
| <b>NY G MTRO GT 25/40/775/80 EPO HNY 26</b> |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | Ded + \$25/Ded + \$40                              | Single             | \$1,068.43                    | \$1,089.76          |
| Ded and Coinsurance:                        | In: \$775/\$1,550, 80%                             | Parent/Child (ren) | \$1,816.33                    | \$1,852.59          |
| Max out of Pocket:                          | In: \$10,150/\$20,300                              | Employee/ Spouse*  | \$2,136.86                    | \$2,179.52          |
| RX plan:                                    | \$10/\$35/\$70                                     | Family             | \$3,045.02                    | \$3,105.82          |
| <b>NY G MTRO NG 25/40/1250/80 EPO ME 26</b> |  | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                   | \$25/\$40  | Single             | \$1,327.31                    | \$1,353.82          |
| Ded and Coinsurance:                        | In: \$1,250/\$2,500, 80%                           | Parent/Child (ren) | \$2,256.42                    | \$2,301.49          |
| Max out of Pocket:                          | In: \$6,700/\$13,400                               | Employee/ Spouse*  | \$2,654.62                    | \$2,707.64          |
| RX plan:                                    | 150D on T2 & T3 \$10/\$65/\$95                     | Family             | \$3,782.83                    | \$3,858.38          |

**2026 New York Small Group (1-100) Oxford Products: Q2 2026 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



| <b>Silver Plans</b>                          |   |                    |                        |              |
|--|---|--------------------|------------------------|--------------|
| <b>NY S FRDM NG 2500/60 EPO HSA 26</b>       |   |                    |                        |              |
| PCP/Spec:                                    | Ded + 60%/Ded + 60%                                 | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$2,500/\$5,000, 60%                            | Single             | \$1,210.26             | \$1,234.43   |
| Max out of Pocket:                           | In: \$8,000/\$16,000                                | Parent/Child (ren) | \$2,057.45             | \$2,098.53   |
| RX plan:                                     | Ded Med/Rx \$10/\$40/\$80                           | Employee/ Spouse*  | \$2,420.53             | \$2,468.85   |
|  |   | Family             | \$3,449.26             | \$3,518.11   |
| <b>NY S FRDM NG 30/60/3000/80 EPO HSA 26</b> |   |                    |                        |              |
| PCP/Spec:                                    | Ded + \$30/Ded + \$60                               | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,000/\$6,000, 80%                            | Single             | \$1,248.15             | \$1,273.08   |
| Max out of Pocket:                           | In: \$7,350/\$14,700                                | Parent/Child (ren) | \$2,131.86             | \$2,164.24   |
| RX plan:                                     | Ded Med/Rx \$10/\$40/\$80                           | Employee/ Spouse*  | \$2,496.30             | \$2,546.15   |
|  |   | Family             | \$3,557.22             | \$3,628.27   |
| <b>NY S FRDM NG 30/60/2350/70 PPO HSA 26</b> |   |                    |                        |              |
| PCP/Spec:                                    | Ded + \$30/Ded + \$60                               | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$2,350/\$4,700, 70% Out: \$6,000/\$12,000, 50% | Single             | \$1,267.22             | \$1,292.54   |
| Max out of Pocket:                           | In: \$8,300/\$16,600 Out: \$15,500/\$31,000         | Parent/Child (ren) | \$2,134.28             | \$2,197.32   |
| RX plan:                                     | Ded Med/Rx \$10/\$40/\$80                           | Employee/ Spouse*  | \$2,534.45             | \$2,585.08   |
|  |   | Family             | \$3,611.59             | \$3,683.75   |
| <b>NY S FRDM NG 40/80/3250/60 EPO 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$40/\$80   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,250/\$6,500, 60%                            | Single             | \$1,253.97             | \$1,279.02   |
| Max out of Pocket:                           | In: \$9,200/\$18,400                                | Parent/Child (ren) | \$2,121.75             | \$2,174.33   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$50/\$90                      | Employee/ Spouse*  | \$2,507.94             | \$2,558.04   |
|  |   | Family             | \$3,573.81             | \$3,645.20   |
| <b>NY S FRDM NG 40/80/3250/60 PPO 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$40/\$80   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,250/\$6,500, 60% Out: \$6,000/\$12,000, 50% | Single             | \$1,286.00             | \$1,311.69   |
| Max out of Pocket:                           | In: \$9,200/\$18,400 Out: \$15,500/\$31,000         | Parent/Child (ren) | \$2,186.20             | \$2,229.88   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$50/\$90                      | Employee/ Spouse*  | \$2,572.00             | \$2,623.39   |
|  |   | Family             | \$3,665.11             | \$3,738.33   |
| <b>NY S LBTY NG 30/60/3000/80 EPO HSA 26</b> |   |                    |                        |              |
| PCP/Spec:                                    | Ded + \$30/Ded + \$60                               | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,000/\$6,000, 80%                            | Single             | \$1,197.69             | \$1,221.61   |
| Max out of Pocket:                           | In: \$7,350/\$14,700                                | Parent/Child (ren) | \$2,036.07             | \$2,076.73   |
| RX plan:                                     | Ded Med/Rx \$10/\$50/\$90                           | Employee/ Spouse*  | \$2,395.37             | \$2,443.21   |
|  |   | Family             | \$3,413.41             | \$3,481.58   |
| <b>NY S LBTY NG 30/75/4000/50 EPO 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$30/\$75   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$4,000/\$8,000, 50%                            | Single             | \$1,184.43             | \$1,208.09   |
| Max out of Pocket:                           | In: \$9,300/\$18,600                                | Parent/Child (ren) | \$2,013.53             | \$2,053.76   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$50/\$90 up to \$800          | Employee/ Spouse*  | \$2,368.87             | \$2,416.18   |
|  |   | Family             | \$3,375.64             | \$3,443.06   |
| <b>NY S LBTY NG 40/80/3250/60 EPO 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$40/\$80   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,250/\$6,500, 60%                            | Single             | \$1,204.01             | \$1,228.06   |
| Max out of Pocket:                           | In: \$9,200/\$18,400                                | Parent/Child (ren) | \$2,046.82             | \$2,087.70   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$50/\$90                      | Employee/ Spouse*  | \$2,408.02             | \$2,456.12   |
|  |   | Family             | \$3,431.43             | \$3,499.97   |
| <b>NY S LBTY NG 4000/80 EPO HSA PR 26</b>    |   |                    |                        |              |
| PCP/Spec:                                    | Ded + 80%/Ded + 80%                                 | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$4,000/\$8,000, 80%                            | Single             | \$1,135.95             | \$1,158.64   |
| Max out of Pocket:                           | In: \$8,000/\$16,000                                | Parent/Child (ren) | \$1,931.12             | \$1,969.68   |
| RX plan:                                     | Ded Med/Rx \$10/\$50/\$90                           | Employee/ Spouse*  | \$2,271.90             | \$2,317.27   |
|  |   | Family             | \$3,237.46             | \$3,302.11   |
| <b>NY S LBTY NG 50/100/100 EPO ZD 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$50/\$100  | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$0/\$0, 100%                                   | Single             | \$1,333.98             | \$1,360.62   |
| Max out of Pocket:                           | In: \$9,300/\$18,600                                | Parent/Child (ren) | \$2,267.77             | \$2,313.05   |
| RX plan:                                     | 200D on T2 & T3 \$15/\$65/\$95                      | Employee/ Spouse*  | \$2,667.96             | \$2,721.24   |
|  |   | Family             | \$3,801.84             | \$3,877.76   |
| <b>NY S FRDM NG 50/100/100 EPO ZD 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$50/\$100  | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$0/\$0, 100%                                   | Single             | \$1,389.36             | \$1,417.11   |
| Max out of Pocket:                           | In: \$9,300/\$18,600                                | Parent/Child (ren) | \$2,361.91             | \$2,409.09   |
| RX plan:                                     | 200D on T2 & T3 \$15/\$65/\$95                      | Employee/ Spouse*  | \$2,778.72             | \$2,834.22   |
|  |   | Family             | \$3,959.68             | \$4,038.76   |
| <b>NY S LBTY NG 30/60/4500/50 EPO 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$30/\$60   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$4,500/\$9,000, 50%                            | Single             | \$1,194.89             | \$1,218.76   |
| Max out of Pocket:                           | In: \$9,800/\$19,600                                | Parent/Child (ren) | \$2,031.31             | \$2,071.89   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$50/\$90                      | Employee/ Spouse*  | \$2,389.78             | \$2,437.52   |
|  |   | Family             | \$3,405.44             | \$3,473.46   |
| <b>NY S MTRO NG 30/80/3750/60 EPO ME 26</b>  |   |                    |                        |              |
| PCP/Spec:                                    | \$30/\$80   | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$3,750/\$7,500, 60%                            | Single             | \$1,120.35             | \$1,142.72   |
| Max out of Pocket:                           | In: \$9,200/\$18,400                                | Parent/Child (ren) | \$1,904.60             | \$1,942.62   |
| RX plan:                                     | 200D on T2 & T3 \$10/\$65/\$95                      | Employee/ Spouse*  | \$2,240.70             | \$2,285.43   |
|  |   | Family             | \$3,193.00             | \$3,256.74   |
| <b>NY S MTRO NG 50/100/100 EPO ZD 26</b>     |   |                    |                        |              |
| PCP/Spec:                                    | \$50/\$100  | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$0/\$0, 100%                                   | Single             | \$1,247.93             | \$1,272.86   |
| Max out of Pocket:                           | In: \$9,300/\$18,600                                | Parent/Child (ren) | \$2,121.49             | \$2,163.86   |
| RX plan:                                     | 200D on T2 & T3 \$15/\$65/\$95                      | Employee/ Spouse*  | \$2,495.87             | \$2,545.72   |
|  |   | Family             | \$3,556.61             | \$3,627.66   |
| <b>NY S MTRO NG 35/50/4000/70 EPO HSA 26</b> |   |                    |                        |              |
| PCP/Spec:                                    | Ded + \$35/Ded + \$50                               | Tier               | Rate (select counties) | Dep 29 Rider |
| Ded and Coinsurance:                         | In: \$4,000/\$8,000, 70%                            | Single             | \$1,086.89             | \$1,108.60   |
| Max out of Pocket:                           | In: \$7,200/\$14,400                                | Parent/Child (ren) | \$1,847.72             | \$1,884.62   |
| RX plan:                                     | Ded Med/Rx \$10/\$65/50% up to \$800                | Employee/ Spouse*  | \$2,173.79             | \$2,217.20   |
|  |   | Family             | \$3,097.65             | \$3,159.51   |

**2026 New York Small Group (1-100) Oxford Products: Q2 2026 Rates**

Use the table below to review monthly rates for New York small group Oxford<sup>1</sup> products. Rates are for **Region 4** in the Oxford service area, which includes: Bronx, Kings, New York, Queens, Richmond, Rockland, and Westchester counties. This guide is for informational purposes only. We reserve the right to correct any typographical errors. For a complete listing of all New York small group (1-100) products, please contact your sales representative. Note - Healthy NY eligibility: 50 or fewer employees.



| <b>Bronze Plans</b>                          |   |                    |                               |                     |
|--|---|--------------------|-------------------------------|---------------------|
| <b>NY B FRDM NG 5000/50 EPO HSA 26</b>       |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                    | Ded + 50%/Ded + 50%                                   | Single             | \$1,135.33                    | \$1,157.99          |
| Ded and Coinsurance:                         | In: \$5,000/\$10,000, 50%                             | Parent/Child (ren) | \$1,930.06                    | \$1,968.59          |
| Max out of Pocket:                           | In: \$8,000/\$16,000                                  | Employee/ Spouse*  | \$2,270.65                    | \$2,315.99          |
| RX plan:                                     | Ded Med/Rx \$10/\$40/\$80                             | Family             | \$3,235.68                    | \$3,300.28          |
| <b>NY B LBTY NG 25/75/5750/70 EPO HSA 26</b> |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                    | Ded + \$25/Ded + \$75                                 | Single             | \$1,083.73                    | \$1,105.38          |
| Ded and Coinsurance:                         | In: \$5,750/\$11,500, 70%                             | Parent/Child (ren) | \$1,842.35                    | \$1,879.14          |
| Max out of Pocket:                           | In: \$8,000/\$16,000                                  | Employee/ Spouse*  | \$2,167.47                    | \$2,210.76          |
| RX plan:                                     | Ded Med/Rx 30%/30%/30%                                | Family             | \$3,088.64                    | \$3,150.33          |
| <b>NY B LBTY NG 7250/100 EPO HSA 26</b>      |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                    | Ded + 100%/Ded + 100%                                 | Single             | \$1,099.89                    | \$1,121.86          |
| Ded and Coinsurance:                         | In: \$7,250/\$14,500, 100%                            | Parent/Child (ren) | \$1,869.81                    | \$1,907.17          |
| Max out of Pocket:                           | In: \$7,250/\$14,500                                  | Employee/ Spouse*  | \$2,199.78                    | \$2,243.73          |
| RX plan:                                     | Ded Med/Rx \$0/\$0/\$0                                | Family             | \$3,134.68                    | \$3,197.31          |
| <b>NY B FRDM NG 30/60/6750/80 PPO HSA 26</b> |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                    | Ded + \$30/Ded + \$60                                 | Single             | \$1,147.68                    | \$1,170.61          |
| Ded and Coinsurance:                         | In: \$6,750/\$13,500, 80% Out: \$12,500/\$25,000, 80% | Parent/Child (ren) | \$1,951.07                    | \$1,990.05          |
| Max out of Pocket:                           | In: \$8,000/\$16,000 Out: \$31,250/\$62,500           | Employee/ Spouse*  | \$2,295.37                    | \$2,341.23          |
| RX plan:                                     | Ded Med/Rx \$10/\$50/\$90                             | Family             | \$3,270.90                    | \$3,336.25          |
| <b>NY B MTRO NG 40/75/6500/50 EPO HSA 26</b> |   | <b>Tier</b>        | <b>Rate (select counties)</b> | <b>Dep 29 Rider</b> |
| PCP/Spec:                                    | Ded + \$40/Ded + \$75                                 | Single             | \$1,011.35                    | \$1,031.53          |
| Ded and Coinsurance:                         | In: \$6,500/\$13,000, 50%                             | Parent/Child (ren) | \$1,719.29                    | \$1,753.61          |
| Max out of Pocket:                           | In: \$8,000/\$16,000                                  | Employee/ Spouse*  | \$2,022.70                    | \$2,063.07          |
| RX plan:                                     | Ded Med/Rx \$10/\$40/\$80                             | Family             | \$2,882.34                    | \$2,939.87          |

\* Employee / Spouse rate is the rate for Employee / Domestic Partner coverage if additional coverage is available and purchased by the group.

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