



Region 3 Rates 10/01/11 - 12/15/11
Rockland

One Life Groups - New

IN-NETWORK ONLY PLANS	Mixed Tier Rates				Four Tier Rates			
	EE	EE/Spouse	EE/Child(ren)	Family	EE	EE/Spouse	EE/Child(ren)	Family
Oxford Freedom Ease EPO 50-500 (2500 max) <small>PHYSICIAN COPAY: \$50, HOSPITAL COPAY: \$500 PER DAY TO A MAX OF \$2,500, Rx: \$15/35/75 (\$100 ded)</small>								
Oxford	\$563.14	\$1,232.55	\$1,042.84	\$1,742.57	\$563.14	\$1,232.55	\$1,042.84	\$1,742.57
Oxford Liberty HMO 30/50-500 (1000 max) <small>PHYSICIAN COPAY: \$30 PRIMARY/\$50 SPECIALIST, HOSPITAL COPAY: \$500 PER DAY TO A MAX OF \$1,000, Rx: \$15/35/75 (\$100 ded)</small>								
Oxford	\$472.72	\$1,033.63	\$875.62	\$1,462.37	\$472.72	\$1,033.63	\$875.62	\$1,462.37
COST-SHARING PLANS	EE	EE/Spouse	EE/Child(ren)	Family	EE	EE/Spouse	EE/Child(ren)	Family
Oxford Liberty EPOcs 25/50-2000 <small>PHYSICIAN COPAY: \$25 PRIMARY/\$50 SPECIALIST, HOSPITAL: DED & COINS, DED: \$2,000, COINS: 90/10, MAX OOP: \$1,000, Rx: \$15/35/75 (\$100 ded)</small>								
Oxford	\$443.26	\$968.81	\$821.06	\$1,370.94	\$443.26	\$968.81	\$821.06	\$1,370.94
Oxford Liberty PPOcs 25/40-1000/2000 <small>PHYSICIAN COPAY: \$25 PRIMARY/\$40 SPECIALIST, HOSPITAL: DED & COINS, DED: \$1,000, COINS: 80/20, MAX OOP: \$2,000, OON DED: \$2,000, OON COINS: 60/40, OON MAX OOP: \$4,000, Rx: \$15/50%/50% (\$100 ded)</small>								
Oxford	\$587.01	\$1,285.06	\$1,087.18	\$1,851.02	\$587.01	\$1,285.06	\$1,087.18	\$1,851.02

These rates are subject to final verification at time of enrollment. Domestic Partner Coverage through all carriers. Oxford HMO plans are gated.

All rates includes \$3.05 for HealthPass Program benefits that are not included as a part of normal carrier or agent services. Oxford plans include an additional billing and administrative fee as follows: EE \$14.75, EE/Spouse \$29.75, EE+Child(ren) \$27.50, Family \$43.25