

Every lifestyle. Every budget.

A five-step guide to help you understand your health insurance and enrollment options for 2026.



Call today

to get your **FREE** health plan evaluation.

We can help see if you qualify for a **free or low cost plan** or **reduced premiums**.

Central New York Region

Available Counties: Broome, Cayuga, Chemung, Cortland, Onondaga, Schuyler, Steuben, Tioga, Tompkins

STEP 1: Getting started.

Health care coverage is one of the most important decisions you make. Protect yourself and your family with the compassion of the cross and the security of the shield. You can feel confident in your decision when you have the right information and the right people to guide you. We have been here over 90 years helping people find health insurance that best fits their needs and budgets.

This five-step guide will help you shop and compare your coverage options for 2026. Once you have chosen a plan, you can enroll directly with us, or through the NY State of Health Marketplace where financial help may be available. Call today to get started with your free health plan evaluation or to schedule an appointment. We are here to help you every step of the way.

5 questions to ask before you buy.

Here are a few questions to ask yourself before making this important choice.

1. What are the health care needs of my household?



Take an evaluation of the number of doctor visits, hospital visits and the prescriptions that you and your family have needed over the last year.

Doctor visits _____

Hospital visits _____

Prescriptions _____

2. How do I want to manage my costs?



Determine if you are comfortable with a deductible and a lower monthly cost or if you would rather pay more per month for lower and more predictable costs when getting care.

3. Can I get financial help?



You may be eligible for financial assistance based on your household income and size. Find out how much by calling our dedicated representatives.

Estimated tax credit \$ _____

4. How do I know if my doctor accepts the plan I am choosing?



Ask your doctor if they accept the health insurance company you are considering. Excellus BlueCross BlueShield plans are accepted by a large network of hospitals and doctors.

5. How often do I travel outside of my town?



Our BlueCard® program* gives you access to care when you travel in the United States, Canada, Mexico, Puerto Rico, the US Virgin Islands, Guam, and the Mariana Islands. You can also fill a prescription while traveling, using our National Pharmacy Network.









You will also have coverage for non-emergency care 24/7 for you and your family with our telemedicine program in partnership with MDLIVE. See a board-certified doctor by phone or video on your schedule, anytime, anywhere.

*BlueCard® does not apply to Essential Plan.

STEP 2: Get help paying for your plan.

It is time to start rethinking affordable health care. You might be surprised to know that you may be able to get money towards your monthly payment through something called a tax credit. Eligibility is based on your household size and income. The chart below shows estimated eligibility.

Financial assistance eligibility by annual income level*	
Family size	Annual income eligibility for tax credits
	\$39,126 - \$62,600
	\$52,876 - \$84,600
	\$66,626 - \$106,600
	\$80,376 - \$128,600
	\$94,126 - \$150,600
	\$107,876 - \$172,600

*Source: 2025 Federal Income Guidelines: Department of Health and Human Services.
Full calculator available at <https://aspe.hhs.gov/poverty-guidelines>

What counts as income?

Include:

- Pay from your job(s)
- Self-employment income after expenses
- Social Security benefits – retirement or disability
- Pensions & other retirement income
- Investment income (capital gains, dividends, stock options, foreign income & taxable interest)
- Rental income or royalties
- Farming or fishing
- Alimony for a divorce filed on or before 12/31/18
- Other taxable income (refunds, canceled debts, court awards, jury duty pay, cash support, gambling income, prizes or awards, etc.)
- New York State Unemployment
- Short-term disability

Do NOT include:

- Child support
- Supplemental Security Income (SSI)
- Veterans' disability payments
- Workers' compensation
- Gifts



Financial help is only available when you buy a plan on the NY State of Health Marketplace.

Call us for help estimating your tax credit.

STEP 3: Let us help you find the right plan.

Choosing the right health insurance for you and your family is an important decision. We understand, and we want you to feel confident in your choice. Eligibility for New York State sponsored plans is based on your household size and income. Qualified Health Plan levels are Bronze, Silver, Gold and Platinum. The benefits are essentially the same in every plan but the monthly and out-of-pocket costs differ. **There is no cost for preventive care no matter which plan you choose.**

	NY State sponsored	Bronze	Silver	Gold	Platinum
Monthly cost		●	●●	●●●	●●●●
Cost when you get care	●	●●●●	●●●●	●●	●
Good option if you...	need low-cost coverage. Eligibility for these plans is based on your household size and income*	use health care services infrequently	need to balance your monthly premium with your out-of-pocket costs	want to save on monthly premiums while keeping your out-of-pocket costs low	may use a lot of health care services and want predictable, lower out-of-pocket costs for routine care

*other eligibility guidelines apply

Follow the path and get a first look at the plan that might be right for you or your family.

**Think about everyone for whom you need coverage.
Do you or they frequently go to the doctor or hospital?**



STEP 4: Compare your options.

We make it easy for you to evaluate your plan options with our comparison chart. View plan options on the following pages. Select the options that may fit your needs and fill in the information in the chart below. You can use the definitions below to understand some of the key plan terms.

	PLAN 1	PLAN 2	PLAN 3
Fill in your plan choice.			
Deductible			
Copay			
Coinsurance			
Out-of-pocket maximum			

Find out what your real monthly cost could look like.

Monthly premium			
- Estimated tax credit			
ESTIMATED PREMIUM			

Words you should know.

Deductible Amount you pay for health care coverage before we start contributing.

Example: You have a \$1,000 deductible. Your doctor visit costs \$100. You pay the full \$100. Your deductible is now \$900. Once the deductible is met, we start contributing to the costs.

Copay A fixed dollar amount you pay for health care costs. Depending on your plan, you may have to meet a deductible first.

Example: Your doctor visit costs \$100. You pay a \$15 fixed copay for the visit. We cover the remaining \$85.

Premium Monthly amount you pay for health care coverage.

Coinsurance Percentage of health care costs that you are responsible for paying. Depending on your plan, you may have to meet a deductible first.

Example: A doctor's visit costs \$100. You pay 20% of \$100, or \$20. We cover the remaining \$80.

Out-of-pocket maximum
The most you will pay for annual health care.

Health Savings Account (HSA) A tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more. To learn more about your HSA options contact your financial advisor.

We have a plan for everyone.



Everyone deserves access to quality, affordable health care coverage

We have got you covered with free or low cost New York State sponsored insurance plans such as Medicaid, Child Health Plus, and the Essential Plan, as well as individual and family plans from the name you have known and trusted for over 90 years.

Most individual and family plans vary in price and have eligibility guidelines based on your household income and where you live, determined by New York State. Call us to get personalized help for your unique health care situation.

Medicaid

With Medicaid, you and your family will have access to a wide network of quality doctors and specialists, hospitals and urgent care centers.

Child Health Plus

Just need coverage for your kids? Child Health Plus is a New York State sponsored health insurance program for kids under 19 years old. Almost all children qualify, and many families qualify for free coverage.

The Essential Plan

Premiums are \$0 month for eligible individuals, with coverage widely accepted by doctors, hospitals and pharmacies. Individuals under age 65 may be eligible based on New York State household size and income guidelines.

Individual and Family Qualified Health Plans

Get the benefits you and your family need with our Bronze, Silver, Gold, and Platinum plans with coverage accepted by a large network of hospitals and doctors. Nearly 3 out of 4 New Yorkers qualify for reduced premiums.

Dental Plans

When it comes to maintaining overall health and wellbeing, taking care of your teeth is just as important as taking care of the rest of your body. You can save on dental care with our individual and family dental plans.

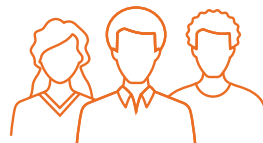
Free or low cost New York State sponsored health insurance programs

Everyone deserves quality health care coverage.

We can help you fill out applications, answer your questions, and understand your eligibility. To learn more, just call **1-888-768-7888** (TTY 711).

Here is a quick overview of where our products are currently available:

	Blue Option Plus/ HMOBlue Option	Child Health Plus
Central New York Region		
Cayuga		■
Cortland		■
Jefferson		■
Lewis		■
Onondaga	■	■
Oswego		■
St. Lawrence		■
Tompkins		■
Southern Tier Region		
Broome	■	■
Chemung		■
Chenango		■
Schuyler		■
Steuben		■
Tioga		■
Utica Region		
Oneida	■	■
Herkimer	■	■
Franklin		■
Clinton		■
Essex		■
Hamilton		■
Fulton		■
Montgomery		■
Otsego	■	■
Delaware		■
Madison		■



These New York State sponsored health insurance programs cover many who:

- Are uninsured
- Are unemployed
- Have no insurance through their employer



Call:
1-888-768-7888
(TTY 711)

To learn more about applying for health insurance, including Medicaid, Child Health Plus, Essential Plan and Qualified Health Plans, through NY State of Health, The Official Health Plan Marketplace, visit **nystateofhealth.ny.gov** or call **1-855-355-5777**.

Excellus 
ChooseExcellus.com

 **Department of Health** | **Medicaid**



 **nystateofhealth**
The Official Health Plan Marketplace

Have questions? We can help.

We can help you through the enrollment process – from start to finish.

Eligibility depends on income and household size, so please give Member Services a call at **1-888-768-7888** (TTY 711) to learn more.



HMOBlue Option

HMOBlue Option is a New York State sponsored health insurance program for children and adults. It covers services such as:

- Inpatient hospital care
- Emergency care
- Laboratory and X-ray services
- Routine physical exams and well child doctor visits and immunizations
- Telehealth and telemedicine visits
- Routine eye exams and eyewear (restrictions may apply)

You and your family will receive these services from your primary care provider (PCP). If, in some cases your PCP cannot provide the health care you need, they will refer you to see another doctor. This plan gives you access to a wide network of quality doctors and specialists.

Child Health Plus

Every child deserves quality health care. Child Health Plus is a New York State sponsored health insurance program, administered by Excellus BCBS that offers health insurance coverage to children under 19 who are not Medicaid eligible, do not have other health insurance or access to the public employees' New York State Health Insurance Program, NYSHIP.

Your child will receive health care at a low premium cost, or no cost at all, depending on your income level and household size. Child Health Plus covers services like:

- Regular well child doctor check-ups and immunizations
- Inpatient hospital services
- Prescription and nonprescription drugs if ordered by a licensed provider
- Routine eye exams
- Dental care
- And more!

Choose from a wide network of doctors to provide your child's care.

Blue Option Plus

Blue Option Plus is a New York State sponsored Health and Recovery Plan (HARP) administered by Excellus BCBS that manages physical health, mental health, and substance use services all in one integrated way for adults with significant behavioral health needs (mental health or substance use).

Who is eligible?

Individuals age 21 or older who have received a letter from New York State stating they are eligible to join HARP can enroll.



Healthy children need the security of **Child Health Plus**

Who qualifies?

Children under age 19 who are not eligible for Medicaid and have no other health insurance.

Almost all children qualify. Many families qualify for **FREE** coverage. **No family earns too much to qualify for low cost coverage.**

And there are **no** copayments and **no** deductibles.



Annual income by family size

Monthly premium	1	2	3	4	5	6	7	8	Each additional person, add:
FREE Insurance \$0 per child per month	\$35,432	\$48,041	\$60,651	\$73,260	\$85,870	\$98,480	\$111,089	\$123,699	\$12,610
\$15 per child per month (maximum of \$45 per family)	\$39,900	\$54,100	\$68,300	\$82,500	\$96,700	\$110,900	\$125,100	\$139,300	\$14,200
\$30 per child per month (maximum of \$90 per family)	\$47,880	\$64,920	\$81,960	\$99,000	\$116,040	\$133,080	\$150,120	\$167,160	\$17,040
\$45 per child per month (maximum of \$135 per family)	\$55,860	\$75,740	\$95,620	\$115,500	\$135,380	\$155,260	\$175,140	\$195,020	\$19,880
\$60 per child per month (maximum of \$180 per family)	\$63,840	\$86,560	\$109,280	\$132,000	\$154,720	\$177,440	\$200,160	\$222,880	\$22,720
Full premium per child per month	Over \$63,840	Over \$86,560	Over \$109,280	Over \$132,000	Over \$154,720	Over \$177,440	Over \$200,160	Over \$222,880	

We can help you enroll any time of the year.
ChooseExcellus.com

To learn more about applying for health insurance, including Medicaid, Child Health Plus, Essential Plan, and Qualified Health Plans through NY State of Health, The Official Health Plan Marketplace, visit www.nystateofhealth.ny.gov or call 1-855-355-5777.



Everybody Benefits

For household size, pregnant women count as two. Income eligibility as of February 2026. Full premiums vary by health plan and county.
 ATTENTION: Language assistance services and other aids, free of charge, are available to you. Call 1-800-650-4359 (TTY 711).
 ATENCIÓN: Dispone de servicios de asistencia lingüística y otras ayudas, gratis. Llame al 1-800-650-4359 (TTY 711).
 请注意：您可以免费获得语言协助服务和其他辅助服务。请致电 1-800-650-4359 (TTY 711).
 A nonprofit independent licensee of the Blue Cross Blue Shield Association

Coverage you can count on.



More access

Many providers — a large network of hospitals and doctors in 39 counties accept our plans. Plus our BlueCard® program gives you even more access to care when you travel. Choose the card that can open doors in all 50 states.

Telemedicine — Conveniently access virtual medical and behavioral health care from the comfort of your home, now including teledermatology, new for 2026. Through our partnership with MDLIVE,® you can connect with a provider by phone or video when your regular doctor is not available.

24/7 nurse call line — Get answers to your health care questions anytime day or night.



More security

Providing quality coverage for 90+ years, with free and low cost individual & family plans for all life phases.



More savings

No cost preventive care — includes routine physicals, screenings and vaccinations, plus low-cost generic drugs.

ThriveWellSM — Our health and wellbeing benefit, in partnership with Personify Health, allows you to focus on what matters to you most. Centered on the whole person, you can work on improving your eating and sleeping habits, as well as your physical activity. Earn up to \$200 or \$400 a year in Rewards Cash for completing a Health Risk Assessment and by earning reward points through healthy activities.¹

Blue365[®] — members enjoy exclusive discounts on health and wellness products and services from fitness to healthy eating to personal care, including vision and dental discounts.



More convenience

Mobile app — 24/7 access to your member card, claims, account information, pay your bill and more.



Online account — pay your bill, order member cards, track deductibles and out-of-pocket spending, find a health care provider, and access your benefits and claims information.

Pharmacy home delivery — Save time and money by having your prescriptions safely delivered right to your home.²

¹ Not available with Medicaid, Child Health Plus or HARP. Spouse/domestic partner benefit is not available with Essential Plan.







² Certain prescription drugs may be ordered through pharmacy home delivery supplier at two and a half copays for a 90 day supply.

MDLIVE is an independent company, offering telehealth services in the Excellus BlueCross BlueShield service area.

Personify Health is a separate company and offers a digital wellbeing service on behalf of Excellus BCBS.

The Essential Plan –

Available only through NY State of Health, with eligibility based on your household size, income and other criteria. **All plans include adult vision and dental coverage.** To find out if you qualify for the Essential Plan, contact your broker or call our dedicated representatives.

Annual income eligibility for the Essential Plan		
Household size	Essential Plan 1 & 2 (139%-200% FPL)	Essential Plan 3 & 4 (under 100%-138% FPL*)
	\$22,026 - \$31,920	\$0 - \$22,025
	\$29,864 - \$43,280	\$0 - \$29,863
	\$37,703 - \$54,640	\$0 - \$37,702
	\$45,541 - \$66,000	\$0 - \$45,540
	\$53,379 - \$77,360	\$0 - \$53,378
	\$61,218 - \$88,720	\$0 - \$61,217

The benefits and out of pocket costs for the Essential Plan will be the same for all health insurance companies.

Plan benefits & features	Essential Plan 1 (151% - 200% FPL)	Essential Plan 2 (139% - 150% FPL)	Essential Plan 3 (100% - 138% FPL)	Essential Plan 4 (Below 100% FPL)
Deductible	\$0	\$0	\$0	\$0
Coinsurance	0%	0%	0%	0%
Out-of-pocket maximum	\$360	\$200	\$200	\$0
Preventive care (immunization, screenings)	\$0 for most preventive services			
Primary Care office visit (PCP)	\$15	\$0	\$0	\$0
Specialist office visit (SPC)	\$25	\$0	\$0	\$0
Hospital services	\$150	\$0	\$0	\$0
Outpatient services	\$50	\$0	\$0	\$0
Emergency Room	\$75	\$0	\$0	\$0
Urgent care	\$25	\$0	\$0	\$0
Lab work	\$25	\$0	\$0	\$0
Basic x-ray	\$25	\$0	\$0	\$0
Adult vision exam	\$0	\$0	\$0	\$0
Glasses and contact lenses	\$0	\$0	\$0	\$0
Adult dental	\$0	\$0	\$0	\$0
Telemedicine / Tele dermatology	\$0 / \$25	\$0 / \$0	\$0 / \$0	\$0 / \$0
Prescription drugs***	\$6 for Tier 1 \$15 for Tier 2 \$30 for Tier 3	\$1 for Tier 1 \$3 for Tier 2 \$3 for Tier 3	\$1 for Tier 1 \$3 for Tier 2 \$3 for Tier 3 with an out-of-pocket maximum for covered drugs of \$50 per calendar quarter	\$0 for all Tiers

Rates through NY State of Health				
Single	\$0	\$0	\$0	\$0

New York State has identified the fitness reward program as a required essential benefit that must be included for all plans, therefore the ThriveWell benefit cannot be removed from the plans.

*Must be a lawfully present immigrant ("Qualified non-citizen" immigration status without a waiting period; Humanitarian statuses or circumstances (including Temporary Protected Status, Special Juvenile Status, asylum applicants, Convention Against Torture, victims of trafficking); Valid non-immigration visas; Legal status conferred by other laws (temporary resident status, LIFE Act, Family Unity individuals). To see a full list of eligible immigration statuses, please visit the web site at www.healthcare.gov/immigrants/immigration-status/ or call the NY State of Health at 1-855-355-5777.)

***Insurance coverage for GLP-1 drugs may vary. For more information, call 1-888-768-7888 (TTY 711).

2026 certified health insurance plan options

Plan benefits & features	STANDARD			
	Bronze Standard HSA (HSA** qualified)	Bronze Standard (HSA** qualified)	Silver Standard	
Tax credit available (on-exchange only)	Yes	Yes	Yes	
Deductible (single/family)	\$5,500 / \$11,000	\$4,125 / \$8,250	\$2,450 / \$4,900	
Out-of-pocket maximum (single/family)	\$8,050 / \$16,100	\$10,150 / \$20,300	\$10,150 / \$20,300	
Aggregation type	Individual	Individual	Individual	
Coinsurance	You pay 50%	You pay 50%	You pay 0%*	
Preventive care (immunizations, screenings)	\$0 for most preventive services NSD	\$0 for most preventive services NSD	\$0 for most preventive services NSD	
Primary Care office visit (PCP)	50%	\$50 PCP / \$75 SPC. First 3 visits NSD.	\$30. First visit NSD.	
Specialist office visit (SPC)			\$65. First visit NSD.	
Hospital services		\$1,500	\$1,500	
Outpatient services		\$150	\$150	
Emergency Room		\$500	\$500	
Urgent care		\$75	\$70	
Lab work		\$50	\$50	
Basic x-ray		\$75	\$75	
Prescription drugs***		\$10 for Tier 1 \$35 for Tier 2 \$70 for Tier 3	\$10 for Tier 1 \$35 for Tier 2 \$70 for Tier 3	\$15 for Tier 1 \$40 for Tier 2 \$75 for Tier 3 NSD†
Telemedicine / Teledermatology		\$0 / 50%	\$0. First 3 qualifying visits NSD. / \$75. First 3 visits NSD.	\$0. First visit NSD. / \$65. First visit NSD.
Pediatric vision* and dental	Covered	Covered	Covered	
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).				
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)				
Single	\$894.00	\$894.06	\$1,160.84	
Single + spouse	\$1,788.01	\$1,788.12	\$2,321.68	
Single + child(ren)	\$1,519.80	\$1,519.90	\$1,973.43	
Single + spouse + child(ren)	\$2,547.91	\$2,548.07	\$3,308.40	
Child only	\$368.33	\$368.36	\$478.26	

Standard plans are required by New York State. The benefits and out-of-pocket costs for the Standard plans will be the same for all health insurance companies. Provider networks will differ by insurance company.

Part of the Affordable Care Act is intended to improve dental coverage for children, including preventive, routine and some major dental coverage. Individuals purchasing medical coverage outside of the NY State of Health Marketplace, are required to purchase a medical plan with pediatric dental included, or a qualified stand-alone plan. By purchasing a medical plan with dental included, you can be sure your children will receive comprehensive coverage overseen by our staff of medical management experts, and both medical and pediatric dental services will count towards your out of pocket maximums.

Any one person insured on a family plan will not pay more than \$10,600 in compliance with the Affordable Care Act.

* Some benefits, such as pediatric vision and durable medical equipment may have different coinsurance amounts.

** An HSA or Health Savings Account is a tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more. Certain subsidized health plans may not be eligible for health savings accounts.

*** Insurance coverage for GLP-1 drugs may vary. For more information, call 1-888-768-7888 (TTY 711).

† Note to diabetic drug and supply users: In accordance with the contract language/benefit mandates provided by New York State, if your plan includes a deductible, diabetic drugs and supplies – excluding insulin – are subject to the deductible amount.

12 Need more information or help enrolling? Call our dedicated representatives at 1-888-768-7888.

Plan benefits & features	STANDARD	
	Gold Standard	Platinum Standard
Tax credit available (on-exchange only)	Yes	Yes
Deductible (single/family)	\$775 / \$1,550	\$0 / \$0
Out-of-pocket maximum (single/family)	\$10,150 / \$20,300	\$2,000 / \$4,000
Aggregation type	Individual	Individual
Coinsurance	You pay 0%*	You pay 0%*
Preventive care (immunizations, screenings)	\$0 for most preventive services NSD	\$0 for most preventive services NSD
Primary Care office visit (PCP)	\$25	\$15
Specialist office visit (SPC)	\$40	\$35
Hospital services	\$1,000	\$500
Outpatient services	\$100	\$100
Emergency Room	\$150	\$100
Urgent care	\$60	\$55
Lab work	\$40	\$35
Basic x-ray	\$40	\$35
Prescription drugs***	\$10 for Tier 1 \$35 for Tier 2 \$70 for Tier 3 NSD†	\$10 for Tier 1 \$30 for Tier 2 \$60 for Tier 3
Telemedicine / Tele dermatology	\$0 / \$40	\$0 / \$35
Pediatric vision* and dental	Covered	Covered
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).		
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)		
Single	\$1,479.90	\$1,753.35
Single + spouse	\$2,959.80	\$3,506.71
Single + child(ren)	\$2,515.83	\$2,980.70
Single + spouse + child(ren)	\$4,217.71	\$4,997.06
Child only	\$609.72	\$722.39

Individual aggregation:

Deductible: Each covered family member only needs to satisfy their own individual deductible (not the entire family amount). Once this amount is met, the member will pay a copay or coinsurance for covered services.

Out-of-pocket maximum (OOPM): Each covered family member only needs to satisfy their own OOPM. Once this amount is met, covered services are paid by the health plan.

Family aggregation:

Deductible: For plans covering more than one person, the entire family deductible must be met by one or any combination of covered members. Once this amount is met, members will pay a copay or coinsurance for covered services.

Out-of-pocket maximum (OOPM): For plans covering more than one person, the entire family OOPM must be met by one or any combination of covered members. Once this amount is met, covered services are paid by the health plan for the entire family.

Central New York Region:

Broome County Cortland County Steuben County
Cayuga County Onondaga County Tioga County
Chemung County Schuyler County Tompkins County



Get access to more top-quality doctors, hospitals and pharmacies locally and nationwide



Get up to \$200 or \$400 a year in Rewards Cash with ThriveWellSM in partnership with Personify Health

	NON-STANDARD			
Plan benefits & features	POPULAR	POPULAR	NEW	POPULAR
	Bronze Secure Plus 3 (HSA** qualified) LOW COST	Bronze Select (HSA** qualified)	Silver Select 2 (HSA** qualified)	Silver Select (HSA** qualified)
Tax credit available (on-exchange only)	Yes	Yes	Yes	Yes
Deductible (single/family)	\$10,600 / \$21,200	\$5,500 / \$11,000	\$4,500 / \$9,000	\$3,200 / \$6,400
Out-of-pocket maximum (single/family)	\$10,600 / \$21,200	\$7,500 / \$15,000	\$7,000 / \$14,000	\$8,200 / \$16,400
Aggregation type	Individual	Family	Family	Family
Coinsurance	You pay 0%	You pay 50%	You pay 20%	You pay 20%*
Preventive care (immunizations, screenings)	\$0 for most preventive services NSD		\$0 for most preventive services NSD	
Primary Care office visit (PCP)	0%. First 3 visits NSD.	50%	20%	20%
Specialist office visit (SPC)	0%			
Acupuncture visit (up to 10)				
Physical, occupational and speech therapy				
Hospital services				
Outpatient services				
Emergency Room				
Urgent care				
Lab work				
Basic x-ray				
Prescription drugs***		\$10 for Tier 1 40% for Tier 2 50% for Tier 3 Preventative Rx NSD	\$10 for Tier 1 \$45 for Tier 2 \$90 for Tier 3	\$10 for Tier 1 \$45 for Tier 2 \$90 for Tier 3 Preventative Rx NSD
Telemedicine / Teledermatology	0%. First 3 qualifying visits NSD. / 0%	0% / 50%	\$0 / 20%	0% / 20%
Adult vision exams and dental (preventive & routine)	\$0	50%	20%	20%
Adult eyewear	\$100	\$100	\$100	\$100
Pediatric vision* and dental	Covered		Covered	
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).				
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)				
Single	\$806.31	\$874.66	\$1,041.11	\$1,135.71
Single + spouse	\$1,612.62	\$1,749.31	\$2,082.21	\$2,271.42
Single + child(ren)	\$1,370.73	\$1,486.91	\$1,769.88	\$1,930.71
Single + spouse + child(ren)	\$2,297.98	\$2,492.77	\$2,967.15	\$3,236.77
Child only	NA	NA	NA	NA

Note to diabetic drug users:

In accordance with the contract language / benefit mandates provided by New York State, if your plan includes a deductible, diabetic drugs and supplies — excluding insulin — are subject to the deductible amount.

Central New York Region:

Broome County Cortland County Steuben County
Cayuga County Onondaga County Tioga County
Chemung County Schuyler County Tompkins County

NON-STANDARD		
Plan benefits & features	Gold Select	Platinum Select
Tax credit available (on-exchange only)	Yes	Yes
Deductible (single/family)	\$1,350 / \$2,700	\$0 / \$0
Out-of-pocket maximum (single/family)	\$9,000 / \$18,000	\$6,350 / \$12,700
Aggregation type	Individual	Individual
Coinsurance	You pay 0%*	You pay 0%*
Preventive care (immunizations, screenings)	\$0 for most preventive services NSD	\$0 for most preventive services NSD
Primary Care office visit (PCP)	\$25. First 3 qualifying visits NSD.	\$15
Specialist office visit (SPC)	\$40. First 3 qualifying visits NSD.	\$25
Acupuncture visit (up to 10)	\$25	\$15
Physical, occupational and speech therapy	\$25	\$15
Hospital services	\$1,000	\$750
Outpatient services	\$500	\$150
Emergency Room	\$500	\$150
Urgent care	\$40	\$25
Lab work	\$40	\$25
Basic x-ray	\$40	\$15
Prescription drugs***	\$10 for Tier 1 \$35 for Tier 2 \$70 for Tier 3 NSD†	\$10 for Tier 1 \$35 for Tier 2 \$70 for Tier 3
Telemedicine / Teledermatology	\$0 / \$40. First 3 qualifying visits NSD.	\$0 / \$25
Adult vision exams and dental (preventive & routine)	\$25	\$15
Adult eyewear	\$100	\$100
Pediatric vision* and dental	Covered	Covered
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).		
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)		
Single	\$1,417.64	\$1,737.77
Single + spouse	\$2,835.28	\$3,475.54
Single + child(ren)	\$2,409.99	\$2,954.21
Single + spouse + child(ren)	\$4,040.27	\$4,952.64
Child only	NA	NA

Part of the Affordable Care Act is intended to improve dental coverage for children, including preventive, routine and some major dental coverage. Individuals purchasing medical coverage outside of the NY State of Health Marketplace, are required to purchase a medical plan with pediatric dental included, or a qualified stand-alone plan. By purchasing a medical plan with dental included, you can be sure your children will receive comprehensive coverage overseen by our staff of medical management experts, and both medical and pediatric dental services will count towards your out of pocket maximums.

Any one person insured on a family plan will not pay more than \$10,600 in compliance with the Affordable Care Act.

* Some benefits, such as pediatric vision and durable medical equipment may have different coinsurance amounts.

** An HSA or Health Savings Account is a tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more. Certain subsidized health plans may not be eligible for health savings accounts.

*** Insurance coverage for GLP-1 drugs may vary. For more information, call 1-888-768-7888 (TTY 711).

† Note to diabetic drug and supply users: In accordance with the contract language / benefit mandates provided by New York State, if your plan includes a deductible, diabetic drugs and supplies – excluding insulin – are subject to the deductible amount. Personify Health is a separate company and offers a digital wellbeing service on behalf of Excellus BCBS.

MDLIVE is an independent company, offering telehealth services in the Excellus BlueCross BlueShield service area.

Blue Select Dental plans

When it comes to maintaining overall health and wellbeing, taking care of your teeth is just as important as taking care of the rest of your body. With an emphasis on no-cost preventive care, our dental plans help you maintain complete oral health, reducing the need for more costly dental care in the future. And at the same time, helping you to minimize pain and anxiety, eat and sleep without disruption, boost self-confidence, and have an overall better quality of life.

Now that is something to smile about.

How it works:

All plans come with a deductible, which means that for some services, you are responsible for the costs up to that amount. Once you have met your deductible, the plan starts contributing.

- With Blue Select Dental and Blue Select Premier Dental, diagnostic and preventive services are covered in full and not subject to the deductible.
- For all other covered services, you are responsible for paying a percentage of the cost, called coinsurance.
- To limit your costs each year, the pediatric benefits come with an out-of-pocket maximum (OOPM).
- In order to enroll in the **on exchange** Blue Select **Standard Adult** Dental plan **through NY State of Health**, members must be enrolled in a Qualified Health Plan.
- How the money you pay toward the deductible adds up (or aggregates):
 - » When only covering yourself, you will pay the single deductible amount. When covering more than one person, the family deductible is met for everyone on the plan when one or any combination of members reaches the family deductible amount.
 - » Once you meet your deductible, the plan begins paying on your claims and you are only responsible for a percentage of costs, called coinsurance.



	Blue Select Dental	
	Pediatric benefits (Up to age 19) in and out of network	Adult benefits (Age 19 and older) in and out of network
Deductible	Per enrollee: \$50 2 or more enrollees: \$150 (Applies only to basic, major, and orthodontic services)	Single: \$50 Family: \$150 (Applies only to basic & major services)
Annual maximum (per member)	None	\$750 (Applies to diagnostic & preventive, basic, and major services)
Out-of-pocket maximum	Per enrollee: \$350 2 or more enrollees: \$700	None
Cost-sharing:		
Diagnostic & preventive e.g. cleanings and adult exams	0%	0%
Basic e.g. fillings and adult root canals	50% (includes pediatric exams)	50%
Major e.g. select crowns, dentures	50%	50%
Orthodontic services e.g. medically necessary braces up to age 19	50%	Not covered
Waiting periods (off exchange plans)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)
Rates off exchange		
Single	\$36.03	
Single + spouse	\$72.06	
Single + child(ren)	\$98.83	
Single + spouse + child(ren)	\$150.75	

Comprehensive coverage gives you the confidence you need to get care when you need it:

Cleanings and exams | Routine x-rays | Fillings | Select crowns* | Dentures* | Endodontics and periodontics

Waiting periods:

- There is no waiting period for pediatric benefits (up to age 19). For adult benefits (age 19 and older), there are no waiting periods on diagnostic, preventive, or basic services. Major services are subject to a 12-month waiting period on off exchange Blue Select Dental and Blue Select Premier Dental plans. Waiting periods may be waived with proof of prior dental coverage upon enrollment.



	Blue Select Premier Dental		Blue Select Standard Adult Dental	
	Pediatric benefits (Up to age 19) in and out of network	Adult benefits (Age 19 and older) in and out of network	Pediatric benefits (Up to age 19) in and out of network	Adult benefits (Age 19 and older) in and out of network
Deductible	Per enrollee: \$50 2 or more enrollees: \$150 (Applies only to basic, major, and orthodontic services)	Single: \$50 Family: \$150 (Applies only to basic & major services)	Per enrollee: \$50 2 or more enrollees: \$150 (Applies to diagnostic & preventive, basic, major services and orthodontic services)	Single: \$50 Family: \$150 (Applies to diagnostic & preventive, basic, and major services)
Annual maximum (per member)	None	\$1,250 (Applies to diagnostic & preventive, basic, and major services)	None	\$1,500 (Applies to diagnostic & preventive, basic, and major services)
Out-of-pocket maximum	Per enrollee: \$350 2 or more enrollees: \$700	None	Per enrollee: \$450 2 or more enrollees: \$900	None
Cost-sharing:				
Diagnostic & preventive e.g. cleanings and adult exams	0% (includes pediatric exams)	0%	0% (includes pediatric exams)	0%
Basic e.g. fillings and adult root canals	20%	20%	20%	20%
Major e.g. select crowns, dentures	50%	50%	50%	50%
Orthodontic services e.g. medically necessary braces up to age 19	50%	Not covered	50%	Not covered
Waiting periods (off exchange plans)	None	Major services: 12 months (Does not apply to diagnostic & preventive or basic services)	None	None
Rates off exchange				
Single	\$49.16		\$52.96	
Single + spouse	\$98.32		\$105.93	
Single + child(ren)	\$125.33		\$143.84	
Single + spouse + child(ren)	\$193.75		\$219.80	

* Subject to 12-month waiting period for Major services on off exchange Blue Select Dental and Blue Select Premier Dental plans. Standard exclusions apply. Dependents (excluding spouse) can be covered up to age 26. Service categories vary between Adult and Pediatric coverage.

STEP 5: Enrolling is quick and easy.



Call:
1-888-768-7888



Click:
ChooseExcellus.com



Visit:
Monday - Friday 9 a.m. - 4:30 p.m.

Greece Resource Center

1946 W Ridge Road, Suite B
Rochester, NY 14626
(585) 225-0221

New Hartford Resource Center

62 Kellogg Road
New Hartford, NY 13413
(315) 731-2534

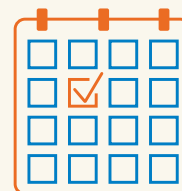
Liverpool Resource Center

7421 Oswego Road, Suite O
Liverpool, NY 13090
(315) 671-7410

Johnson City Resource Center

47 Riverside Drive
Johnson City, NY 13790
(607) 304-9800

When you can enroll.



Special Enrollment Period:

Certain life events such as a pregnancy, adopting a baby, aging off a parent's plan, getting a divorce or losing coverage through an employer may qualify you for a Special Enrollment Period (SEP). Generally with an SEP, you have **60 days** to get coverage.

Annual Open Enrollment Period:

November 1, 2026 – December 31, 2026

(subject to change per the Centers for Medicare and Medicaid Services)

**Enrollment is available for the Essential Plan,
Medicaid and Child Health Plus all year long.**



Your enrollment checklist.

Get ready to enroll by having the following information available:

- Email address (you are required to provide an email address to enroll in the NY State of Health Marketplace)
- Proof of U.S. citizenship or legal status in the form of birth certificate, "Green Card" or passport
- Social Security card
- Information about others you plan to enroll (spouse, children, their birth dates, Social Security numbers)
- Termination letter if you recently lost coverage
- Policy number(s) for any current health insurance
- Most recently completed tax return and/or your last 30 days of pay stubs. You will need to project your annual household income for the year ahead. You can refer to your tax return to help you estimate that amount.



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ATTENTION: Language assistance services and other aids, free of charge, are available to you. Call 1-800-650-4359 (TTY 711).

ATENCIÓN: Dispone de servicios de asistencia lingüística y otras ayudas, gratis. Llame al 1-800-650-4359 (TTY 711).

请注意：您可以免费获得语言协助服务和其他辅助服务。请致电 1-800-650-4359 (TTY 711)。

If you are shopping for health insurance due to a recent change in your job, income or family size, you may only have 60 days to sign up. Call 1-888-768-7888 (TTY 711) or see page 18 to learn more.

ChooseExcellus.com

At Excellus BlueCross BlueShield, we are committed to accessible, equitable and affordable holistic health care.

We believe that everybody deserves to live a healthy life.

