

NEW YORK STATE HEALTH INSURANCE PROGRAM 2026 RATES

CHECK YOUR PLAN - THIS IS YOUR ONLY NOTICE OF A RATE CHANGE.

Please read this rate sheet carefully to find the rate that applies to you. There are different rates for different groups as a result of legislation and administrative agreements.

Not all Participating Employers (PE) use the contribution rates reflected in this flyer. If you have questions regarding whether any of these rates apply to you or what your NYSHIP rates will be for 2026, contact your former employer.

To enroll in an HMO or to remain enrolled in your current HMO, you must live or work in the HMO's NYSHIP service area. Medicare-primary NYSHIP HMO enrollees will be enrolled in the HMO's Medicare Advantage Plan.

These rates reflect the monthly cost for NYS Thruway Authority Retirees from April 1, 1991 forward. (See page 3 for information on how sick leave credit impacts your premium.)

Retirees of Employers that contribute 94% Individual/ 75% Dependent

Code	Plan	Individual	Family
001	The Empire Plan	71.69	539.94
066	Blue Choice	57.54	407.90
063	Capital District Physicians' Health Plan (CDPHP) (Capital)	116.06	454.93
300	Capital District Physicians' Health Plan (CDPHP) (Central)	177.77	491.50
310	Capital District Physicians' Health Plan (CDPHP) (Hudson Valley)	340.47	811.60
050	EmblemHealth - HIP (Downstate)	295.23	850.31
220	EmblemHealth - HIP (Capital)	427.84	1188.16
350	EmblemHealth - HIP (Hudson Valley)	264.80	774.30
067	Highmark Blue Cross Blue Shield	65.38	462.05
069	Highmark Blue Shield	69.60	449.00
072	HMOBlue (Central New York Region)	67.38	469.79
160	HMOBlue (Utica Region)	107.67	545.07
059	Independent Health	65.69	461.46
058	MVP Health Care (Rochester)	65.02	418.24
060	MVP Health Care (East)	67.76	437.12
330	MVP Health Care (Central)	212.86	517.87
340	MVP Health Care (Mid-Hudson)	195.01	495.52
360	MVP Health Care (North)	187.79	494.96

