

# Auto-Rollover Mapping Chart

## Mapping for 1/1/2023 - 4/1/2023 Renewal Dates

Please note: Auto-rollover mapping is in place to ensure that employees are renewed into a comparable plan that is available as of their upcoming plan year. Employees should carefully review the Summary of Benefits and Coverage (SBC) when determining the medical coverage that best suits their needs. Employees who wish to remain in the auto-rollover mapped plan (and have no other changes at renewal) do not need to take action.

2022 Plan Name	2022 BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket	Change	2023 Plan Name	2023 BENEFIT HIGHLIGHTS IN=In Network; OON=Out of Network; OOP=Out of Pocket
EmblemHealth Bridge Platinum PPO	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% - OON \$2,600/\$5,200, 30% Max OOP: \$2,500/\$5,000 - OON \$5,000/\$10,000 Rx: \$0/\$30/\$80	Plan name change OON deductible increase MOOP increase	EmblemHealth Bridge Platinum PPO Renewal Only	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% - OON \$3,000/\$6,000, 30% Max OOP: \$2,500/\$5,000 - OON \$5,500/\$11,000 Rx: \$0/\$30/\$80
EmblemHealth Prime Platinum Premier	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% Max OOP: \$2,000/\$4,000 Rx: \$0/\$30/\$65	MOOP Increase	EmblemHealth Prime Platinum Premier	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% Max OOP: \$2,500/\$5,000 Rx: \$0/\$30/\$65
EmblemHealth Select Care Platinum Premier	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% Max OOP: \$2,000/\$4,000 Rx: \$0/\$30/\$65	Discontinued	EmblemHealth Prime Platinum Premier	PCP/Specialist: 3 free PCP visits then \$15/\$35 Deductible, Coinsurance: \$0, 20% Max OOP: \$2,500/\$5,000 Rx: \$0/\$30/\$65
Oxford Liberty Platinum EPO	PCP: Tier I \$5; Tier II \$25 / Specialist: Tier I \$35; Tier II \$70 Deductible, Coinsurance: \$500/\$1,000, 0% Max OOP: \$3,050/\$6,100 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	MOOP decrease	Oxford Liberty Platinum EPO	PCP: Tier I \$5; Tier II \$25 / Specialist: Tier I \$35; Tier II \$70 Deductible, Coinsurance: \$500/\$1,000, 0% Max OOP: \$2,450/\$4,900 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
EmblemHealth Bridge Gold PPO	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$1,300/\$2,600, 30% - OON \$3,500/\$7,000, 40% Max OOP: \$5,500/\$11,000 - OON \$7,500/\$15,000 Rx: \$0/\$35/\$100	Plan name change IN & OON Ded increase IN & OON MOOP increase Rx 2 tier copay increase	EmblemHealth Bridge Gold PPO Renewal Only	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$1,500/\$3,000, 30% - OON \$3,800/\$7,600, 40% Max OOP: \$6,200/\$12,400 - OON \$8,000/\$16,000 Rx: \$0/\$45/\$100

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EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$450/\$900, 30% Max OOP: \$6,000/\$12,000 Rx: \$0/\$40/\$80	Specialist copay increase Deductible increase MOOP increase	EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$50 Deductible, Coinsurance: \$500/\$1,000, 30% Max OOP: \$7,500/\$15,000 Rx: \$0/\$40/\$80
EmblemHealth Prime Gold Value	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,000/\$14,000 Rx: \$0/\$40 after Deductible/\$80 after Deductible	Discontinued	EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$50 Deductible, Coinsurance: \$500/\$1,000, 30% Max OOP: \$7,500/\$15,000 Rx: \$0/\$40/\$80
EmblemHealth Bridge Gold Virtual	PCP/Specialist: Virtual \$0/n/a, Office \$40/60 Deductible, Coinsurance: Virtual \$0/n/a, Office \$500/\$1,000,30% Max OOP: Virtual & Office \$7,800/\$15,600 Rx: Virtual \$0/\$40/\$80, Office \$0/\$40 after Deductible/\$80 after Deductible	Plan name change Office deductible increase MOOP increase	EmblemHealth Bridge Gold Virtual Renewal Only	PCP/Specialist: Virtual \$0/n/a, Office \$40/60 Deductible, Coinsurance: Virtual \$0/n/a, Office \$750/\$1,500,30% Max OOP: Virtual & Office \$8,000/\$16,000 Rx: Virtual \$0/\$40/\$80, Office \$0/\$40 after Deductible/\$80 after Deductible
EmblemHealth Select Care Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$450/\$900, 30% Max OOP: \$6,000/\$12,000 Rx: \$0/\$40/\$80	Discontinued	EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$50 Deductible, Coinsurance: \$500/\$1,000, 30% Max OOP: \$7,500/\$15,000 Rx: \$0/\$40/\$80
EmblemHealth Select Care Gold Value	PCP/Specialist: 3 free PCP visits then \$25/\$40 Deductible, Coinsurance: \$2,500/\$5,000, 30% Max OOP: \$7,000/\$14,000 Rx: \$0/\$40 after Deductible/\$80 after Deductible	Discontinued	EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$50 Deductible, Coinsurance: \$500/\$1,000, 30% Max OOP: \$7,500/\$15,000 Rx: \$0/\$40/\$80
EmblemHealth Millennium Gold Virtual	PCP/Specialist: Virtual \$0/n/a, Office \$40/60 Deductible, Coinsurance: Virtual \$0/n/a, Office \$1,700/\$3,400,30% Max OOP: Virtual & Office \$8,200/\$16,400 Rx: Virtual \$0/\$40/\$80, Office \$0/\$40 after Deductible/\$80 after Deductible	Discontinued	EmblemHealth Prime Gold Premier	PCP/Specialist: 3 free PCP visits then \$25/\$50 Deductible, Coinsurance: \$500/\$1,000, 30% Max OOP: \$7,500/\$15,000 Rx: \$0/\$40/\$80
Healthfirst Gold Pro EPO Renewal Only	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$0, 0% (15% DME) Max OOP: \$5,275/\$10,550 Rx: \$10/\$50/\$85	Discontinued	Healthfirst Platinum Pro EPO	PCP/Specialist: \$20/\$35 Deductible, Coinsurance: \$0, 0% (10% DME) Max OOP: \$2,000/\$4,000 Rx: \$10/\$30/\$60
Healthfirst Gold 25/50/0 Pro EPO Renewal Only	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$0, 0% (15% DME) Max OOP: \$7,000/\$14,000 Rx: \$10/\$50/\$85	Discontinued	Healthfirst Platinum Pro EPO	PCP/Specialist: \$20/\$35 Deductible, Coinsurance: \$0, 0% (10% DME) Max OOP: \$2,000/\$4,000 Rx: \$10/\$30/\$60

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Healthfirst Gold 1350 Pro EPO Renewal Only	PCP/Specialist: \$25/\$70 Deductible, Coinsurance: \$1,350/\$2,700, 20% Max OOP: \$8,150/\$16,300 Rx: \$20/\$60/\$110	Discontinued	Healthfirst Platinum Pro EPO	PCP/Specialist: \$20/\$35 Deductible, Coinsurance: \$0, 0% (10% DME) Max OOP: \$2,000/\$4,000 Rx: \$10/\$30/\$60
Healthfirst Gold 1350 Pro Plus EPO	PCP/Specialist: \$25/\$70 Deductible, Coinsurance: \$1,350/\$2,700, 20% Max OOP: \$8,150/\$16,300 Rx: \$20/\$60/\$110	MOOP decrease	Healthfirst Gold 1350 Pro Plus EPO	PCP/Specialist: \$25/\$70 Deductible, Coinsurance: \$1,350/\$2,700, 20% Max OOP: \$7,900/\$15,800 Rx: \$20/\$60/\$110
Oxford Metro Gold EPO 25/40 G	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$6,000/\$12,000 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)	MOOP increase	Oxford Metro Gold EPO 25/40 G	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$6,250/\$12,500 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)
Oxford Metro Gold EPO 25/40	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$6,000/\$12,000 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)	MOOP increase	Oxford Metro Gold EPO 25/40	PCP/Specialist: \$25/\$40 Deductible, Coinsurance: \$1,250/\$2,500, 20% Max OOP: \$6,250/\$12,500 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)
Oxford Liberty Gold EPO 30/60	PCP/Specialist: \$30/\$60 Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$8,400/\$16,800 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	MOOP decrease	Oxford Liberty Gold EPO 30/60	PCP/Specialist: \$30/\$60 Deductible, Coinsurance: \$2,000/\$4,000, 30% Max OOP: \$8,000/\$16,000 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Gold EPO 30/60 G	PCP/Specialist: \$30/\$60 Deductible, Coinsurance: \$1,250/\$2,500, 0% Max OOP: \$6,400/\$12,800 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	MOOP increase	Oxford Liberty Gold EPO 30/60 G	PCP/Specialist: \$30/\$60 Deductible, Coinsurance: \$1,250/\$2,500, 0% Max OOP: \$6,650/\$13,300 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Gold EPO 25/50 ZD	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$0, 0% Max OOP: \$6,000/\$12,000 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	MOOP increase	Oxford Liberty Gold EPO 25/50 ZD	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$0, 0% Max OOP: \$6,250/\$12,500 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Gold HSA 1500 Motion	PCP/Specialist: Deductible then 10% coins Deductible, Coinsurance: \$1,500/\$3,000, 10% Max OOP: \$5,500/\$11,000 Rx: Deductible then \$10/\$50/\$90	Plan name change MOOP increase	Oxford Liberty Gold HSA 1500 M	PCP/Specialist: Deductible then 10% coins Deductible, Coinsurance: \$1,500/\$3,000, 10% Max OOP: \$5,750/\$11,500 Rx: Deductible then \$10/\$50/\$90
EmblemHealth Prime Silver Premier	PCP/Specialist: 3 free PCP visits then \$35/\$65 Deductible, Coinsurance: \$3,800/\$7,600, 40% Max OOP: \$8,000/\$16,000 Rx: \$0/\$40/\$80	Free copay decrease Specialist copay increase Deductible increase MOOP increase	EmblemHealth Prime Silver Premier	PCP/Specialist: 1 free PCP visit then \$35/\$75 Deductible, Coinsurance: \$4,800/\$9,600, 40% Max OOP: \$8,800/\$17,600 Rx: \$0/\$40/\$80

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EmblemHealth Select Care Silver Premier	PCP/Specialist: 3 free PCP visits then \$35/\$65 Deductible, Coinsurance: \$3,800/\$7,600, 40% Max OOP: \$8,000/\$16,000 Rx: \$0/\$40/\$80	Discontinued	EmblemHealth Prime Silver Premier	PCP/Specialist: 1 free PCP visit then \$35/\$75 Deductible, Coinsurance: \$4,800/\$9,600, 40% Max OOP: \$8,800/\$17,600 Rx: \$0/\$40/\$80
EmblemHealth Select Care Silver Value	PCP/Specialist: 3 free PCP visits then \$10/\$55 Deductible, Coinsurance: \$7,000/\$14,000, 0% Max OOP: \$7,000/\$14,000 Rx: \$0/\$0 after Deductible/\$0 after Deductible	Discontinued	EmblemHealth Prime Silver Premier	PCP/Specialist: 1 free PCP visit then \$35/\$75 Deductible, Coinsurance: \$4,800/\$9,600, 40% Max OOP: \$8,800/\$17,600 Rx: \$0/\$40/\$80
EmblemHealth Millennium Silver Value G	PCP/Specialist: 3 free PCP visits then \$10/\$55 Deductible, Coinsurance: \$7,000/\$14,000, 0% Max OOP: \$7,000/\$14,000 Rx: \$0/\$0 after Deductible/\$0 after Deductible	Discontinued	EmblemHealth Prime Silver Premier	PCP/Specialist: 1 free PCP visit then \$35/\$75 Deductible, Coinsurance: \$4,800/\$9,600, 40% Max OOP: \$8,800/\$17,600 Rx: \$0/\$40/\$80
EmblemHealth Prime Silver HSA	PCP/Specialist: Deductible then \$30/\$50 copay Deductible, Coinsurance: \$3,000/\$6,000, 40% Max OOP: \$6,800/\$13,600 Rx: Deductible then \$15/\$45/\$80	Deductible increase MOOP increase	EmblemHealth Prime Silver HSA	PCP/Specialist: Deductible then \$30/\$50 copay <b>Deductible</b> , Coinsurance: \$3,500/\$7,000, 40% <b>Max OOP: \$7,000/\$14,000</b> Rx: Deductible then \$15/\$45/\$80
Healthfirst Silver 40/75/4700 Pro EPO	PCP/Specialist: \$40/\$75 Deductible, Coinsurance: \$4,700/\$9,400, 45% Max OOP: \$7,900/\$15,800 Rx: \$20/\$60/\$110	Plan name change PCP copay Deductible & Coinsurance decrease MOOP increase	<b>Healthfirst Silver 45/75/4300 Pro EPO</b>	<b>PCP/Specialist: \$45/\$75</b> <b>Deductible, Coinsurance: \$4,300/\$8,600, 40%</b> <b>Max OOP: \$8,150/\$16,300</b> Rx: \$20/\$60/\$110
Oxford Metro Silver EPO 30/80 G	PCP/Specialist: \$30/\$80 Deductible, Coinsurance: \$3,500/\$7,000, 30% Max OOP: \$8,700/\$17,400 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)	Deductible & Coinsurance Increase MOOP increase Rx deductible increase	Oxford Metro Silver EPO 30/80 G	PCP/Specialist: \$30/\$80 <b>Deductible, Coinsurance: \$3,750/\$7,500, 40%</b> <b>Max OOP: \$9,100/\$18,200</b> <b>Rx: \$10/\$65/\$95 after \$200/member Rx deductible (n/a Tier 1)</b>
Oxford Metro Silver EPO 50/100 ZD	PCP/Specialist: \$50/\$100 Deductible, Coinsurance: \$0, 0% Max OOP: \$8,700/\$17,400 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)	MOOP increase Rx deductible increase	Oxford Metro Silver EPO 50/100 ZD	PCP/Specialist: \$50/\$100 Deductible, Coinsurance: \$0, 0% <b>Max OOP: \$9,100/\$18,200</b> <b>Rx: \$10/\$65/\$95 after \$200/member Rx deductible (n/a Tier 1)</b>
Oxford Liberty Silver EPO 25/50 G	PCP/Specialist: \$25/\$50 Deductible, Coinsurance: \$4,500/\$9,000, 50% Max OOP: \$8,700/\$17,400 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	Plan name change PCP/Specialist copay increase MOOP increase	<b>Oxford Liberty Silver EPO 30/60 G</b>	<b>PCP/Specialist: \$30/\$60</b> Deductible, Coinsurance: \$4,500/\$9,000, 50% <b>Max OOP: \$9,100/\$18,200</b> Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$3,000/\$6,000, 35% Max OOP: \$8,700/\$17,400 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	Plan name change Specialist copay increase Deductible & Coinsurance increase MOOP increase	<b>Oxford Liberty Silver EPO 40/80</b>	PCP/Specialist: <b>\$40/\$80</b> <b>Deductible, Coinsurance: \$3,250/\$6,500, 40%</b> <b>Max OOP: \$9,100/\$18,200</b> Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)

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Oxford Liberty Silver EPO 40/70	PCP/Specialist: \$40/\$70 Deductible, Coinsurance: \$3,000/\$6,000, 35% Max OOP: \$8,700/\$17,400 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)	Plan name change Specialist copay increase Deductible & Coinsurance increase MOOP increase	Oxford Liberty Silver EPO 40/80	PCP/Specialist: \$40/\$80 Deductible, Coinsurance: \$3,250/\$6,500, 40% Max OOP: \$9,100/\$18,200 Rx: \$10/\$50/\$90 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Silver EPO 50/100 ZD	PCP/Specialist: \$50/\$100 Deductible, Coinsurance: \$0, 0% Max OOP: \$8,700/\$17,400 Rx: \$10/\$65/\$95 after \$150/member Rx deductible (n/a Tier 1)	MOOP increase Rx deductible increase	Oxford Liberty Silver EPO 50/100 ZD	PCP/Specialist: \$50/\$100 Deductible, Coinsurance: \$0, 0% Max OOP: \$9,100/\$18,200 Rx: \$10/\$65/\$95 after \$200/member Rx deductible (n/a Tier 1)
Oxford Liberty Silver HSA 4000 Motion	PCP/Specialist: Deductible then 20% coins Deductible, Coinsurance: \$4,000/\$8,000, 20% Max OOP: \$7,050/\$14,100 Rx: Deductible then \$10/\$50/\$90	Plan name change MOOP increase	Oxford Liberty Silver HSA 4000 M	PCP/Specialist: Deductible then 20% coins Deductible, Coinsurance: \$4,000/\$8,000, 20% Max OOP: \$7,350/\$14,700 Rx: Deductible then \$10/\$50/\$90
EmblemHealth Prime Bronze HSA	PCP/Specialist: Deductible then 50% coinsurance Deductible, Coinsurance: \$6,300/\$12,600, 50% Max OOP: \$6,900/\$13,800 Rx: Deductible then \$15/\$65/\$80	Deductible increase MOOP increase Rx 3 tier increase	EmblemHealth Prime Bronze HSA	PCP/Specialist: Deductible then 50% coinsurance Deductible, Coinsurance: \$6,750/\$13,500, 50% Max OOP: \$7,500/\$15,000 Rx: Deductible then \$15/\$65/\$100
EmblemHealth Select Care Bronze Premier	PCP/Specialist: 3 free PCP visits, Deductible then 50% Deductible, Coinsurance: \$5,500/\$11,000, 50% Max OOP: \$8,700/\$17,400 Rx: \$50/Deductible then 50%/Deductible then 50%	Discontinued	EmblemHealth Prime Bronze Premier	PCP/Specialist: 1 free PCP, Deductible then 50% coinsurance Deductible, Coinsurance: \$6,300/\$12,600, 50% Max OOP: \$9,100/\$18,200 Rx: Deductible then 50%/50%/50%
EmblemHealth Select Care Bronze Value	PCP/Specialist: 3 free PCP visits, Deductible then 0% Deductible, Coinsurance: \$8,550/\$17,100, 0% Max OOP: \$8,550/\$17,100 Rx: \$35/Deductible then 0%/Deductible then 0%	Discontinued	EmblemHealth Prime Bronze Premier	PCP/Specialist: 1 free PCP, Deductible then 50% coinsurance Deductible, Coinsurance: \$6,300/\$12,600, 50% Max OOP: \$9,100/\$18,200 Rx: Deductible then 50%/50%/50%
EmblemHealth Millennium Bronze Premier G	PCP/Specialist: 3 free PCP visits, Deductible then 50% Deductible, Coinsurance: \$5,500/\$11,000, 50% Max OOP: \$8,700/\$17,400 Rx: \$50/Deductible then 50%/Deductible then 50%	Discontinued	EmblemHealth Prime Bronze Premier	PCP/Specialist: 1 free PCP, Deductible then 50% coinsurance Deductible, Coinsurance: \$6,300/\$12,600, 50% Max OOP: \$9,100/\$18,200 Rx: Deductible then 50%/50%/50%
EmblemHealth Millennium Bronze Value G	PCP/Specialist: 3 free PCP visits, Deductible then 0% Deductible, Coinsurance: \$8,550/\$17,100, 0% Max OOP: \$8,550/\$17,100 Rx: \$35/Deductible then 0%/Deductible then 0%	Discontinued	EmblemHealth Prime Bronze Premier	PCP/Specialist: 1 free PCP, Deductible then 50% coinsurance Deductible, Coinsurance: \$6,300/\$12,600, 50% Max OOP: \$9,100/\$18,200 Rx: Deductible then 50%/50%/50%
Healthfirst Bronze Pro EPO HSA	PCP/Specialist: Deductible then 50% coinsurance Deductible, Coinsurance: \$5,950/\$11,900, 50% Max OOP: \$6,900/\$13,800 Rx: Deductible then 50%/50%/50%	Discontinued	Healthfirst Bronze 6850 Pro EPO HSA	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: \$6,850/\$13,700, 0% Max OOP: \$6,850/\$13,700 Rx: Deductible then 0%/0%/0%

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Healthfirst Bronze 5250 Pro EPO	PCP/Specialist: 3 free PCP and/or Outpt MH/SUD^ visits, Deductible then 50% Deductible, Coinsurance: \$5,250/\$10,500, 50% Max OOP: \$8,550/\$17,100 Rx: Deductible then 50%/50%/50%	Discontinued	Healthfirst Bronze 6850 Pro EPO HSA	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: \$6,850/\$13,700, 0% Max OOP: \$6,850/\$13,700 Rx: Deductible then 0%/0%/0%
Healthfirst Bronze 8225 Pro EPO	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: \$8,225/\$16,450, 0% Max OOP: \$8,225/\$16,450 Rx: Deductible then 0%/0%/0%	Discontinued	Healthfirst Bronze 6850 Pro EPO HSA	PCP/Specialist: Deductible then 0% coinsurance Deductible, Coinsurance: \$6,850/\$13,700, 0% Max OOP: \$6,850/\$13,700 Rx: Deductible then 0%/0%/0%
Oxford Metro Bronze HSA 7000 G	PCP/Specialist: Deductible then 0% coins Deductible, Coinsurance: \$7,000/\$14,000, 0% Max OOP: \$7,050/\$14,100 Rx: Deductible then 0%/0%/0%	MOOP decrease	Oxford Metro Bronze HSA 7000 G	PCP/Specialist: Deductible then 0% coins Deductible, Coinsurance: \$7,000/\$14,000, 0% <b>Max OOP: \$7,000/\$14,000</b> Rx: Deductible then 0%/0%/0%
Oxford Liberty Bronze HSA 5750	PCP/Specialist: Deductible then \$25/\$75 Deductible, Coinsurance: \$5,750/\$11,500, 30% Max OOP: \$7,050/\$14,100 Rx: Deductible then 30%/30%/30%	MOOP increase	Oxford Liberty Bronze HSA 5750	PCP/Specialist: Deductible then \$25/\$75 Deductible, Coinsurance: \$5,750/\$11,500, 30% <b>Max OOP: \$7,350/\$14,700</b> Rx: Deductible then 30%/30%/30%