

2026 Small Group Pharmacy at a Glance

We offer small group plans with the needs of small businesses in mind. Our pharmacy benefits are listed below. Plans noted as “creditable” offer coverage as robust as Medicare Part D.

A deductible is the amount you must pay each plan year before the plan starts to pay benefits. Coinsurance is a percentage you pay for each fill or refill. A copayment (also called a copay) is a fixed dollar amount you pay for each fill or refill.

An integrated deductible means pharmacy costs are included in your medical deductible.

Small Group Plan	Pharmacy Deductible Individual/Family	Pharmacy Cost Sharing Per 30-Day Supply Tiers 1 (generic)/2 (preferred)/3 (non-preferred)	Creditable Benefits
Platinum Level			
Platinum Premier	\$100/\$200	\$5 copay before deductible/\$30 copay after deductible/ \$75 copay after deductible	Creditable
Gold Level			
Gold Premier	\$150/\$300	\$7 copay before deductible/\$40 copay after deductible/ \$85 copay after deductible	Creditable
Silver Level			
Silver Plus HSA*	\$3,500/\$7,000 integrated deductible	\$15 copay/\$45 copay/\$100 copay after deductible	Creditable
Silver Premier	\$250/\$500	\$20 copay before deductible/\$50 copay after deductible/ \$120 copay after deductible	Creditable
Bronze Level			
Bronze Plus HSA*	\$8,000/\$16,000 integrated deductible	\$35 copay/\$65 copay/\$115 copay after deductible	Non-Creditable
Bronze Premier	\$8,400/\$16,800 integrated deductible	\$50 copay before deductible/50% coinsurance after deductible/50% coinsurance after deductible	Non-Creditable

*Health savings account. This plan is HSA eligible and requires the employer to opt in at the time of enrollment/renewal.

This summary is provided for information only. It does not contain complete details of the plan, which are available only in the contract or Certificate of Coverage. It does not constitute an agreement.

Underwritten by Health Insurance Plan of Greater New York (HIP). Refer to the following policy forms: **Platinum plan:** Platinum Premier Schedule 155-OA-NSSGPlatinumPremierSch (04/25); **Gold plan:** Gold Premier Schedule 155-OA-NSSGGoldPremierSch (04/25); **Silver plans:** Silver Premier Schedule 155-OA-NSSGSilverPremierSch (04/25), Silver Plus HSA Schedule 155-OANSSGSilverPlusHSASch (04/25); **Bronze plans:** Bronze Premier Schedule 155-OA-NSSGBronzePremierSch (04/25), Bronze Plus HSA Schedule 155-OA-NSSGBronzePlusHSASch (04/25).

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