

3rd Quarter 2009 Hot Plans!

From Cold Spring Benefit Partners

<p>EPO - Emblem Health EPO 20/50/0 NG</p> <p>No Referrals National Network \$20 Office Co-pay \$20 Labs and Testing Co-Pay \$20 Specialist Co-Pay</p> <p>\$0 Co-Pay Children No In-Hospital Co-Pay</p> <p>\$50 ER Co-Pay \$0/30/50 Rx, No Deductible \$0 Co-Pay Generic Drugs</p> <p>Single \$528 Family \$1,349</p>	<p>EPO - Empire EPOc 30/2000/80—10K</p> <p>National Network \$30 Office Co-pay \$30 Specialist Co-Pay</p> <p>\$0 Co-Pay Well Care (to age 19) \$30 Co-Pay Routine Adult Care</p> <p>\$100 ER Co-Pay \$2,000/5,000 Deductible 80% Co-Pay \$10/25/50 Rx w \$100 Deductible</p> <p>Single \$381 Double \$762 Parent/Child(ren) \$685 Family \$1,142</p>	<p>EPO - MVP Health Care EPO E0046S 30/500/NG</p> <p>No Referrals National Network \$30 Office Co-pay \$30 Specialist Co-Pay</p> <p>\$500 Hospital Co-Pay \$150 Hospital Out-Patient Co-Pay \$10/30/50 Rx, no Deductible</p> <p>Single \$405 Double \$810 Parent/Children \$792 Family \$1,167</p>
<p>EPO - Aetna Health, Inc. EPO OA 2-07b (EPOc)</p> <p>National Network \$25 Office Co-Pay \$50 Labs and Testing Co-Pay \$50 Specialist Co-Pay</p> <p>\$1,500/\$4,500 Ind/Fam Deductible Deductible Applies to In Hospital Services</p> <p>\$100 ER Co-pay \$15/\$35/\$70 Rx, w/ No Deductible</p> <p>Single \$373 Double \$860 Parent/Child(ren) \$727 Family \$1,125</p>	<p>EPO - Oxford Metro EPO Liberty Ease 50/500/NG</p> <p>No Referrals National Network \$50 Office Co-pay \$50 Labs and Testing Co-Pay No Co-pay at Participating Labs \$50 Specialist Co-Pay</p> <p>\$150 ER Co-Pay \$500 In/Out-Patient Co-pay \$500 Out-Patient Surgical Co-Pay \$15/\$35/\$75 Rx, w \$100 Deductible</p> <p>Single \$332 Double \$731 Parent/Child(ren) \$615 Family \$1,030</p>	<p>EPO - Emblem Health EPO 4 2500/70 HSA</p> <p>\$2,500/\$5,000 Ind/Fam Deductible Co-Insurance 70% \$4,750/\$9,500 Out-of-Pocket Max 100% Paid After Deductible and Out-of-Pocket Maximum Satisfied</p> <p>ER Subject to Deductible and Co-Ins Hospital Subject to Ded and Co-Ins \$0/\$20/\$40 Rx, after Deductible</p> <p>Single \$229 Family \$585</p>

The quoted rates are based on a Putnam County business with a 7/1/09-9/15/09 effective date.

Actual rates and benefits are subject to final verification from the carriers.



Empire



Aetna



GHIHMO



Oxford Health Plans®

For further information or a no obligation cost comparison of your current employee benefit plan contact Phil Fulco at 845-567-3930 ext. 224.

New Horizons

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•••• Cold Spring Benefit Partners ••••

A service of the Cold Spring Area Chamber of Commerce and New Horizons Asset Management Group, LLC