Date: October 29, 2025

Time: 10:00am - 11:30pm



2026 QUALIFIED HEALTH PLAN AND ESSENTIAL PLAN LINE UP

Log into the Webex <u>first</u>: click <u>HERE</u>

Then, you may connect to audio via computer audio or via telephone audio.

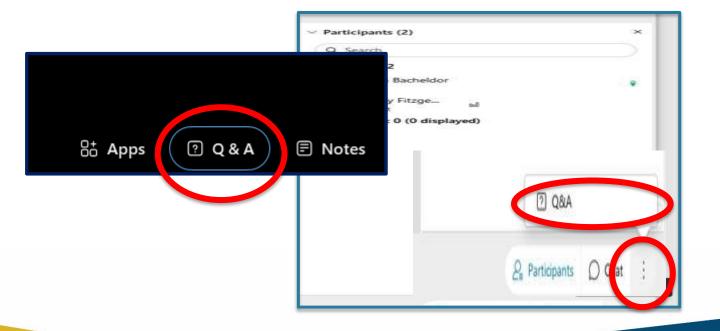
QUESTIONS

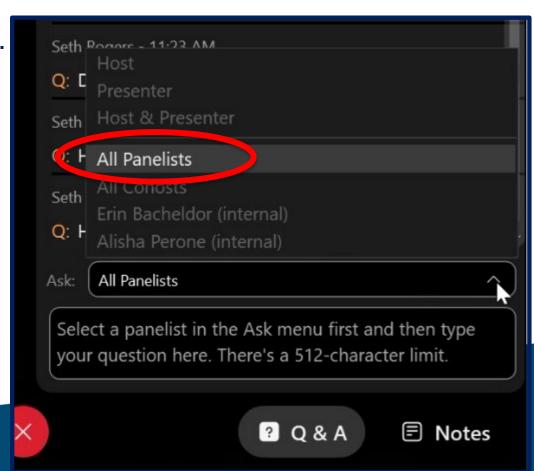


Questions can be submitted using the Q & A function on your Webex control panel.

Chat function is disabled, please use Q & A panel to submit questions.

We'll take questions at the end of today's presentation.



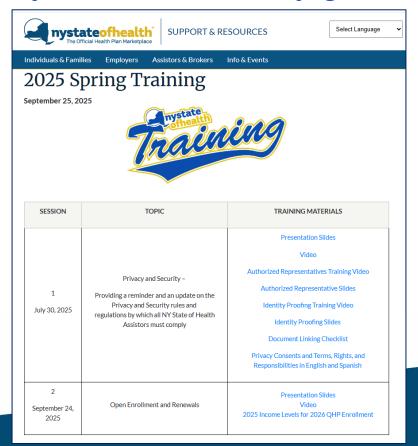


RECORDING AND MATERIALS



A recording of the webinar and any related materials will be available online on our Spring Training webpage. Please visit:

https://info.nystateofhealth.ny.gov/SpringTraining



YOUR FEEDBACK: OPEN ENROLLMENT AND RENEWALS



Webinar Statistics:

- Approximately 99% of respondents said the webinar was informative on the 2025
 Open Enrollment and renewal period.
- Just over 96% said information from the webinar will allow them to better assist consumers with their renewals.

Here's what you said:

- "Thank you for yearly refreshers and for positivity from the start to the very end. It draws us in and keeps us engaged."
- "We truly appreciate the timelines, charts, and resources. These are things we can reference again and again."

TODAY'S PRESENTATION



<u>Introductions</u>

Alicia Neznek Director, Bureau of Consumer Assistance and Training

Presenters

Rachel Jeschke Supervisor, Plan Management, NY State of Health

Panelists

Joe Gagnon Assistant Director of Plan Management, NY State of Health

Maggie Middleton Director of Plan Management, NY State of Health

Sonia Sekhar Deputy Director, NY State of Health

AGENDA



2026 Plan Line Up

- Qualified Health Plans
- Essential Plan
- Small Business Marketplace
- Dental Plans
- Resources and Tools

NY STATE OF HEALTH IS OPEN FOR BUSINESS!



 Individual and Small Business health and dental insurer options will continue to be robust in every county of the State.

• 2026 Open Enrollment period will run from November 1, 2025 – January 31, 2026.

Our priority is to ensure that quality, affordable coverage is available.



2026 QUALIFIED HEALTH PLANS

Financial Assistance Updates for 2026

- At this time, the expanded tax credits have not yet been extended by Congress.
 If they are not extended, APTC will no longer be available to consumers over 400% FPL in 2026.
 - If the enhanced tax credits are extended beyond 2025, we will notify Assistors ASAP with updated information.
- NY State of Health hopes to continue cost-sharing subsidies through the end of 2026, subject to available funds. Otherwise, they would terminate July 1, 2026.



2026 QUALIFIED HEALTH PLANS

- The same twelve (12) health insurers will offer Qualified Health Plans (QHPs) in the individual market in 2026.
- The number of insurer options varies by county from two (2) to seven (7).
- Most consumers have a choice of at least four (4) insurer options.
- Charts of insurers offering QHP by county are identified in the PDF attachments located at: https://info.nystateofhealth.ny.gov/2026plans.

2026 QHP INSURERS INDIVIDUAL MARKET



































Note: When counting - Highmark of Western NY/Highmark of Northeastern NY, Anthem BlueCross/BlueCross BlueShield, and Excellus/Univers are each counted as one.



STANDARD PRODUCT REFRESHER

- Every insurer must offer a Standard Product at each metal level and in every county of its Marketplace service area.
- Standard products must include the Essential Health Benefits (EHB), except pediatric dental, which is optional if otherwise available.
- Cost-sharing (deductibles, copayments) are the same across insurers within a metal tier.
 - The Standard benefit Design Cost-Sharing Description Chart shows all preset out-of-pocket costs for an individual within the plan year.
 - 2025 chart can be found <u>here</u>.
 - 2026 chart can be found <u>here</u>.



STANDARD PRODUCTS IN 2026

<u>Metal Level</u>	Deductible 2025	Deductible 2026	Max Out of Pocket 2025	Max Out of Pocket 2026
Platinum	\$0	\$0	\$2,000	\$2,000
Gold	\$600 \$775		\$7,900	\$10,150
Silver	\$2,100	\$2,450	\$9,200	\$10,150
Silver Enhanced	\$1,855	\$2,160	\$7,350	\$8,100
Silver Supreme	\$350	\$450	\$3,050	\$3,350
Silver 94	\$0	\$0	\$1,075	\$1,275
Bronze	\$3,800	\$4,125	\$9,200	\$10,150
Catastrophic	\$9,200	\$10,600	\$9,200	\$10,600



REMINDERS FOR STANDARD PRODUCTS

- All Standard Bronze products will include three (3) visits subject to co-payments but not subject to the deductible. Catastrophic products include three (3) primary care visits per calendar year that are not subject to the deductible and with no copayment.
 - The three visits covered in Standard Bronze and Catastrophic products can be either primary care OR specialist including mental health and substance use disorder visits.
- Prescription drugs are covered <u>before</u> the deductible for Standard Gold and Silver products.
- Deductible levels affect most consumers, while few consumers reach their MOOP each year.



Non-Standard Products Refresher

- Nine (9) QHP insurers will offer non-standard products in 2026.
- Non-standard products are available in all counties.
 - Insurers will continue to <u>offer up to two (2) non-standard products</u> in each metal level.
- Unlike standard products, non-standard products:
 - Do not have to be offered at all four metal levels.
 - Must be offered at a minimum of two metal levels of the insurer's choosing, and the number of nonstandard Bronze products is limited.
- The most commonly offered non-standard benefits include Adult/Family Dental, Adult/Family Vision, Telemedicine, and Acupuncture.
 - Non-standard products may also offer a variation on cost-sharing.



SIDE BY SIDE COMPARISON

	Standard	Non-Standard
Offering	Offered by <u>all</u> insurers	Offered by <u>most</u> insurers
Provider Network	QHP Standard Network	May be the QHP Standard Network, Tiered or Limited Network
Covered Benefits	Essential Health Benefits (EHB)	EHB plus additional benefits (e.g., adult dental, adult vision, acupuncture)
Cost-sharing	Standard across all insurers	Varies from insurer to insurer



Naming Format – Individual Market

Field Name	Values	Meaning
Product Name	To be assigned by Insurer	
Metal Tier	Bronze, Silver, Gold, Platinum, Child Only, Catastrophic	Identifies Metal Level and whether Child Only or Catastrophic Product
Standard / Non-Standard	ST or NS	Identifies Standard (ST) or Non-Standard (NS) Product
Network Coverage	INN or OON	Identifies in-network coverage (INN) or out-of-network coverage (OON)
Silver CSR Identifier	Enhanced or Supreme	Identifies if the product is a Silver CSR Product and which level
Network Name	To be assigned by the Insurer	Indicates the network name associated with each product
Dependent Age Coverage	Dep25, Dep29	Identifies the maximum age of covered dependents
Non-Standard Details	Adult Vision, Family Dental, Family Vision, Wellness, Other	Identifies additional covered benefits
Dental Coverage	Pediatric Dental, Adult / Family Dental	Identifies type of dental coverage included, if any, in QHP

2026 ESSENTIAL PLAN



- Twelve (12) insurers will offer Essential Plans in 2026.
- The number of insurer options varies by county from two (2) to seven (7).
- Most consumers have a choice of at least four (4) insurer options.
- Charts of insurers offering EP by county are identified in the PDF attachments located at: https://info.nystateofhealth.ny.gov/2026plans

2026 ESSENTIAL PLAN INSURERS































Note: When counting Insurers, Excellus/Univera is counted as one. Affinity by Molina Healthcare and Molina Healthcare are also counted as one.

ESSENTIAL PLAN REMINDERS



	Essential Plan 200-250	Essential Plan 1	Essential Plan 2	Essential Plan 3	Essential Plan 4
Income Eligibility	200%-250% FPL	150%-200% FPL	138%-150% FPL	100-138% FPL	Below 100% FPL
Premium	\$0	\$0	\$0	\$0	\$0
Deductible	\$0	\$0	\$0	\$0	\$0
Maximum Out-of- pocket	\$2,000	\$360	\$200	\$200	\$0
Vision and Dental Cost-Sharing	Included with no additional cost and no co-pay for services	Included with no additional cost and no co-pay for services	Included with no additional cost and no co-pay for services	Included with no additional cost and no co-pay for services	Included with no additional cost and no co-pay for services
Additional Benefits	N/A	N/A	N/A	Additional benefits include non-emergency transportation, non-prescription drugs, orthotic services and orthotic footwear.	Additional benefits include non-emergency transportation, non-prescription drugs, orthotic services and orthotic footwear.



2026 Marketplace Program Participation by Insurer							
Insurer (Parent Company)	Medicaid (MA)	Child Health Plus (CHP)	Essential Plan (EP)	Qualified Health Plans (QHP)	Small Business Marketplace (SHOP)	Total Number of Programs	Participates Across Programs (MA, EP, QHP)
Amida Care*	Х					1	
Anthem Blue Cross & BlueShield HP, Anthem Blue Cross HP	х	Х	Х	x	х	5	Х
CDPHP	х	X	X	X	х	5	X
EmblemHealth	Х	Х	X	X	X	5	
Excellus BlueCross BlueShield/Univera	Х	Х	X	x	Х	5	X
Fidelis Care	Х	X	X	X		4	X
Healthfirst	х	X	X	X		4	X
Highmark	х	Х	X	X		4	X
Independent Health	Х	X	X	X		4	X
MetroPlus	Х	X	X	X		4	X
Molina	Х	X	X			3	
MVP Health Care	Х	Х	X	X	X	5	X
Oscar				X		1	
UnitedHealthcare	Х	Х	X	X	X	5	X
VNSNY Choice Select Health*	X					1	
Total Number of Insurers	14	12	12	12	6		11

2026 SMALL BUSINESS MARKETPLACE



- Six (6) Insurers will offer coverage in the Small Business Marketplace (SBM).
- There are many insurers for employers to choose from through New York's SBM in 2026. Currently, these six (6) insurers offer over 1,800 policies.
- The number of insurer options varies by county from one (1) to six (6).
- Healthy NY will be offered in every county across the state in 2026:
 - Small employers can benefit from both Healthy NY and federal small business tax credits.
- SBM "Direct Enrollment" option makes it easier for New York's small businesses to access the Federal Small Business Health Care Tax Credit.

2026 SMALL BUSINESS MARKETPLACE INSURERS



















Note: When counting Insurers, Empire BlueCross/Empire BlueCross BlueShield, and Excellus/Univers are each counted as one.



STAND-ALONE DENTAL PLANS (SADPS)



















New for 2026

- Beginning January 1st, 2026, NY State of Health will be requiring all SADP Issuers to offer one (1) Stand-Alone Dental Plan (SADP) which is a standard dental plan for individual adults and families.
 - This standard plan will have a \$50 individual/\$150 family embedded, combined in-network and out-of-network deductible per plan year.
 - All services will be subject to the deductible.
 - There is an in-network and out-of-network combined annual benefit maximum of \$1,500 per plan year.
 - All SADP Issuers are required to offer this standard adult/family dental plan.
 - Issuers will still be able to offer non-standard dental plan options.
 - Consumers must be enrolled in a QHP to purchase this SADP standard benefit.





New for 2026

- The standard SADP adult / family benefit will cover 285 total dental benefit codes covered under 9 different categories:
 - Diagnostic
 - Preventive
 - Restorative
 - Endodontic

- Periodontic
- Prosthodontic
- Prosthodontic Fixed
- Oral Surgery
- Adjunctive Services



New for 2026

This chart displays the benefit categories, and the corresponding coinsurances (expressed as the issuer's responsibility) for the standard adult dental plan.

Dental Service Category	In-Network Benefits	Out-Of-Network Benefits		
Diagnostic	100%	100%		
Preventive	100%	100%		
Restorative (Fillings)	80%	80%		
Restorative (Crowns)	50%	50%		
Endodontics	80%	80%		
Periodontics	80%	80%		
Prosthodontics, Removable (Dentures)	50%	50%		
Prosthodontics, Fixed	50%	50%		
Oral & Maxillofacial Surgery	50%	50%		
Adjunctive General Services	80%	80%		

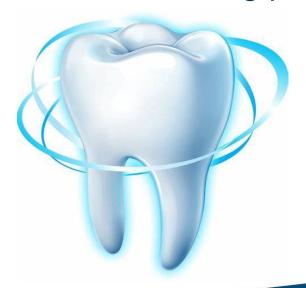
For 2026 NY State of Health did not develop a standard copay product. We will explore designing a copay plan in the future.





Reminder

- There is no waiting period for adult dental services through a SADP, except for covered orthodontia services.
 - Qualified Health Plans that offer adult dental benefits as part of a nonstandard product may still have a waiting period for services.





2026 INDIVIDUAL STAND-ALONE DENTAL PLANS, CONTINUED

- The permitted pediatric out-of-pocket maximum for 2026 has increased to \$450/\$900.
- The actual MOOP is determined by the plan but cannot be more than \$450/\$900 for pediatric dental.



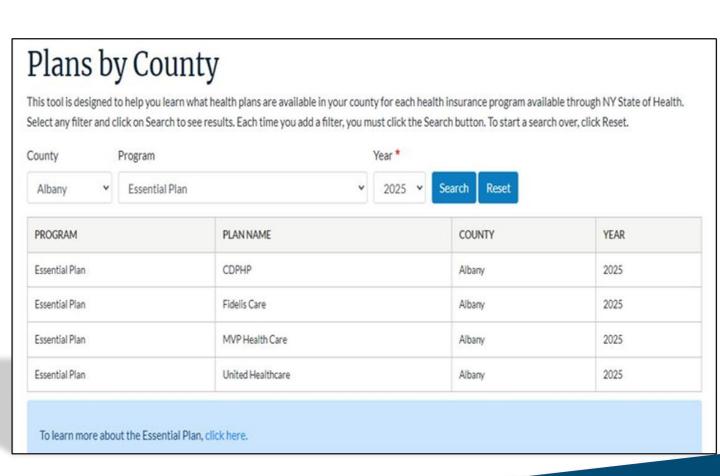


OTHER RESOURCES AND TOOLS

PLANS BY COUNTY SEARCH TOOL



- This tool provides a way to search which health plans are available in which program for each county in NYS.
- Tool can be found here: https://info.nystateofhealth.ny.gov/plans-by-county
- Or by using info.nystateofhealth.ny.gov > Individuals & Family > Find Plans by County

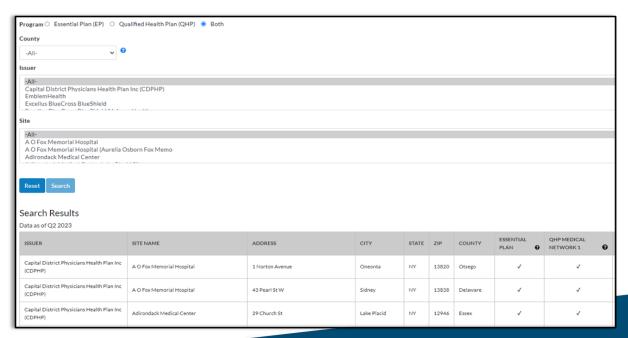


HOSPITAL PARTICIPATION SEARCH TOOL



- The Hospital Participation Search Tool can be found here: https://info.nystateofhealth.ny.gov/hospital-participation
- This tool is designed to help you find participating hospitals in an insurer's network in the Essential Plan and Qualified Health Plan programs. You can search by Insurer or by Hospital.









NYS Provider & Health Plan Look-Up Tool



- How to access the NYS Provider & Health Plan Look-Up Tool:
 - https://pndslookup.health.ny.gov
 - NY State of Health Website
- The telehealth icon will appear in the search results

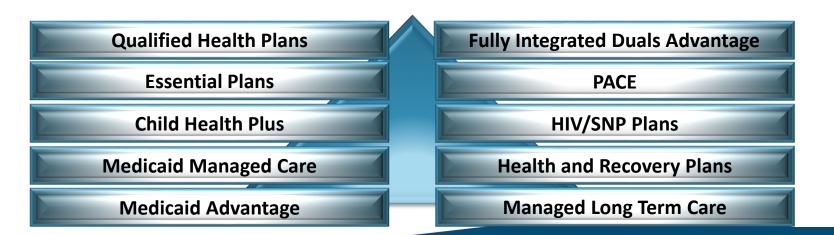






NYS Provider & Health Plan Look-Up Tool, Continued

- Networks can change throughout the year. It is important to check the NYS Provider & Health Plan Look-Up Tool to verify providers and facilities and their participation with plans.
- This is an online tool to research provider networks and health plans.
 - Search by provider, including doctors and hospitals, to see which health plans they participate in.
 - Search by health plan to see a list of providers and/or facilities that participate with that plan.
 - Search by facility to find a health plan.
- The NYS Provider & Health Plan Look-Up currently includes:



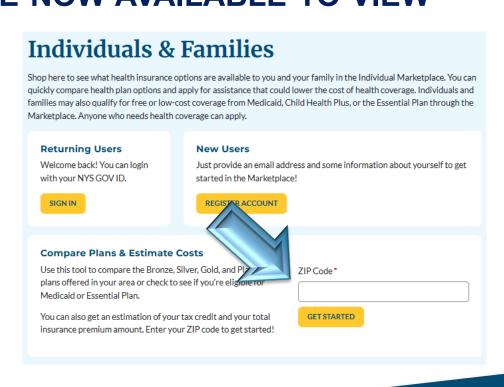






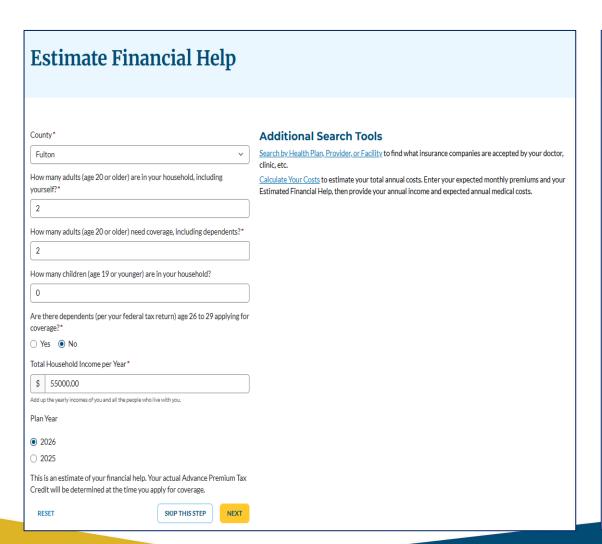
NY STATE OF HEALTH ANONYMOUS PLAN SEARCH TOOL 2026 PLAN OPTIONS ARE NOW AVAILABLE TO VIEW

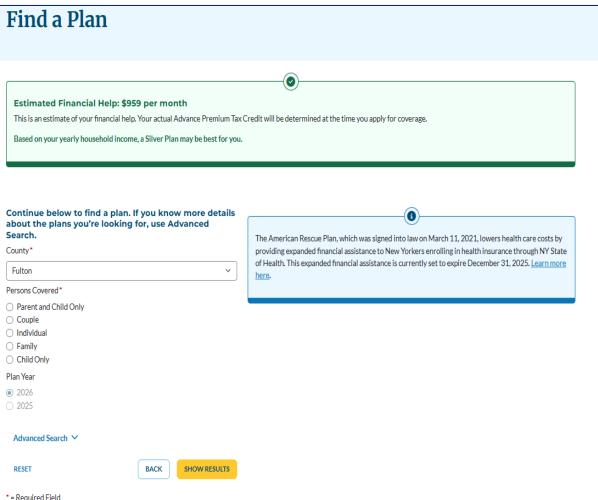




NY STATE OF HEALTH ANONYMOUS PLAN SEARCH TOOL AND ESTIMATING FINANCIAL ASSISTANCE

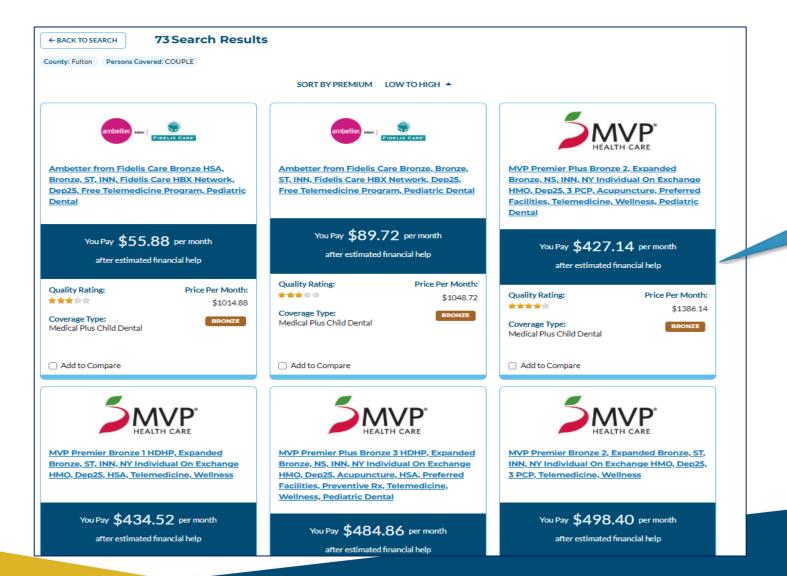






NY STATE OF HEALTH ANONYMOUS PLAN SEARCH TOOL AND ESTIMATING FINANCIAL ASSISTANCE, CONTINUED





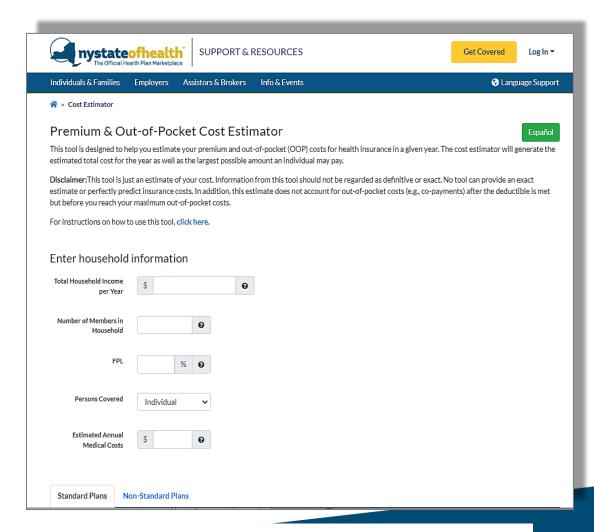
Plans display with tax credit deducted



nystateofhealth The Official Health Plan Marketplace

QHP OUT-OF-POCKET COST ESTIMATOR

- Compares estimated consumer premium and out-ofpocket costs in different standard and non-standard plans.
- Consumers input household information and estimated annual medical costs.
- Generates the <u>estimated</u> total cost for the year as well as the largest possible amount an individual may pay.
- The QHP Out-of-Pocket Cost Estimator can be found here: https://info.nystateofhealth.ny.gov/cost-estimator
- <u>Disclaimer</u>: No tool can provide an exact estimate or perfectly predict costs.



 $_{\odot}$ The QHP Out-of-Pocket Estimator tool will be updated by November 1 $^{
m st}$ with the 2026 plan options.



QUESTIONS?

2026 QHP and EP Plan Line Up

- Qualified Health Plans
- Essential Plan
- Small Business Marketplace
- Dental Plans
- Resources and Tools



EMAIL CONTACTS



All Assistors

- If you have general Assistor training questions, or questions about this specific training, please send them to: <u>Eligibility.Training.Support@health.ny.gov</u>.
- If you have a case-specific question that you have already discussed with your supervisor or program manager, the issue should be submitted on an encrypted Account Review Spreadsheet to: <u>Assistor.Cases@health.ny.gov</u>.
- If you need help with your Assistor account or Oversight Manager account, or if your agency needs to report staff changes, please send an email to: <u>Assistor.Admin@health.ny.gov</u>.

Navigators Only

- When Navigator Agencies are submitting contract documents (vouchers, annual packet documents, consumer story submissions, site schedules, etc.) and related questions to the New York State Department of Health, please send them to: Navigator.Admin@health.ny.gov.
 - CC your Navigator Contract Manager
- When Navigator Agencies are submitting media approval requests, and educational and marketing material approval requests to the New York State Department of Health, please send them to: Navigator.Media@health.ny.gov.
 - CC your Navigator Contract Manager

RECERTIFICATION PROCESS



- All Assistors and Assistor Oversight Managers who are registered or completed the online Assistor Certification Training by <u>10/31/2025</u> will be required to view the recertification webinars. The material included in each webinar is a supplement to what was provided during the in-person and online courses.
 - https://info.nystateofhealth.ny.gov/SpringTraining.
- Keep track of the date you watched the live webinar or the video for each of this year's recertification webinars.
- Provide your dates to your supervisor so they can complete the Recertification Report.

THANK YOU FOR JOINING US!



- Please complete the survey:
 - Evaluation of Webinar: 2026 QHP and EP Plan Line Up
- As always, watch for the video and materials to be posted to: http://info.nystateofhealth.ny.gov/SpringTraining.

Next Recertification Training:

Stay tuned and watch your emails!

