2026 certified health insurance **plan options**

Get access to more top-quality doctors, hospitals and pharmacies in Buffalo and Rochester

Get up to $200 or $400 a year in Reward Cash with Vitalize℠ in partnership with Personify Health

Need help choosing the right plan for you?

Contact your broker or call our dedicated representatives at 1-888-588-1447 (TTY 711).

	STANDARD				
Plan benefits & features	**Bronze Standard HSA** (HSA** qualified)	**Bronze Standard** (HSA** qualified)	**Silver Standard**	**Gold Standard**	**Platinum Standard**
Tax credit available (on-exchange only)	Yes	Yes	Yes	Yes	Yes
Deductible (single/family)	$5,500 / $11,000	$4,125 / $8,250	$2,450 / $4,900	$775 / $1,550	$0 / $0
Out-of-pocket maximum (single/family)	$8,050 / $16,100	$10,150 / $20,300	$10,150 / $20,300	$10,150 / $20,300	$2,000 / $4,000
Aggregation type	Individual	Individual	Individual	Individual	Individual
Coinsurance	You pay 50%	You pay 50%	You pay 0%*	You pay 0%*	You pay 0%*
Preventive care (immunizations, screenings)	$0 for most preventive services NSD	$0 for most preventive services NSD	$0 for most preventive services NSD	$0 for most preventive services NSD	$0 for most preventive services NSD
Primary Care office visit (PCP)	50%	$50 PCP / $75 SPC. First 3 visits NSD.	$30. First visit NSD.	$25	$15
Specialist office visit (SPC)			$65. First visit NSD.	$40	$35
Hospital services		$1,500	$1,500	$1,000	$500
Outpatient services		$150	$150	$100	$100
Emergency Room		$500	$500	$150	$100
Urgent care		$75	$70	$60	$55
Lab work		$50	$50	$40	$35
Basic x-ray		$75	$75	$40	$35
Prescription drugs***	$10 for Tier 1 $35 for Tier 2 $70 for Tier 3	$10 for Tier 1 $35 for Tier 2 $70 for Tier 3	$15 for Tier 1 $40 for Tier 2 $75 for Tier 3 NSD†	$10 for Tier 1 $35 for Tier 2 $70 for Tier 3 NSD†	$10 for Tier 1 $30 for Tier 2 $60 for Tier 3
Telemedicine / Teledermatology	$0 / 50%	$0. First 3 qualifying visits NSD. / $75. First 3 visits NSD.	$0. First visit NSD. / $65. First visit NSD.	$0 / $40	$0 / $35
Pediatric vision* and dental	Covered	Covered	Covered	Covered	Covered
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).					
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)					
Single	$751.16	$751.23	$975.56	$1,243.70	$1,473.51
Single + spouse	$1,502.31	$1,502.47	$1,951.13	$2,487.40	$2,947.03
Single + child(ren)	$1,276.97	$1,277.10	$1,658.46	$2,114.29	$2,504.98
Single + spouse + child(ren)	$2,140.80	$2,141.02	$2,780.36	$3,544.54	$4,199.51
Child only	$309.47	$309.51	$401.94	$512.40	$607.08

Standard plans are required by New York State. The benefits and out-of-pocket costs for the Standard plans will be the same for all health insurance companies. Provider networks will differ by insurance company.

Part of the Affordable Care Act is intended to improve dental coverage for children, including preventive, routine and some major dental coverage. Individuals purchasing medical coverage outside of the NY State of Health Marketplace, are required to purchase a medical plan with pediatric dental included, or a qualified stand-alone plan. By purchasing a medical plan with dental included, you can be sure your children will receive comprehensive coverage overseen by our staff of medical management experts, and both medical and pediatric dental services will count towards your out of pocket maximums. Any one person insured on a family plan will not pay more than $10,600 in compliance with the Affordable Care Act.

* Some benefits, such as pediatric vision and durable medical equipment may have different coinsurance amounts.

** An HSA or Health Savings Account is a tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more. Certain subsidized health plans may not be eligible for health savings accounts.

*** Insurance coverage for GLP-1 drugs may vary. For more information, call 1-888-588-1447 (TTY 711).

† Note to diabetic drug and supply users: In accordance with the contract language/benefit mandates provided by New York State, if your plan includes a deductible, diabetic drugs and supplies – excluding insulin – are subject to the deductible amount.

UN-1997Y26 Rev 8/25 / 20979-25M UN

Western New York region

Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans and Wyoming Counties.

nystateofhealth™ The Official Health Plan Marketplace

univera HEALTHCARE

We have a plan for **everyone.**

Everyone deserves access to quality, affordable health care coverage

We have got you covered with free or low cost New York State sponsored insurance plans such as Medicaid, Child Health Plus, and the Essential Plan, as well as individual and family plans from the name you have known and trusted for over four decades.

Most individual and family plans vary in price and have eligibility guidelines based on your household income and where you live, determined by New York State. Call us to get personalized help for your unique health care situation.

Medicaid

With Medicaid, you and your family will have access to a wide network of quality doctors and specialists, hospitals and urgent care centers.

Child Health Plus

Just need coverage for your kids? Child Health Plus is a New York State sponsored health insurance program for kids under 19 years old. Almost all children qualify, and many families qualify for free coverage.

The Essential Plan

Premiums are $0 month for eligible individuals, with coverage widely accepted by doctors, hospitals and pharmacies. Individuals under age 65 may be eligible based on New York State household income and size guidelines.

Individual and family Qualified Health Plans

Get the benefits you and your family need with our Bronze, Silver, Gold, and Platinum plans with coverage accepted by a large network of hospitals and doctors from Buffalo to Rochester. Nearly 3 out of 4 New Yorkers qualify for reduced premiums.

Dental plans

When it comes to maintaining overall health and wellbeing, taking care of your teeth is just as important as taking care of the rest of your body. You can now save on dental care with individual and family dental plans.

	NON-STANDARD					
Plan benefits & features	POPULAR **Bronze Secure Plus 3** (HSA** qualified) LOW COST	POPULAR **Bronze Select** (HSA** qualified)	NEW **Silver Select 2** (HSA** qualified)	POPULAR **Silver Select** (HSA** qualified)	**Gold Select**	**Platinum Select**
Tax credit available (on-exchange only)	Yes	Yes	Yes	Yes	Yes	Yes
Deductible (single/family)	$10,600 / $21,200	$5,500 / $11,000	$4,500 / $9,000	$3,200 / $6,400	$1,350 / $2,700	$0 / $0
Out-of-pocket maximum (single/family)	$10,600 / $21,200	$7,500 / $15,000	$7,000 / $14,000	$8,200 / $16,400	$9,000 / $18,000	$6,350 / $12,700
Aggregation type	Individual	Family	Family	Family	Individual	Individual
Coinsurance	You pay 0%	You pay 50%	20%	You pay 20%*	You pay 0%*	You pay 0%*
Preventive care (immunizations, screenings)	$0 for most preventive services NSD		$0 for most preventive services NSD		$0 for most preventive services NSD	$0 for most preventive services NSD
Primary Care office visit (PCP)	0%. First 3 visits NSD.	50%	20%	20%	$25. First 3 qualifying visits NSD.	$15
Specialist office visit (SPC)	0%				$40. First 3 qualifying visits NSD.	$25
Acupuncture visit (up to 10)					$25	$15
Physical, occupational and speech therapy					$25	$15
Hospital services					$1,000	$750
Outpatient services					$500	$150
Emergency Room					$500	$150
Urgent care					$40	$25
Lab work					$40	$25
Basic x-ray					$40	$15
Prescription drugs***		$10 for Tier 1 40% for Tier 2 50% for Tier 3 Preventative Rx NSD	$10 for Tier 1 $45 for Tier 2 $90 for Tier 3	$10 for Tier 1 $45 for Tier 2 $90 for Tier 3 Preventative Rx NSD	$10 for Tier 1 $35 for Tier 2 $70 for Tier 3 NSD†	$10 for Tier 1 $35 for Tier 2 $70 for Tier 3
Telemedicine / Teledermatology	0%. First 3 qualifying visits NSD. / 0%	0% / 50%	$0 / 20%	0% / 20%	$0 / $40. First 3 qualifying visits NSD.	$0 / $25
Adult vision exams and dental (preventive & routine)	$0	50%	20%	20%	$25	$15
Adult eyewear	$100	$100	$100	$100	$100	$100
Pediatric vision* and dental	Covered		Covered		Covered	Covered
The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as not subject to deductible (NSD).						
Rates shown cover dependents through age 26 and plans meet ACA pediatric dental compliance. (Additional rates available upon request.)						
Single	$677.25	$734.90	$874.95	$954.45	$1,191.37	$1,460.42
Single + spouse	$1,354.50	$1,469.79	$1,749.89	$1,908.89	$2,382.74	$2,920.83
Single + child(ren)	$1,151.32	$1,249.32	$1,487.41	$1,622.56	$2,025.33	$2,482.71
Single + spouse + child(ren)	$1,930.16	$2,094.45	$2,493.60	$2,720.17	$3,395.41	$4,162.19
Child only	NA	NA	NA	NA	NA	NA

Part of the Affordable Care Act is intended to improve dental coverage for children, including preventive, routine and some major dental coverage. Individuals purchasing medical coverage outside of the NY State of Health Marketplace, are required to purchase a medical plan with pediatric dental included, or a qualified stand-alone plan. By purchasing a medical plan with dental included, you can be sure your children will receive comprehensive coverage overseen by our staff of medical management experts, and both medical and pediatric dental services will count towards your out of pocket maximums.

Any one person insured on a family plan will not pay more than $10,600 in compliance with the Affordable Care Act.

* Some benefits, such as pediatric vision and durable medical equipment may have different coinsurance amounts.

** An HSA or Health Savings Account is a tax-free funding account owned by you that helps you pay for qualified medical expenses such as lab fees, prescription drugs, contact lenses, chiropractor visits and more. Certain subsidized health plans may not be eligible for health savings accounts.

*** Insurance coverage for GLP-1 drugs may vary. For more information, call 1-888-588-1447 (TTY 711).

† Note to diabetic drug and supply users: In accordance with the contract language / benefit mandates provided by New York State, if your plan includes a deductible, diabetic drugs and supplies — excluding insulin — are subject to the deductible amount.

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Western New York region

New for 2026:

Choose our **new HSA qualified non-standard plan** – Silver Select 2

Save time and travel with the convenience of **Teledermatology** in partnership with MDLIVE® available 24/7/365, even on holidays

Complement your medical coverage with our new **Univera Healthcare Healthy Smile** Standard Adult Dental℠ Plan

The Essential Plan –

Available only through NY State of Health, with eligibility based on your household size, income and other criteria. **All plans include adult vision and dental coverage.** To find out if you qualify for the Essential Plan, contact your broker or call our dedicated representatives.

Annual income eligibility for the Essential Plan

Household size	Essential Plan 200-250 (201%-250% FPL)	Essential Plan 1 & 2 (139%-200% FPL)
1	$31,301 - $39,125	$21,598 - $31,300
2	$42,301 - $52,875	$29,188 - $42,300
3	$53,301 - $66,625	$36,778 - $53,300
4	$64,301 - $80,375	$44,368 - $64,300
5	$75,301 - $94,125	$51,958 - $75,300
6	$86,301 - $107,875	$59,548 - $86,300

The benefits and out of pocket costs for the Essential Plan will be the same for all health insurance companies.

Plan benefits & features	Essential Plan 200-250 (201% - 250% FPL)	Essential Plan 1 (151% - 200% FPL)	Essential Plan 2 (139% - 150% FPL)
Deductible	$0	$0	$0
Coinsurance	0%	0%	0%
Out-of- pocket maximum	$2,000	$360	$200
Preventive care (immunization, screenings)	$0 for most preventive services		
Primary Care office visit (PCP)	$15	$15	$0
Specialist office visit (SPC)	$25	$25	$0
Hospital services	$150	$150	$0
Outpatient services	$50	$50	$0
Emergency Room	$75	$75	$0
Urgent care	$25	$25	$0
Lab work	$25	$25	$0
Basic x-ray	$25	$25	$0
Adult vision exam	$0	$0	$0
Glasses and contact lenses	$0	$0	$0
Adult dental	$0	$0	$0
Telemedicine / Teledermatology	$0 / $25	$0 / $25	$0 / $0
Prescription drugs***	$6 for Tier 1 $15 for Tier 2 $30 for Tier 3	$6 for Tier 1 $15 for Tier 2 $30 for Tier 3	$1 for Tier 1 $3 for Tier 2 $3 for Tier 3
Rates through NY State of Health			
Single	$0	$0	$0

New York State has identified the fitness reward program as a required essential benefit that must be included for all plans, therefore the Vitalize benefit cannot be removed from the plans.