

	Plan Name	Deductible		Out-of-Pocket Maximum		Coinsurance Level	Office Visit		Urgent Care	Emergency Room	Pharmacy
		Individual	Family	Individual	Family		Primary Care	Specialist			
Prime Network	Platinum HMO 1	\$500	\$1,000	\$1,500	\$3,000	20%	\$20	\$40	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%
	Gold HMO 1	\$0	\$0	\$7,350	\$14,700	50%	\$25	\$50	\$50	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 2	\$750	\$1,500	\$5,000	\$10,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 3	\$1,000	\$2,000	\$5,000	\$10,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 4	\$1,500	\$3,000	\$5,000	\$10,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 5	\$2,000	\$4,000	\$5,000	\$10,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 7	\$2,000	\$4,000	\$7,350	\$14,700	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 8	\$2,500	\$5,000	\$5,000	\$10,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 9	\$2,500	\$5,000	\$5,000	\$10,000	30%	\$35	\$70	\$70	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Gold HMO 10	\$3,000	\$6,000	\$5,000	\$10,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%
	Silver HMO 2	\$2,500	\$5,000	\$7,350	\$14,700	40%	\$35	\$70	\$70	\$300 + Coins	\$4/\$20/\$45/\$95/25%
	Silver HMO 3	\$3,000	\$6,000	\$6,000	\$12,000	20%	20%	20%	20%	20%	\$4/\$15/\$35/\$75/25%
	Silver HMO 4	\$3,000	\$6,000	\$7,350	\$14,700	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
	Silver HMO 5	\$3,500	\$7,000	\$7,350	\$14,700	30%	\$35	\$70	\$70	\$300 + Coins	\$4/\$20/\$45/\$95/25%
	Silver HMO 6	\$4,000	\$8,000	\$6,000	\$12,000	20%	20%	20%	20%	20%	\$4/\$15/\$35/\$75/25%
	Silver HMO 7	\$4,500	\$9,000	\$7,350	\$14,700	30%	\$30	\$60	\$60	\$300 + Coins	\$4/\$20/\$45/\$95/25%
	Silver HMO 8	\$5,000	\$10,000	\$7,350	\$14,700	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%

**Networks are available according to the following counties:**

**Prime SHN Network** - Adams, Allen, Benton, Blackford, Boone, Carroll, Cass, Clinton, DeKalb, Delaware, Elkhart, Fountain, Fulton, Grant, Hamilton, Howard, Huntington, Jasper, Jay, Kosciusko, LaGrange, LaPorte, Madison, Marshall, Miami, Montgomery, Newton, Noble, Pulaski, Randolph, St. Joseph, Starke, Steuben, Tippecanoe, Tipton, Wabash, Warren, Wells, White, and Whitley.

**Prime CHA Network** - Elkhart, Fulton, Kosciusko, LaPorte, Marshall, Pulaski, St. Joseph and Starke.

**KEY:**

All plans include Pediatric Dental & Vision Coverage

**Note:** This summary is not intended to provide a full description of eligible benefits, requirements and limitations. Additional benefit plans, options, and products are available, and can be accessed online at [www.phpni.com](http://www.phpni.com). Call a PHP Sales Representative today at (260)432-6690 or toll free at 1-800-982-6257 for more information.