

		In-Network					Out-of-Network										
Plan Name		Deductible		Out-of-Pocket Maximum		Coinsurance Level	Deductible		Out-of-Pocket Maximum		Coinsurance Level	Office Visit		Urgent Care	ER	Pharmacy	
		Individual	Family	Individual	Family		Individual	Family	Individual	Family		Primary Care	Specialist				
Prime Network	*	Gold HSA P1	\$2,500	\$5,000	\$2,500	\$5,000	0%	\$5,000	\$10,000	\$7,500	\$15,000	30%	0%	0%	0%	0%	0%
		Silver HSA P1	\$3,000	\$6,000	\$4,500	\$9,000	20%	\$6,000	\$12,000	\$9,000	\$18,000	50%	20%	20%	20%	20%	20%
	^	Silver HSA P2	\$3,000	\$6,000	\$5,000	\$10,000	0%	\$6,000	\$12,000	\$9,000	\$18,000	30%	\$25	\$50	\$50	\$300	\$4/\$15/\$35/\$75/25%
		Silver HSA P3	\$3,750	\$7,500	\$3,750	\$7,500	0%	\$7,500	\$15,000	\$11,250	\$22,500	30%	0%	0%	0%	0%	0%
		Silver HSA P4	\$4,000	\$8,000	\$4,000	\$8,000	0%	\$8,000	\$16,000	\$12,000	\$24,000	30%	0%	0%	0%	0%	0%
		Bronze HSA P1	\$2,700	\$5,400	\$6,650	\$13,300	50%	\$5,400	\$10,800	\$13,300	\$26,600	50%	50%	50%	50%	50%	50%
		Bronze HSA P2	\$5,000	\$10,000	\$6,650	\$13,300	20%	\$10,000	\$20,000	\$13,300	\$26,600	50%	20%	20%	20%	20%	20%
	^	Bronze HSA P3	\$6,000	\$12,000	\$6,650	\$13,300	0%	\$12,000	\$24,000	\$18,000	\$36,000	30%	0%	0%	0%	0%	\$4/\$20/\$45/\$95/25%
		Bronze HSA P4	\$6,350	\$12,700	\$6,350	\$12,700	0%	\$12,700	\$25,400	\$19,050	\$38,100	30%	0%	0%	0%	0%	0%
		Bronze HSA P5	\$6,650	\$13,300	\$6,650	\$13,300	0%	\$13,300	\$26,600	\$19,950	\$39,900	30%	0%	0%	0%	0%	0%

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:

* = Non-embedded deductible plans

^ = Copays apply after deductible

All plans include Pediatric Vision & Dental 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. Call a PHP Sales Representative today at (260)432-6690 or toll free at 1-800-982-6257 for more information.