# LEVEL Solutions Plans | 2023 OPTIONS Network

(5–100 employees)



### HMO | 2023 OPTIONS Network-LEVEL SOLUTIONS Plans (5-100 employees)



Plan Name	Deductible Individual Family		Out-of-Pocket Maximum Individual Family		Coinsurance Level	Office Visit Primary Care Specialist		Urgent Emergency Care Room		Pharmacy	
Level Solutions 500											
HMO 11 23	\$500	\$1,000	\$1,500	\$3,000	20%	\$20	\$40	\$50	\$300 + Coins	\$4/\$10/\$25/\$50/25%	
Level Solutions 500							î				
HMO 12 23	\$500	\$1,500	\$3,000	\$6,000	10%	\$20	\$40	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%	
Level Solutions 750											
HMO 11 23	\$750	\$1,500	\$5,000	\$10,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$25/\$50/25%	
Level Solutions 1000											
HMO 11 23	\$1,000	\$2,000	\$2,000	\$4,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%	
Level Solutions 1000											
HMO 13 23	\$1,000	\$2,000	\$3,000	\$6,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%	
Level Solutions 1000											
HMO 14 23	\$1,000	\$2,000	\$4,000	\$8,000	30%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%	
Level Solutions 1000											
HMO 15 23	\$1,000	\$2,000	\$5,000	\$10,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%	
Level Solutions 1500											
HMO 11 23	\$1,500	\$3,000	\$4,000	\$8,000	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%	
Level Solutions 1500											
HMO 12 23	\$1,500	\$3,000	\$5,000	\$10,000	30%	\$25	\$50	\$50	\$300 + Coins	\$4/\$15/\$35/\$65/25%	
Level Solutions 2000											
HMO 11 23	\$2,000	\$4,000	\$4,000	\$8,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%	
Level Solutions 2000											
HMO 14 23	\$2,000	\$4,000	\$5,000	\$10,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$65/25%	
Level Solutions 2500											
HMO 11 23	\$2,500	\$5,000	\$5,000	\$10,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%	
Level Solutions 2500											
HMO 12 23	\$2,500	\$5,000	\$8,700	\$17, 400	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%	
Level Solutions 2500											
HMO 13 23	\$2,500	\$5,000	\$8,700	\$17,400	50%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%	
Level Solutions 3000											
HMO 13 23	\$3,000	\$6,000	\$5,000	\$10,000	20%	20%	20%	20%	20%	\$4/\$10/\$30/\$60/25%	
Level Solutions 3000											
HMO 11 23	\$3,000	\$6,000	\$6,000	\$12,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%	

### HMO | 2023 OPTIONS Network-LEVEL SOLUTIONS Plans (5-100 employees)



Plan Name	Deductible		Out-of-Pocket Maximum		Coinsurance Level	Office Visit		Urgent Care	Emergency Room	Pharmacy
	Individual	Family	Individual	Family	Level	Primary Care	Specialist	Care	Koom	
Level Solutions 3000										
HMO 12 23	\$3,000	\$6,000	\$8,700	\$17,400	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$75/25%
Level Solutions 3500										
HMO 11 23	\$3 <i>,</i> 500	\$7,000	\$7,000	\$14,000	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
Level Solutions 3500										
HMO 15 23	\$3 <i>,</i> 500	\$7,000	\$7,350	\$14,700	20%	\$25	\$50	\$50	\$300 + Coins	\$4/\$10/\$30/\$60/25%
Level Solutions 3500										
HMO 12 23	\$3,500	\$7,000	\$8,700	\$17,400	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
Level Solutions 3500										
HMO 13 23	\$3 <i>,</i> 500	\$7,000	\$8,700	\$17,400	50%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
Level Solutions 4000										
HMO 12 23	\$4,000	\$8,000	\$6,000	\$12,000	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$10/\$30/\$60/25%
Level Solutions 4000										
HMO 11 23	\$4,000	\$8,000	\$8,700	\$17,400	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
Level Solutions 5000										
HMO 12 23	\$5 <i>,</i> 000	\$10,000	\$7,150	\$14,300	20%	\$30	\$60	\$60	\$300 + Coins	\$4/\$20/\$40/\$70/25%
Level Solutions 5000										
HMO 11 23	\$5 <i>,</i> 000	\$10,000	\$8,700	\$17,400	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%
Level Solutions 6000										
HMO 11 23	\$6,000	\$12,000	\$8,700	\$17,400	30%	\$40	\$80	\$80	\$300 + Coins	\$4/\$20/\$45/\$95/25%

# **HDHP HMO** | 2023

#### **OPTIONS** Network-**LEVEL SOLUTIONS** Plans (5–100 employees)



	Plan Name	Deductil	ble	Out-of-Pocket Maximum		Coinsurance	Office Visit		Urgent	Emergency	Pharmacy
	Plan Name	Individual	Family	Individual	Family	Level	Primary Care	Specialist	Care	Room	Fliatiliacy
*	Level Solutions 1500 HSA H11 23	\$1,500	\$3,000	\$1,500	\$3,000	0%	0%	0%	0%	0%	0%
*	Level Solutions 1500 HSA H12 23	\$1,500	\$3,000	\$3,000	\$6,000	20%	20%	20%	20%	20%	20%
*	Level Solutions 2000 HSA H11 23	\$2,000	\$4,000	\$2,000	\$4,000	0%	0%	0%	0%	0%	0%
	Level Solutions 3000 HSA H11 23	\$3,000	\$6,000	\$3,000	\$6,000	0%	0%	0%	0%	0%	0%
*	Level Solutions 3000 HSA H14 23	\$3,000	\$6,000	\$3,000	\$6,000	0%	0%	0%	0%	0%	0%
^	Level Solutions 3000 HSA H15 23	\$3,000	\$6,000	\$4,000	\$8,000	0%	0%	0%	0%	0%	\$4/\$10/\$30/\$60/25%
^	Level Solutions 3000 HSA H16 23	\$3,000	\$6,000	\$5,000	\$10,000	0%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$65/25%
^	Level Solutions 3000 HSA H17 23	\$3,000	\$6,000	\$5,750	\$11,500	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/25%
	Level Solutions 3000 HSA H12 23	\$3,000	\$6,000	\$6,000	\$12,000	20%	20%	20%	20%	20%	20%
	Level Solutions 4000 HSA H11 23	\$4,000	\$8,000	\$4,000	\$8,000	0%	0%	0%	0%	0%	0%
^	Level Solutions 4000 HSA H14 23	\$4,000	\$8,000	\$5,000	\$10,000	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/25%
^	Level Solutions 4000 HSA H15 23	\$4,000	\$8,000	\$6,000	\$12,000	0%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$65/25%
	Level Solutions 4000 HSA H12 23	\$4,000	\$8,000	\$7,000	\$14,000	20%	20%	20%	20%	20%	20%
	Level Solutions 4000 HSA H13 23	\$4,000	\$8,000	\$7,000	\$14,000	30%	30%	30%	30%	30%	30%
	Level Solutions 5000 HSA H11 23	\$5,000	\$10,000	\$5,000	\$10,000	0%	0%	0%	0%	0%	0%
^	Level Solutions 5000 HSA H12 23	\$5,000	\$10,000	\$6,000	\$12,000	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/25%
^	Level Solutions 5000 HSA H14 23	\$5,000	\$10,000	\$6,650	\$13,300	0%	\$30	\$60	\$60	\$300 + Coins	\$4/\$15/\$35/\$65/25%
	Level Solutions 5000 HSA H13 23	\$5,000	\$10,000	\$6,650	\$13,300	20%	20%	20%	20%	20%	20%
	Level Solutions 6000 HSA H11 23	\$6,000	\$12,000	\$6,000	\$12,000	0%	0%	0%	0%	0%	0%

## HDHP HMO | 2023

#### **OPTIONS** Network-**LEVEL SOLUTIONS** Plans (5–100 employees)



Plan Name	Deductible Individual Family		Out-of-Pocket Maximum Individual Family		Coinsurance Level	Office Visit Primary Care Specialist		Urgent Care	Emergency Room	Pharmacy
Level Solutions 6550 HSA H11 23	\$6,550	\$13,100	\$6,550	\$13,100	0%	0%	0%	0%	0%	0%
Level Solutions 7000 HSA H11 23	\$7,000	\$14,000	\$7,000	\$14,000	0%	0%	0%	0%	0%	0%
Level Solutions 7500 HSA H11 23	\$7,500	\$15,000	\$7,500	\$15,000	0%	0%	0%	0%	0%	0%

**KEY**: **\*** = Non-embedded plans, **^** = Copays apply after Deductible

#### PHP's OPTIONS Network is available in the following counties:

- Adams
- Allen
- DeKalb
- Elkhart
- Fulton

- Huntington
- Kosciusko
- LaGrange
- LaPorte
- Marshall

- Miami
- Noble
- Pulaski
- St. Joseph
- Starke

- Steuben
- Wabash
- Wells
- Whitley

**NOTE:** If not yet approved by the Indiana Department of Insurance, the benefits contained throughout this document may need to be adjusted.

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 phpni.com. Call PHP Sales at 260-432-6690, ext. 840 or Toll Free at 1-800-982-6257, ext. 840 for more information.

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