



# LEVEL Solutions Plans | 2024

**OPTIONS Network**

*(5–100 employees)*



# HMO | 2024 Indiana Plans

**OPTIONS** Network-**LEVEL SOLUTIONS** (5-100 employees)



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

# HMO | 2024 Indiana Plans

**OPTIONS** Network-**LEVEL SOLUTIONS** (5-100 employees)



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

# HDHP HMO | 2024 Indiana Plans

OPTIONS Network-LEVEL SOLUTIONS (5-100 employees)



	Plan Name	Deductible		Out-of-Pocket Maximum		Coinsurance Level	Office Visit		Urgent Care	Emergency Room	Pharmacy
		Individual	Family	Individual	Family		Primary Care	Specialist			
*	Level Solutions 1600 HSA H11	\$1,600	\$3,200	\$1,600	\$3,200	0%	0%	0%	0%	0%	0%
*	Level Solutions 1600 HSA H12	\$1,600	\$3,200	\$3,000	\$6,000	20%	20%	20%	20%	20%	20%
*	Level Solutions 2000 HSA H11	\$2,000	\$4,000	\$2,000	\$4,000	0%	0%	0%	0%	0%	0%
*	Level Solutions 3000 HSA H14	\$3,000	\$6,000	\$3,000	\$6,000	0%	0%	0%	0%	0%	0%
	Level Solutions 3200 HSA H11	\$3,200	\$6,400	\$3,200	\$6,400	0%	0%	0%	0%	0%	0%
^	Level Solutions 3200 HSA H15	\$3,200	\$6,400	\$4,000	\$8,000	0%	0%	0%	0%	0%	\$4/\$10/\$30/\$60/15%/25%
^	Level Solutions 3200 HSA H16	\$3,200	\$6,400	\$5,000	\$10,000	0%	\$30	\$60	\$60	\$300	\$4/\$15/\$35/\$65/15%/25%
^	Level Solutions 3200 HSA H17	\$3,200	\$6,400	\$5,750	\$11,500	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/15%/25%
	Level Solutions 3200 HSA H12	\$3,200	\$6,400	\$6,000	\$12,000	20%	20%	20%	20%	20%	20%
	Level Solutions 4000 HSA H11	\$4,000	\$8,000	\$4,000	\$8,000	0%	0%	0%	0%	0%	0%
^	Level Solutions 4000 HSA H14	\$4,000	\$8,000	\$5,000	\$10,000	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/15%/25%
^	Level Solutions 4000 HSA H15	\$4,000	\$8,000	\$6,000	\$12,000	0%	\$30	\$60	\$60	\$300	\$4/\$15/\$35/\$65/15%/25%
	Level Solutions 4000 HSA H12	\$4,000	\$8,000	\$7,000	\$14,000	20%	20%	20%	20%	20%	20%
	Level Solutions 4000 HSA H13	\$4,000	\$8,000	\$7,000	\$14,000	30%	30%	30%	30%	30%	30%
	Level Solutions 5000 HSA H11	\$5,000	\$10,000	\$5,000	\$10,000	0%	0%	0%	0%	0%	0%
^	Level Solutions 5000 HSA H12	\$5,000	\$10,000	\$6,000	\$12,000	0%	0%	0%	0%	0%	\$4/\$15/\$35/\$65/15%/25%
^	Level Solutions 5000 HSA H14	\$5,000	\$10,000	\$6,650	\$13,300	0%	\$30	\$60	\$60	\$300	\$4/\$15/\$35/\$65/15%/25%
	Level Solutions 5000 HSA H13	\$5,000	\$10,000	\$6,650	\$13,300	20%	20%	20%	20%	20%	20%
	Level Solutions 6000 HSA H11	\$6,000	\$12,000	\$6,000	\$12,000	0%	0%	0%	0%	0%	0%

# HDHP HMO | 2024 Indiana Plans

**OPTIONS** Network-**LEVEL SOLUTIONS** (5-100 employees)



Plan Name	Deductible		Out-of-Pocket Maximum		Coinsurance Level	Office Visit		Urgent Care	Emergency Room	Pharmacy
	Individual	Family	Individual	Family		Primary Care	Specialist			
Level Solutions 6550 HSA H11	\$6,550	\$13,100	\$6,550	\$13,100	0%	0%	0%	0%	0%	0%
Level Solutions 7000 HSA H11	\$7,000	\$14,000	\$7,000	\$14,000	0%	0%	0%	0%	0%	0%
Level Solutions 7500 HSA H11	\$7,500	\$15,000	\$7,500	\$15,000	0%	0%	0%	0%	0%	0%
Level Solutions 8000 HSA H11	\$8,000	\$16,000	\$8,000	\$16,000	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](http://phpni.com). Call **PHP Sales at 260-432-6690, ext. 840** or **Toll Free at 1-800-982-6257, ext. 840** for more information.*

1700 Magnavox Way, Suite 201 | Fort Wayne, IN 46804

**Phone:** 260-432-6690 | **Toll Free:** 1-800-982-6257 | **Fax:** 260-432-0493

**Email:** [custsvc@phpni.com](mailto:custsvc@phpni.com) | [phpni.com](http://phpni.com)

