INDIANA

Large Group Plans | 2027

Dual Network Plans

(51+ employees)

PHP

Dual Network Plans | 2027

LARGE GROUP Plans *(51+ employees)*

		IN-NETWORK					OUT-OF-NETWORK									
	Plan Name	Deductible		Out-of-Pocket Maximum		Coinsur-ance Level	Deductible		Out-of-Pocket Maximum		Coinsur-ance Level	Office Visit		Urgent Care	ER	Pharmacy
		Individual	*Family*	*Individual*	*Family*		*Individual*	*Family*	*Individual*	*Family*		*Primary Care*	*Specialist*			
*	Legacy DN 1000 HMO 11 - Options	$1,000	$2,000	$2,500	$5,000	20%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	$25	$50	$50	$300 + Coins	$4/$10/$30/$60/ 15%/25%
*	Legacy DN 1000 POS 1 - Freedom	$1,000	$2,000	$2,500	$5,000	20%	$2,000	$4,000	$5,000	$10,000	50%	$25	$50	$50	$300 + Coins	$4/$10/$30/$60/ 15%/25%
	Legacy DN 1500 HMO 11 - Options	$1,500	$3,000	$6,000	$12,000	30%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	$30	$60	$60	$300 + Coins	$4/$15/$35/$65/ 15%/25%
	Legacy DN 1500 POS 1 - Freedom	$1,500	$3,000	$6,000	$12,000	30%	$3,000	$6,000	$12,000	$24,000	50%	$30	$60	$60	$300 + Coins	$4/$15/$35/$65/ 15%/25%
	Legacy DN 1800 HSA H11 - Options	$1,800	$3,600	$1,800	$3,600	0%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	0%	0%	0%	0%	0%
	Legacy DN 1800 HSA P1 - Freedom	$1,800	$3,600	$1,800	$3,600	0%	$3,600	$7,200	$5,400	$10,800	30%	0%	0%	0%	0%	0%
	Legacy DN 2500 HMO 11 - Options	$2,500	$5,000	$4,500	$9,000	20%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	$30	$60	$60	$300 + Coins	$4/$15/$35/$65/ 15%/25%
	Legacy DN 2500 POS 1 - Freedom	$2,500	$5,000	$4,500	$9,000	20%	$5,000	$10,000	$9,000	$18,000	50%	$30	$60	$60	$300 + Coins	$4/$15/$35/$65/ 15%/25%

Dual Network Plans | 2027

LARGE GROUP Plans *(51+ employees)*

Plan Name	IN-NETWORK					OUT-OF-NETWORK									
	Deductible		Out-of-Pocket Maximum		Coinsur-ance Level	Deductible		Out-of-Pocket Maximum		Coinsur-ance Level	Office Visit		Urgent Care	ER	Pharmacy
	Individual	*Family*	*Individual*	*Family*		*Individual*	*Family*	*Individual*	*Family*		*Primary Care*	*Specialist*			
Legacy DN 3500 HSA H11 - Options	$3,500	$7,000	$3,500	$7,000	0%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	0%	0%	0%	0%	0%
Legacy DN 3500 HSA P1 - Freedom	$3,500	$7,000	$3,500	$7,000	0%	$7,000	$14,000	$10,500	$21,000	30%	0%	0%	0%	0%	0%
Legacy DN 4000 HSA H11 - Options	$4,000	$8,000	$6,800	$13,600	20%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	20%	20%	20%	20%	20%
Legacy DN 4000 HSA P1 - Freedom	$4,000	$8,000	$6,800	$13,600	20%	$8,000	$16,000	$13,600	$27,200	50%	20%	20%	20%	20%	20%
Legacy DN 4900 HSA H11 - Options	$4,900	$9,800	$4,900	$9,800	0%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	0%	0%	0%	0%	0%
Legacy DN 4900 HSA P1 - Freedom	$4,900	$9,800	$4,900	$9,800	0%	$9,800	$19,600	$14,700	$29,400	30%	0%	0%	0%	0%	0%
Legacy DN 5000 HMO 11 - Options	$5,000	$10,000	$7,500	$15,000	30%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	$30	$60	$60	$300 + Coins	$4/$20/$40/$70/ 15%/25%
Legacy DN 5000 POS 1 - Freedom	$5,000	$10,000	$7,500	$15,000	30%	$10,000	$20,000	$15,000	$30,000	50%	$30	$60	$60	$300 + Coins	$4/$20/$40/$70/ 15%/25%

Dual Network Plans | 2027

LARGE GROUP Plans *(51+ employees)*

	IN-NETWORK					OUT-OF-NETWORK									
Plan Name	**Deductible**		**Out-of-Pocket Maximum**		**Coinsur-ance Level**	**Deductible**		**Out-of-Pocket Maximum**		**Coinsur-ance Level**	**Office Visit**		**Urgent Care**	**ER**	**Pharmacy**
Legacy DN 6800 HSA H11 - Options	$6,800	$13,600	$6,800	$13,600	0%	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	0%	0%	0%	0%	0%
Legacy DN 6800 HSA P1 - Freedom	$6,800	$13,600	$6,800	$13,600	0%	$13,600	$27,200	$20,400	$40,800	30%	0%	0%	0%	0%	0%

KEY: ***** = Non-Embedded Plans

PHP Dual Network Plans are 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.*

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 | **phpni.com**