



Large Employer Group Plans for 2016

51 or more total employees

Step 1: Check appropriate box.

Step 2: Circle coinsurance option, office visit option and Rx option, where applicable.

Step 3: Submit this form to sales@deancare.com or your account management team for renewal business

✓	Plan Offering	HRA	Single Deductible Value Options		Coinsurance Options		Single Deductible & Coinsurance Limit Options		Office Visit Options					Rx Options		
		(check box for HRA)			(circle choice if more than one option is listed)				(circle choice or multiple choices)					(circle choice or both)		
<input type="checkbox"/>	HMO		\$0		0%		\$0		\$0	\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%
<input type="checkbox"/>	HMO with \$300 hospital copay		\$0		0%		\$0		\$0	\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$250	10%	20%	\$750		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$500	10%	20%	\$1,500		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$1,000	10%	20%	\$2,000		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$1,500	10%	20%	\$3,000		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$2,000	10%	20%	\$4,000		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$2,500	10%	20%	\$5,000		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$3,500	0%		\$3,500		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$3,500	10%	20%	\$6,600		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$5,000	0%		\$5,000		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		
<input type="checkbox"/>	HMO	<input type="checkbox"/>	\$5,000	10%	20%	\$6,600		\$15	\$20	\$30	\$40	\$50	\$10 / \$25 / \$50	\$10 / 30% / 50%		

Assumptions for non-HSA eligible HMO plans:

- Emergency Room Copay is standard - \$125
- In-Network ACA MOOP = \$6850 single/\$13,700 family in 2016, however we are maintaining 2015 values in 2016 (\$6,600/\$13,200)

✓	HSA Eligible Plan Offering	Single Deductible Value Options	Coinsurance Options	Single ACA Maximum Out-of-Pocket
<input type="checkbox"/>	HMO	\$1,500	0%	\$1,500
<input type="checkbox"/>	HMO	\$1,500	20%	\$3,000
<input type="checkbox"/>	HMO	\$2,000	0%	\$2,000
<input type="checkbox"/>	HMO	\$2,500	0%	\$2,500
<input type="checkbox"/>	HMO	\$3,000	0%	\$3,000
<input type="checkbox"/>	HMO	\$3,000	20%	\$6,000
<input type="checkbox"/>	HMO	\$3,500	0%	\$3,500
<input type="checkbox"/>	HMO	\$4,000	0%	\$4,000
<input type="checkbox"/>	HMO	\$5,000	0%	\$5,000

Note: Should any quoting require options other than those provided OR the assumptions do not align with consumer needs, please contact your sales or account management team to request a modified plan design(s).



Large Employer Group Plans for 2016

51 or more total employees

Step 1: Check appropriate box.

Step 2: Circle coinsurance option, office visit option and Rx option, where applicable.

Step 3: Submit this form to sales@deancare.com or your account management team for renewal business

✓	Plan Offering		HRA	Single Deductible Value Options		Coinsurance Options		Single Deductible & Coinsurance Limit Options		Office Visit Options					Rx Options		
	(circle choice)		(check box for HRA)	In Network	Out-of-Network	In-Network	Out-of-Network <small>(circle choice if more than one option is listed)</small>	In Network	Out-of-Network	(circle choice or multiple choices)					(circle choice or both)		
<input type="checkbox"/>	PPO	POS		\$0	\$250	0%	20%	\$0	\$750	\$0	\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO with \$300 hospital copay	POS with \$300 hospital copay		\$0	\$250	0%	20%	\$0	\$750	\$0	\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$250	\$500	10%	20%	\$750	\$1,500		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$500	\$1,000	10%	20%	\$1,500	\$3,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$1,000	\$2,000	10%	20%	\$2,000	\$4,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$1,500	\$3,000	10%	20%	\$3,000	\$6,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$2,000	\$4,000	10%	20%	\$4,000	\$8,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$2,500	\$5,000	10%	20%	\$5,000	\$10,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$3,500	\$7,000	0%	20%	\$3,500	\$7,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$3,500	\$7,000	10%	30%	\$6,600	\$13,200		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$5,000	\$10,000	0%	20%	\$5,000	\$10,000		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%
<input type="checkbox"/>	PPO	POS	<input type="checkbox"/>	\$5,000	\$10,000	10%	30%	\$6,600	\$13,200		\$15	\$20	\$30	\$40	\$50	\$10/\$25/\$50	\$10/30%/50%

Assumptions for non-HSA PPO/POS plans:

- Emergency Room Copay is standard - \$125
- In-Network ACA MOOP = \$6850 single/\$13,700 family in 2016, however we are maintaining 2015 values in 2016 (\$6,600/\$13,200)
- Out-of-network ACA MOOP is unlimited, meaning copays will continue to apply even if the out-of-network deductible/coinsurance limit has been met.

Note: Should any quoting require options other than those provided OR the assumptions do not align with consumer needs, please contact your sales or account management team to request a modified plan design(s).



Large Employer Group Plans for 2016

51 or more total employees

Step 1: Check appropriate box.

Step 2: Circle coinsurance option, office visit option and Rx option, where applicable.

Step 3: Submit this form to sales@deancare.com or your account management team for renewal business

✓	HSA Eligible Plan Offering		Single Deductible Value Options		Coinsurance Options		Single ACA Maximum Out-of-Pocket	
	(circle choice)		In Network	Out-of-Network	In-Network	Out-of-Network	In Network	Out-of-Network
<input type="checkbox"/>	PPO	POS	\$1,500	\$3,000	0%	20%	\$1,500	\$4,000
<input type="checkbox"/>	PPO	POS	\$1,500	\$3,000	20%	40%	\$3,000	\$6,000
<input type="checkbox"/>	PPO	POS	\$2,000	\$4,000	0%	20%	\$2,000	\$8,000
<input type="checkbox"/>	PPO	POS	\$2,500	\$5,000	0%	20%	\$2,500	\$10,000
<input type="checkbox"/>	PPO	POS	\$3,000	\$6,000	0%	20%	\$3,000	\$12,000
<input type="checkbox"/>	PPO	POS	\$3,000	\$6,000	20%	40%	\$6,000	\$12,000
<input type="checkbox"/>	PPO	POS	\$3,500	\$7,000	0%	20%	\$3,500	\$14,000
<input type="checkbox"/>	PPO	POS	\$4,000	\$8,000	0%	20%	\$4,000	\$16,000
<input type="checkbox"/>	PPO	POS	\$5,000	\$10,000	0%	20%	\$5,000	\$20,000

Note: Should any quoting require options other than those provided OR the assumptions do not align with consumer needs, please contact your sales or account management team to request a modified plan design(s).