

# TripleChoicePlan

## Security Life - PPO Plan Options

### “In-Network” PPO Plans

	Plan Option A	Plan Option B	Plan Option C
	In-Network	In-Network	In-Network
Preventive	100%	100%	100%
Diagnostic	100%	100%	100%
Basic	90%	80%	80%
Major	60%	50%	50%
Deductible	\$50 *	\$50 *	\$50
Annual Maximum	\$2,000	\$1,500	\$1,000

\* Waived for preventive and diagnostic services

### “In & Out-of-Network” PPO Plans

	Plan Option 1		Plan Option 2		Plan Option 3	
	In-Network	Out-Of-Network	In-Network	Out-Of-Network	In-Network	Out-Of-Network
Preventive	100%	100%	100%	100%	100%	80%
Diagnostic	100%	100%	100%	100%	100%	80%
Basic	90%	80%	80%	80%	80%	80%
Major	60%	50%	50%	50%	50%	50%
Deductible	\$50 *	\$50 *	\$50 *	\$50 *	\$50 *	\$100 *
Annual Maximum	\$2,000	\$2,000	\$1,500	\$1,500	\$1,000	\$1,000

\* Waived for preventive and diagnostic services

- Endo and Perio (Prophylaxis Scaling) are paid as Basic Benefits on all PPO Plans.
- Out-Of-Network Benefits Paid at the 80th Percentile on PPO Plans 1, 2 and 3.
- A minimum of 5 employees are required to enroll on the “In-Network” PPO and/or the “In & Out-of-Network” PPO plans when combined with our DHMO products..
- Choice of one “In-Network” PPO and/or one “In & Out-of-Network” PPO combination alongside any or all of the DHMO offerings.

**(For Groups of 10 or more eligible employees)**