



How to request changes

For groups that offer a Single Plan, Designated Plans or Mix-n-Match option
Please note: Grid is based upon a combination of both benefit and premium design

U - Underwriting is required **GI** - No underwriting is required if replacing existing plan with new plan

Move to:	Elements Hospital Plans			EPO Plans	HMO Plans										Additional Plans									
	Elements Hospital Preferred	Elements Hospital Plus	Elements Hospital	EPO	HMO 10 100%	HMO 25 100%	Classic 20 HMO	Classic 30 HMO	Classic 40 HMO	Saver 20 HMO	Saver 30 HMO	Saver 40 HMO	Select 25 HMO	Select 35 HMO	Advantage 25 PPO	Lumenos 1500 (100/70)	PPO HSA 2400	PPO HSA 3500	Lumenos HIA+ 3000	PHF 750	PHF 500	PPO Saver	PPO Basic	
Premier PPO Plans	Premier PPO \$10 Copay	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI	U	GI	GI	GI	GI	GI	GI	GI	GI
	Premier PPO \$20 Copay	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI	U	GI	GI	GI	GI	GI	GI	GI	GI
	Premier PPO \$30 Copay	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI	U	GI	GI	GI	GI	GI	GI	GI	GI
PPO Copay Plans	PPO \$20 Copay	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI
	PPO \$30 Copay	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI
	PPO \$40 Copay	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI
PPO GenRx Plans	PPO \$25 Copay GenRx	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	PPO \$35 Copay GenRx	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	PPO \$45 Copay GenRx	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
Solution PPO Plans	Solution 2500 PPO	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	U	GI	U	GI	GI	GI
	Solution 3500 PPO	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	U	GI	U	GI	GI	GI
	Solution 5000 PPO	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	U	GI	U	GI	GI	GI
Lumenos HIA+ Plans	Lumenos HIA+ 750	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	U	U	GI	GI	U	U	U	GI	GI	GI
	Lumenos HIA+ 500	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	U	U	GI	GI	U	U	U	GI	GI	GI
Lumenos HSA 100/70 Plans	Lumenos HSA 2000 (100/70)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	Lumenos HSA 3000 (100/70)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	Lumenos HSA 5000 (100/70)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
Lumenos HSA 80/50 Plans	Lumenos HSA 1500 (80/50)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	Lumenos HSA 2500 (80/50)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
	Lumenos HSA 3500 (80/50)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	GI	GI	U	U	U	GI	GI	GI
Elements Hospital Plans	Elements Hospital Preferred		GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	GI	GI	GI
	Elements Hospital Plus	U		GI	GI	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	GI	GI	GI
	Elements Hospital	U	U		GI	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	GI	GI	GI
HMO Plans	High Deductible EPO	GI	GI	GI		U	U	U	U	U	U	U	GI	GI	U	U	GI	GI	U	GI	U	GI	GI	GI
	HMO \$10 100%	GI	GI	GI	GI		GI	GI	GI	GI	GI	GI	GI	GI	GI	U	GI	GI	U	GI	GI	GI	GI	GI
	HMO \$25 100%	GI	GI	GI	GI	U		GI	GI	GI	GI	GI	GI	GI	GI	U	GI	GI	U	GI	GI	GI	GI	GI
	Classic \$20 HMO	GI	GI	GI	GI	U	U		GI	GI	GI	GI	GI	GI	GI	U	GI	GI	U	U	U	GI	GI	GI
	Classic \$30 HMO	GI	GI	GI	GI	U	U	U		GI	GI	GI	GI	GI	GI	U	GI	GI	U	U	U	GI	GI	GI
	Classic \$40 HMO	GI	GI	GI	GI	U	U	U	U		GI	GI	GI	GI	GI	U	GI	GI	U	U	U	GI	GI	GI
	Saver \$20 HMO	GI	GI	GI	GI	U	U	U	U	U		GI	GI	GI	GI	U	GI	GI	U	U	U	GI	GI	GI
	Saver \$30 HMO	GI	GI	GI	GI	U	U	U	U	U	U		GI	GI	GI	U	GI	GI	U	U	U	GI	GI	GI
	Saver \$40 HMO	GI	GI	GI	GI	U	U	U	U	U	U	U		GI	GI	GI	U	GI	GI	U	U	U	GI	GI
	Select \$25 HMO	GI	GI	GI	GI	U	U	U	U	U	U	U	U		GI	U	GI	GI	U	U	U	GI	GI	GI
	Select \$35 HMO	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U		U	U	GI	GI	U	U	U	GI	GI
Additional Plans	Advantage 25 PPO	GI	GI	GI	GI	U	U	U	U	U	U	U	GI	GI		U	GI	GI	U	GI	GI	GI	GI	GI
	Lumenos 1500 (100/70)	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U		GI	GI	U	U	U	GI	GI	GI
	PPO HSA 2400	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U		GI	U	U	U	GI	GI	GI
	PPO HSA 3500	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	U		U	U	U	GI	GI	GI
	Lumenos HIA+ 3000	GI	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	U	U		U	U	U	GI	GI
	PHF 750	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	GI	U	U	GI	GI	U	U	GI	GI	GI
	PHF 500	GI	GI	GI	GI	U	U	GI	GI	GI	GI	GI	GI	GI	U	U	GI	GI	U	U	U	GI	GI	GI
	PPO Saver	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	GI	GI
	PPO Basic	GI	GI	GI	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	GI

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