

<b>Group/Class</b>	<b>911 (MAPE)</b>		
<b>Med.Suffix (01658-)</b>	<b>678</b>	<b>680</b>	<b>790</b>
<b>Medical</b>	<b>PPO-1</b>	<b>PPO-6</b>	<b>PPO-4</b>
<i>Coinsurance</i>	100%	90/10%	80/20%
<i>Deductible</i>	\$0	\$250/\$500	\$500/\$1,000
<i>Coinsurance Maximum</i>	\$0	\$1,000/\$2,000	\$1,500/\$3,000
<i>OV Copay</i>	\$20	\$10	\$10
<i>ER Copay</i>	\$50	\$50	\$100
<i>Chiropractor</i>	\$20	\$10	\$10
<b>Rx</b>	<b>Mandatory Generic</b>		
<i>Copay Structure</i>	\$10 / \$20	\$10 / \$20	\$2/\$25/\$50
<i>Mail Order Copay</i>	1x	1x	2x
<b>Dental</b>			
<i>Class I</i>	100%		
<i>Class II</i>	50%		
<i>Class III</i>	50%		
<i>Class IV</i>	Not Covered		
<i>Annual Max</i>	\$800		
<b>Vision</b>			
<i>Exam Frequency</i>	12 consecutive months		
<i>Materials Frequency</i>	12 consecutive months		
<i>Exam Copay</i>	\$5.00		
<i>Materials Copay</i>	\$10.00		