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Cart: 0 item(s)

## Get your insurance quote

### Insurance Type

- Medical
- Dental
- Term Life
- Short Term Disability
- Hospital Indemnity
- Accident
- Critical Illness

### Zip code

### Effective date



**Start**

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Cart: 0 item(s)

## Get your insurance quote

### Insurance Type

- Medical
- Dental
- Term Life
- Short Term Disa
- Hospital Indemn
- Accident
- Critical Illness

Zip Code:

Effective date: 07/14/2007

▼ You

#### Gender

Male ▼

#### Date of birth

Month Day Year  
Jan ▼

#### Smoker?

Yes  No

#### College Student?

Yes  No

▶ Spouse

▶ Children

Submit

Narrow Results

Medical

Dental

Term Life

Accident

Short Term Disability

Hospital Indemnity

▼ Monthly Cost

Minimum

Maximum

▼ Deductible

Minimum

Maximum

▼ Coinsurance

Minimum

Maximum

▼ Company

- Company 1
- Company 2
- Company 3
- Company 4

## Results

Sort by: Coinsurance ▾ Ascending ▾



[WiseEssentials Rx \\$1850](#)

**\$100/mo**

Plan Type: PPO

Deductible: \$1,850

Coinsurance: 25%

Copay: Deductible waived on first 6 visits, subject to 25%

Compare

Add to cart



[WiseChoices Prime \\$1500](#)

**\$200/mo**

Plan Type: PPO

Deductible: \$1,500

Coinsurance: 30%

Copay: \$30

Compare

Add to cart



[WiseEssentials Rx \\$3500](#)

**\$300/mo**

Plan Type: PPO

Deductible: \$3,500

Coinsurance: 25%

Copay: Deductible waived on first 6 visits, subject to 25%

Compare

Add to cart



[WiseEssentials Copay \\$7500](#)

**\$400/mo**

Plan Type: PPO

Deductible: \$7,500

Coinsurance: 25%

Copay: Deductible waived on first 3 visits, subject to 25%

Compare

Add to cart

Applicants [Edit](#)

▼ You

Gender: **Male**

Age: **29**

Smoker?: **No**

Student?: **No**

▶ Spouse

▶ Children

This will contain a summary of the items in your cart

▼ Narrow Results

Monthly Cost	Deductible	Coinsurance	Company	Copay	Plan type	Additional Coverages
Minimum \$ <input type="text"/>	Minimum \$ <input type="text"/>	Minimum \$ <input type="text"/>	<input type="checkbox"/> Company 1	<input type="checkbox"/> Covered after deductible	<input type="checkbox"/> PPO	<input type="checkbox"/> Dental optional
Maximum \$ <input type="text"/>	Maximum \$ <input type="text"/>	Maximum \$ <input type="text"/>	<input type="checkbox"/> Company 2	<input type="checkbox"/> Covered before deductible	<input type="checkbox"/> HMO	<input type="checkbox"/> Maternity included
			<input type="checkbox"/> Company 3		<input type="checkbox"/> POS	<input type="checkbox"/> Rx included
			<input type="checkbox"/> Company 4			

Apply

- Medical
- Dental
- Term Life
- Accident
- Short Term Disability
- Hospital Indemnity
- Critical Illness

Results

Sort by: Coinsurance Ascending



[WiseEssentials Rx \\$1850](#) **\$100/mo**

**Plan Type:** PPO  
**Deductible:** \$1,850  
**Coinsurance:** 25%  
**Copay:** Deductible waived on first 6 visits, subject to 25%

[Add to cart](#)



[WiseChoices Prime \\$1500](#) **\$200/mo**

**Plan Type:** PPO  
**Deductible:** \$1,500  
**Coinsurance:** 30%  
**Copay:** \$30

[Add to cart](#)



[WiseEssentials Rx \\$3500](#) **\$300/mo**

Applicants [Edit](#)

▼ You

Gender: **Male**  
 Age: **29**  
 Smoker?: **No**  
 Student?: **No**

▶ Spouse

▶ Children


## Product Comparison

[WiseEssentials  
Rx \\$1850](#)

[WiseChoices  
Prime \\$1500](#)

[WiseEssentials  
Rx \\$3500](#)

[WiseEssentials  
Copay \\$7500](#)

Provider				
Plan Type	PPO	PPO	PPO	PPO
Deductible	\$1,850	\$1,500	\$3,500	\$7,500
Coinsurance	25%	30%	25%	25%
Copay	Deductible waived on first 6 visits	\$30	Deductible waived on first 6 visits	Deductible waived on first 3 visits
Monthly Cost	\$100	\$200	\$300	\$400

Add to cart

Add to cart

Add to cart

Add to cart

Applicants [Edit](#)

▼ You

Gender: **Male**  
Age: **29**  
Smoker?: **No**  
Student?: **No**

▶ Spouse

▶ Children

Marketing placeholder

Marketing placeholder


Marketing placeholder

- Medical
- Dental
- Term Life
- Accident
- Short Term Disability
- Hospital Indemnity
- Critical Illness

## Results

Sort by: Coinsurance Ascending


### [WiseEssentials Rx \\$1850](#)

	<b>Plan Type</b> PPO	<b>Deductible</b> \$1,850	<b>Coinsurance</b> 25%	<b>Copay</b> Deductible waived on first 6 visits	<b>\$100/mo</b> <input type="button" value="Add to cart"/>
<input type="checkbox"/> Compare <a href="#">Product details</a>					


### [WiseChoices Prime \\$1500](#)

	<b>Plan Type</b> PPO	<b>Deductible</b> \$1,500	<b>Coinsurance</b> 30%	<b>Copay</b> \$30	<b>\$200/mo</b> <input type="button" value="Add to cart"/>
<input type="checkbox"/> Compare <a href="#">Product details</a>					


### [WiseEssentials Rx \\$3500](#)

	<b>Plan Type</b> PPO	<b>Deductible</b> \$3,500	<b>Coinsurance</b> 25%	<b>Copay</b> Deductible waived on first 6 visits, subject to 25%	<b>\$300/mo</b> <input type="button" value="Add to cart"/>
<input type="checkbox"/> Compare <a href="#">Product details</a>					

### [WiseEssentials Copay \\$7500](#)

	<b>Plan Type</b> PPO	<b>Deductible</b> \$7,500	<b>Coinsurance</b> 25%	<b>Copay</b> Deductible waived on first 3 visits	<b>\$400/mo</b> <input type="button" value="Add to cart"/>
<input type="checkbox"/> Compare <a href="#">Product details</a>					

### [WiseEssentials Rx \\$2500](#)

	<b>Plan Type</b> PPO	<b>Deductible</b> \$2,500	<b>Coinsurance</b> 25%	<b>Copay</b> Deductible waived on first 6 visits	<b>\$500/mo</b> <input type="button" value="Add to cart"/>
<input type="checkbox"/> Compare <a href="#">Product details</a>					

## Applicants [Edit](#)

### ▼ You

Gender: **Male**  
 Age: **29**  
 Smoker?: **No**  
 Student?: **No**

### ► Spouse

### ► Children

## Cart [Edit](#)

WiseEssentials Rx \$1850

[Remove](#)

Dental Plan \$50

[Remove](#)

USable Life Plan 5

[Remove](#)

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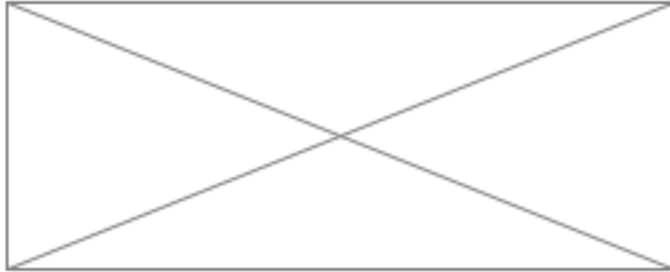
Resources

Agent



Cart: 0 item(s)

## WiseEssentials Rx \$1850



### Highlights

- \* 1st thing
- \* 2nd thing
- \* 3rd thing

**\$100 / month**

Add to Cart

## Details

### General

<b>Plan Type</b>	PPO
<b>Deductible</b>	\$1,850
<b>Coinsurance</b>	25%
<b>Office visit for primary doctor</b>	First 6 visits PCY: 25% Coinsurance, deductible waived Additional visits: 25% Coinsurance after deductible
<b>Office visit for specialist</b>	First 6 visits PCY: 25% Coinsurance, deductible waived Additional visits: 25% Coinsurance after deductible

[Show more details](#)

