

Group health products by state



Nationwide offers the plan options and flexibility that employers need to stay on top of their group health care costs, with the innovative and personalized health features employees want. With solutions for groups of 2 to 500 employees, Nationwide has options to fit the needs of any small to midsized business.

Self-funded

PPO plan options

See reverse for plan features and 51+ group size options.

¹ Only available in certain zip codes within Southern CA.

² Core Value Access with the PHCS Practitioner and Ancillary network is not available in the Dallas, Texas market.

³ Core Value Access with the Prime Health Physician Only Network is only available in the Dallas, Texas market.

⁴ Core Value Connect is available in Atlanta GA, Chicago IL, Columbus OH, Dallas TX, Houston TX, Miami/Ft.Lauderdale FL, and Portland OR.

Group health options

Funding and contract options

Dental

Total care solutions

⁵ Now available for groups with under 50 employees in the following states: Maryland, New Jersey, and West Virginia.

⁶ Available on XSRe underwritten groups only

⁷ Three dental plans are available: Dental with Aetna Dental Access® network, Dental with the Cigna® Dental PPO SA network, and Dental Choice (no network requirements). Three vision plans with VSP® Vision Care are available: Essential, Essential Plus, and Preferred.

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Core Value, Core Value Flex, Core Value Access and Core Value Connect plans with a 12-month Paid Basis Stop loss contract are required to make a determination of whether or not they choose to elect Allied's Administrative Services for the administrative run-out period, and terminal liability coverage if a terminal liability option was purchased, 30 days prior to the end of the contract period. If the employer does not elect Allied Administrative Services by such deadline, (1) existing, open balance billing negotiation services will end 10 days prior to the end of the contract period, and (2) all new balance billing negotiation cases will no longer be accepted starting 30 days prior to the end of the contract period; except when the employer re-issues Stop loss coverage with Us under a run-in Stop loss contract. If the employer elects Allied Administrative Services, (1) existing, open balance billing negotiation services will end 10 days prior to the end of the administrative run-out period, and (2) any new balance billing negotiation cases will no longer be accepted starting 30 days prior to the end of the administrative run-out period.

The Self-Funded Program through Nationwide provides tools for employers owning small to midsized businesses to establish a self-funded health benefit plan for their employees. The benefit plan is established by the employer and is not an insurance product. Stop loss insurance policies are underwritten by Nationwide Life and Benefits Insurance Company, Columbus OH, in AK, AR, AZ, CT, IL, MA, PA, TX, WI; Integon National Insurance Company in NY; and National Health Insurance Company in CO, WA and all other states where offered. Product availability and specific provisions may vary by state.

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