MyHealthMath®

Kermit TheFrog's Comparative Savings Estimate

Which plan could save you the most money next year?

Savings Comparison of Your Plan Options Based on the Projected Medical Use You Reported to an MHM Analyst on October 1, 2020



How did we calculate these estimated savings?

We compared the Total Cost for each plan option based on the projected medical use for you and your family members. The plan with the most savings and the lowest Total Cost is at the top.

MAXIMIZE YOUR SAVINGS

Under an HSA-eligible plan, you can save even more by making tax-free contributions to an HSA to help pay for qualified medical expenses.

If you enroll in the HSA 2700 (the top-ranked HSA-eligible plan on your report), consider contributing at least \$3,600 to an HSA for an additional \$972* in tax savings!

You can also generate tax savings if you contribute to a Flexible Spending Account (FSA) if your employer offers one. Learn more HERE.



WE'RE HERE TO HELP!

If you have question about this report, reach out to us at:

questions@myhealthmath.com

If you would like to make changes to your medical usage or dependents, please engage with MyHealthMath again:

myhealthmath.com/demo



JANUARY 1, 2021 PLAN OVERVIEW

| IN-NETWORK ONLY | HSA 2700 | HSA 3500 | HSA 5000 | PPO 550 |
|--|-------------------|--------------------|--------------------|-------------------|
| Deductible (individual / family) | \$2,700 / \$5,400 | \$3,500 / \$7,000 | \$5,000 / \$10,000 | \$500 / \$1,000 |
| Out-of-Pocket Limit (individual / family) | \$2,700 / \$5,400 | \$6,000 / \$12,000 | \$6,550 / \$13,100 | \$2,500 / \$5,000 |
| Coinsurance Rate | 0% | 20% | 20% | 20% |
| Need referral from PCP to see specialist? | no | no | no | no |
| Max Employer HRA Reimbursement | X | X | X | X |

FINANCIAL OVERVIEW

| IN-NETWORK ONLY | HSA 2700 | HSA 3500 | HSA 5000 | PPO 550 |
|-------------------------------------|----------|----------|----------|---------|
| Your Annual Premium | X | × | X | X |
| Your Out-of-Pocket Medical Expenses | X | X | × | × |
| Your Net Out-of-Pocket Costs | X | × | × | X |
| Your Total Cost | X | × | × | × |
| Worst Case Scenario | X | × | × | X |
| Your Employer HRA Reimbursement | X | × | × | X |
| Your Employer HSA Contribution | X | × | × | × |
| Your Personal HSA Contribution | X | × | × | × |
| Estimated HSA Tax Savings | X | × | × | X |

Note: If your employer offers an FSA, your contributions to an FSA when enrolled in a non-HSA eligible plan would also generate tax savings!

TOTAL COST:

 your premium + any net out of pocket amounts.
 Net out of pocket = out of pocket medical expenses - employer HRA or HSA contributions - any tax savings from your personal HSA contributions.

DEDUCTIBLE:

The amount you pay for covered health care services before your insurance plan starts to pay. After you have 'satisfied' the deductible, you usually pay either a copay or coinsurance for covered services.

COINSURANCE:

The percentage of costs of a covered service you pay, usually after your deductible is met.

WORST CASE SCENARIO:

This represents the maximum you would have to pay for in-network medical services under each plan should you have unexpected medical expenses like an emergency, accident or unexpected medical condition.

We add your premium to the out of pocket limit minus any HRA or HSA contributions.

OUT OF POCKET LIMIT:

This is the most you have to pay for covered services in a plan year.

After you spend this amount on deductibles, copays, and coinsurance, the plan pays 100% of the cost for covered services.

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Assumptions - This comparative savings estimate is based on the utilization you provided to MyHealthMath. We applied these costs to all of the plans that your employer is offering for the upcoming plan year. This comparison is based on the following key assumptions: 1) All services in the upcoming plan year will be with in-network providers; 2) All services will start and end in the same coverage period; 3) Some of the insurance plans available to you for next year may have a limited number of visits for copays, after which coinsurance applies (which could increase your cost); 4) Prescription drug tiers are determined by the drug formulary provided by the employer.

Disclaimer - This report includes general information and calculations regarding medical and pharmaceutical charges based on reported usage and is intended to provide assistance with decisions about health insurance plan choices for the upcoming plan year. Consider that your medical and pharmaceutical needs in the upcoming plan year could differ from your reported usage. This report is for informational purposes only and may not reflect all of the pricing factors and variables for all circumstances in the coming year. This report and any accompanying information or materials, written or verbal, are not intended, and must not be taken as professional advice or recommendations. Professional advice on specific insurance and benefits can be obtained by contacting a duly licensed professional. While the figures and analyses of plans to be offered herein are believed to be accurate, the medical and pharmaceutical costs in the upcoming year may vary dramatically from historical costs, so they are not warranted to be correct, and MyHealthMath, Inc. disclaims any and all warranties of any type and shall have no liability for any inaccuracy or incompleteness.