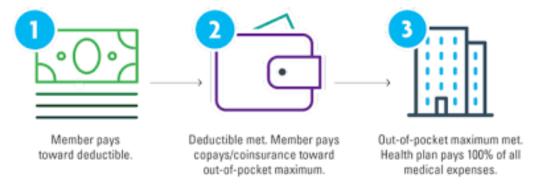


Health Insurance Payments Tracking Tool

Keeping track of how much money you spend on your health insurance costs is an important part of having health insurance. Since insurance companies cover so many people, it's possible for data errors to happen. To make sure your health insurance company covers your healthcare costs accurately, keeping track of how much you pay into your plan annually ensures you're not overpaying for your healthcare.

Key Terms: Summary of Benefits and Coverage; Copay; Deductible; Coinsurance; Out-of-Pocket Maximum; Premium.



Summary of Benefits and Coverage (SBCs): A detailed list of the costs for medical events and medications shared by health insurance companies and insured people. Companies must provide SBCs to people before they enroll in health insurance plans.

Copay: A flat cost for seeing doctors or getting medications. The insured person pays the cost of the copay, and the health insurance company covers the rest of the cost of the visit, test, or medication. Many health insurance companies will offer copays for services and medications before insured people meet their deductibles, but not all.

Deductible: The money a person must contribute into their health insurance plan before the plan starts helping insured people pay for doctors' visits, tests, procedures, or medications.

Coinsurance: Like a copay, but a percentage split between the health insurance company and the insured person. If an insurance company contracts with an insured person for 15% coinsurance for a visit, procedure, or medication, then the insured person pays 20% of that visit, procedure, or medication, and the insurance company pays 80%. Some coinsurance costs are available to insured people before they meet their deductibles; others are not. Details will be in SBCs.

Out-of-Pocket Maximum: The cap, or limit, on the amount of money insured people will pay for covered services per plan year before the health insurance company covers 100% of the cost of services. This maximum is the health insurance benefit that prevents people from going into major medical debt even if they need a very expensive medical procedure. Some surgeries can cost over a million dollars!

Premium: The monthly cost of a health insurance plan. This cost is separate from all others, so it does not contribute to deductibles or out-of-pocket maximums at all. Insured people must pay this cost to have access to their health insurance plan.

Example:

Say a person has a sore throat and wants to go to the doctor. They go to their provider directory and pick a primary care doctor who's in their health insurance company's network of covered doctors and make an appointment. The visit costs \$200, and their primary care copay is \$10. The doctor wants to take a strep test, which is a laboratory test that costs \$300. The patient's deductible is \$500, and their coinsurance for lab tests is only applicable after they meet their deductible. The doctor also wants to rule out pneumonia, so she orders a chest x-ray that costs \$1000. The patient's coinsurance for imaging is applicable before they meet their deductible and is 15%. The doctor prescribes the patient a medication that costs \$100, and the patient has a \$10 copay for that medication.

	Patient Pays	Insurance Pays
Doctor's Visit	\$10	\$190
Lab Test	\$300	\$0
X-ray	\$150	\$850
Medication	\$10	\$90
Total	\$170 in copays/coinsurance	\$1130
	\$300 towards deductible	

If the patient's out-of-pocket maximum is \$1200, they contributed \$470 towards that out-of-pocket maximum, so the most they will pay for the healthcare costs (aside from their monthly premium) for the rest of the year is \$730 (as long as they continue seeing doctors who are in their health insurance company's network of covered doctors).

** Coinsurance and copays do count towards out-of-pocket maximums, but they do not count towards deductibles.

The table on the following page is a tool to help you track our healthcare costs and know where you stand in relation to your annual deductible and out-of-pocket maximum.

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Plan Deductible:

Plan Out-of-Pocket Maximum:

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Data	Visit or Madigation	Cost Type (Copay,	Amount Paid		
Date	Visit or Medication	Coinsurance, or Deductible)	Amount Paid		
			1		

	Cost Type (Copay,				
Date	Visit or Medication	Coinsurance, or Deductible)	Amount Paid		