

Comparison of 90% and 100% Plans

Premium Savings vs. Potential Additional Costs for in-network deductible and percent copays

	A	B	C=B-A	D	E	F=D+E	G=F-C
	<u>90% Plan</u>	<u>100% Plan</u>	<u>Additional Premium 100% Plan</u>	<b>Additional expenses 90% Plan</b>			<b>+Risk/-Savings 90% Plan</b>
				<u>Maximum In-network Deductible*</u>	<u>Maximum In-network Percent Copays</u>	<u>Total</u>	
Single	4,828	5,796	<b>968</b>	250	1,000	<b>1,250</b>	282
Double	10,631	13,040	<b>2,409</b>	500	2,000	<b>2,500</b>	91
Family	12,932	16,228	<b>3,296</b>	500	2,000	<b>2,500</b>	-796

**Please note!**

**The numbers above do not include all additional costs associated with the 90% Plan.**

**Other potential additional costs with 90% Plan include**

Office visit & urgent care visit copays = \$20 vs \$10

Non-formulary brand drug copay = \$40 vs \$30

Out-of-net deductible = \$1,000/\$2,000 vs \$500/\$1,000 (individual/family)

Out-of-network percent copays after deductible is met = 30% vs 20%

Note that out-of-network percent copay annual maximums are the same for both plans = \$2,000/\$4,000

Maternity delivery and nursery care - deductible and % copay as shown above, applies with 90% plan.

\*After 75% in-network deductible reimbursement