

SUPERMED PLUS HSA 2500/100	SUPERMED PLUS HSA 3000/100	SUPERMED PLUS HSA 4000/100	SUPERMED PLUS HSA 5000/100	HMO HEALTH OHIO***
<b>Network:</b> \$2,500 single \$5,000 family <b>Non-network:</b> \$3,000 single \$6,000 family	<b>Network:</b> \$3,000 single \$6,000 family <b>Non-network:</b> \$3,500 single \$7,000 family	<b>Network:</b> \$4,000 single \$8,000 family <b>Non-network:</b> \$4,500 single \$9,000 family	<b>Network:</b> \$5,000 single \$10,000 family <b>Non-network:</b> \$5,500 single \$11,000 family	None
<b>Network:</b> 100% <b>Non-network:</b> 60%				None
<b>Network:</b> None <b>Non-Network:</b> \$4,500 single \$9,000 family	<b>Network:</b> None <b>Non-Network:</b> \$4,000 single \$8,000 family	<b>Network:</b> None <b>Non-Network:</b> \$3,000 single \$6,000 family	<b>Network:</b> None <b>Non-Network:</b> Unlimited	None
100% after deductible				100% after \$15 copayment
100% after deductible				100%
100%				100% after \$15 copayment
100% after deductible				100% after \$100 deductible per admission
100% after deductible				100% after \$100 deductible per admission
100% after deductible				100% after \$75 copayment (copayment waived if admitted)
Network: 100% after deductible (Maximum 30 days/benefit period)				100% after \$100 deductible per admission
Network: 100% after deductible (Maximum 20 visits per benefit period)				100% after \$15 copayment (Maximum 20 visits per benefit period)
RX treated like other medical expenses				Several RX options available

# SMART PICKS

How to use the COSE Health Plan Comparison Chart to help you and your employees select the right plan(s).

## What did you like and dislike about your plan(s) over the past 12 months?

Consider network doctors and hospitals, copays, out-of-pocket maximums, deductibles, flexibility and service.

## Do employees utilize network, non-network or a combination of both providers?

If network, consider any of the SuperMed Plus plans. If non-network, consider the SuperMed Classic Gold and SuperMed Plus 250, 500, 750, 1000 and 2000/4000 plans. If combination, consider the SuperMed Plus 250, 500, 750, 1000 and 2000/40000 plans.

## Would your employees rather pay a fixed cost for doctor's visits in the form of a copay, or would they rather pay a discounted rate on actual services performed?

If copays, consider the SuperMed Plus Multiple Options Plans; SuperMed Plus 250, 500, 750 and 1000; SuperMed Plus 2080 plans; or SuperMed Plus 1000, 2000 and 3000. If discounted rate, consider the HSA 1500, 2500, 3000, 4000 and 5000.

## Do you opt for holistic or alternative care solutions?

If so, consider SuperMed Plus HSA 1500, 2500, 3000, 4000 or 5000.

**IF OFFERING MULTIPLE SUPERMED PLUS PLAN DESIGNS, THIS CHART CAN HELP YOUR EMPLOYEES CHOOSE THE APPROPRIATE PLAN BASED ON TOTAL COST. THE COLUMN WITH THE LOWEST AMOUNT IS THE BEST OPTION.**

PLAN DESCRIPTION	OPTION 1	OPTION 2
A. Annual deductible		
B. Total out-of-pocket costs (excluding deductible)		
C. Estimated annual copays for prescriptions and/or doctor office visits		
D. Add the deductible, total out-of-pocket costs and copay costs (A+B+C)		
E. Employer contribution to out-of-pocket expenses, (i.e. Health Savings Account (HSA)) if applicable		
F. Total estimated medical out-of-pocket expenses (D-E)		
G. Premium contribution (amount withdrawn per paycheck times the number of paychecks per year)		
H. Total estimated health care expenditures per year (F+G) (Compare the cost difference between option 1 and option 2)		