

## Medical Plan Comparison Examples

The examples below are from the Summary of Benefits and Coverages (SBCs). For more details on each plan, including deductibles, out of pocket max, co-insurance and others, please review the SBCs on the Employee Benefits Website (<https://www.columbuslibrary.org/employee-benefits/>).

### Example 1:

PPO		HDHP/HSA		MEC/HSA	
<b>Peg is Having a Baby</b> (9 months of in-network pre-natal care and a hospital delivery)		<b>Peg is Having a Baby</b> (9 months of in-network pre-natal care and a hospital delivery)		<b>Peg is Having a Baby</b> (9 months of in-network pre-natal care and a hospital delivery)	
■ The plan's overall deductible	\$750	■ The plan's overall deductible	\$1,750	■ The plan's overall deductible	\$5,000
■ Specialist copay	\$25	■ Specialist copay	\$15	■ Specialist coinsurance	25%
■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	25%
■ Other coinsurance	20%	■ Other coinsurance	20%	■ Other coinsurance	25%
This EXAMPLE event includes services like: Specialist office visits (pre-natal care) Childbirth/Delivery Professional Services Childbirth/Delivery Facility Services Diagnostic tests (ultrasounds and blood work) Specialist visit (anesthesia)		This EXAMPLE event includes services like: Specialist office visits (pre-natal care) Childbirth/Delivery Professional Services Childbirth/Delivery Facility Services Diagnostic tests (ultrasounds and blood work) Specialist visit (anesthesia)		This EXAMPLE event includes services like: Specialist office visits (pre-natal care) Childbirth/Delivery Professional Services Childbirth/Delivery Facility Services Diagnostic tests (ultrasounds and blood work) Specialist visit (anesthesia)	
<b>Total Example Cost</b>	<b>\$12,700</b>	<b>Total Example Cost</b>	<b>\$12,700</b>	<b>Total Example Cost</b>	<b>\$12,700</b>
In this example, Peg would pay:		In this example, Peg would pay:		In this example, Peg would pay:	
<i>Cost Sharing</i>		<i>Cost Sharing</i>		<i>Cost Sharing</i>	
Deductibles	\$750	Deductibles	\$1,750	Deductibles	\$5,000
Copayments	\$0	Copayments	\$0	Copayments	\$0
Coinsurance	\$1,800	Coinsurance	\$1,900	Coinsurance	\$1,900
<i>What isn't covered</i>		<i>What isn't covered</i>		<i>What isn't covered</i>	
Limits or exclusions	\$60	Limits or exclusions	\$60	Limits or exclusions	\$60
<b>The total Peg would pay is</b>	<b>\$2,610</b>	<b>The total Peg would pay is</b>	<b>\$3,710</b>	<b>The total Peg would pay is</b>	<b>\$6,960</b>

**Example 2:**

PPO		HDHP/HSA		MEC/HSA	
<b>Mia's Simple Fracture</b> (in-network emergency room visit and follow up care)		<b>Mia's Simple Fracture</b> (in-network emergency room visit and follow up care)		<b>Mia's Simple Fracture</b> (in-network emergency room visit and follow up care)	
■ The plan's overall deductible	\$750	■ The plan's overall deductible	\$1,750	■ The plan's overall deductible	\$5,000
■ Specialist copay	\$25	■ Specialist copay	\$15	■ Specialist coinsurance	25%
■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	25%
■ Other coinsurance	20%	■ Other coinsurance	20%	■ Other coinsurance	25%
This EXAMPLE event includes services like: <u>Emergency room care</u> (including medical supplies) <u>Diagnostic test</u> (x-ray) <u>Durable medical equipment</u> (crutches) <u>Rehabilitation services</u> (physical therapy)		This EXAMPLE event includes services like: <u>Emergency room care</u> (including medical supplies) <u>Diagnostic test</u> (x-ray) <u>Durable medical equipment</u> (crutches) <u>Rehabilitation services</u> (physical therapy)		This EXAMPLE event includes services like: <u>Emergency room care</u> (including medical supplies) <u>Diagnostic test</u> (x-ray) <u>Durable medical equipment</u> (crutches) <u>Rehabilitation services</u> (physical therapy)	
<b>Total Example Cost</b>	<b>\$2,800</b>	<b>Total Example Cost</b>	<b>\$2,800</b>	<b>Total Example Cost</b>	<b>\$2,800</b>
In this example, Mia would pay:		In this example, Mia would pay:		In this example, Mia would pay:	
<i>Cost Sharing</i>		<i>Cost Sharing</i>		<i>Cost Sharing</i>	
Deductibles	\$750	Deductibles	\$1,000	Deductibles	\$2,800
Copayments	\$300	Copayments	\$200	Copayments	\$0
Coinsurance	\$100	Coinsurance	\$0	Coinsurance	\$0
<i>What isn't covered</i>		<i>What isn't covered</i>		<i>What isn't covered</i>	
Limits or exclusions	\$0	Limits or exclusions	\$0	Limits or exclusions	\$0
<b>The total Mia would pay is</b>	<b>\$1,150</b>	<b>The total Mia would pay is</b>	<b>\$1,200</b>	<b>The total Mia would pay is</b>	<b>\$2,800</b>

**Example 3:**

PPO		HDHP/HSA		MEC/HSA	
<b>Managing Joe's type 2 Diabetes</b> (a year of routine in-network care of a well-controlled condition)		<b>Managing Joe's type 2 Diabetes</b> (a year of routine in-network care of a well-controlled condition)		<b>Managing Joe's type 2 Diabetes</b> (a year of routine in-network care of a well-controlled condition)	
■ The plan's overall deductible	\$750	■ The plan's overall deductible	\$1,750	■ The plan's overall deductible	\$5,000
■ Specialist copay	\$25	■ Specialist copay	\$15	■ Specialist coinsurance	25%
■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	20%	■ Hospital (facility) coinsurance	25%
■ Other coinsurance	20%	■ Other coinsurance	20%	■ Other coinsurance	25%
This EXAMPLE event includes services like: <u>Primary care physician</u> office visits (including disease education) <u>Diagnostic tests</u> (blood work) <u>Prescription drugs</u> <u>Durable medical equipment</u> (glucose meter)		This EXAMPLE event includes services like: <u>Primary care physician</u> office visits (including disease education) <u>Diagnostic tests</u> (blood work) <u>Prescription drugs</u> <u>Durable medical equipment</u> (glucose meter)		This EXAMPLE event includes services like: <u>Primary care physician</u> office visits (including disease education) <u>Diagnostic tests</u> (blood work) <u>Prescription drugs</u> <u>Durable medical equipment</u> (glucose meter)	
<b>Total Example Cost</b>	<b>\$5,600</b>	<b>Total Example Cost</b>	<b>\$5,600</b>	<b>Total Example Cost</b>	<b>\$5,600</b>
In this example, Joe would pay:		In this example, Joe would pay:		In this example, Joe would pay:	
<i>Cost Sharing</i>		<i>Cost Sharing</i>		<i>Cost Sharing</i>	
Deductibles	\$150	Deductibles	\$300	Deductibles	\$1,700
Copayments	\$1,000	Copayments	\$70	Copayments	\$0
Coinsurance	\$20	Coinsurance	\$1,100	Coinsurance	\$0
<i>What isn't covered</i>		<i>What isn't covered</i>		<i>What isn't covered</i>	
Limits or exclusions	\$0	Limits or exclusions	\$30	Limits or exclusions	\$0
<b>The total Joe would pay is</b>	<b>\$1,170</b>	<b>The total Joe would pay is</b>	<b>\$1,500</b>	<b>The total Joe would pay is</b>	<b>\$1,500</b>

### How does the MEC medical plan works:

#### Peg has her Age/Gender Preventive Screenings

(in-network primary care visit)

#### This EXAMPLE event includes services like:

Primary Care office visits (preventive care)  
Diagnostic tests (mammogram, lab and blood work)  
Prescription drugs

#### In this example, Peg would pay?

Cost Sharing	
Deductibles	\$0
Copayments	\$0
Coinsurance	\$0

**The total Peg would pay is \$0**

#### Joe has Strep Throat

(in-network convenience care visit)

#### This EXAMPLE event includes services like:

Convenience Care Clinic (nurse evaluation)  
Diagnostic tests (strep test)  
Prescription drugs

#### In this example, Joe would pay?

Cost Sharing	
Deductibles	\$109
Copayments	\$0
Coinsurance	\$0

**The total Joe would pay is \$109**

#### Mia has a Leg Fracture

(in-network emergency room visit and follow up care)

#### This EXAMPLE event includes services like:

Emergency room care (including medical supplies)  
Diagnostic test (x-ray)  
Durable medical equipment (crutches)  
Outpatient Surgery  
Rehabilitation services (physical therapy)

#### In this example, Mia would pay?

Cost Sharing	
Deductibles	\$5,000
Copayments	\$0
Coinsurance	\$675

**The total Mia would pay is \$5,675**