

## OPTION 1 EMPLOYEE HEALTH PLAN DESIGN ANALYSIS CLAIMS INCURRED 01/01/13 - 12/31/13 - PAID AS OF 02/14/2014

## **CURRENT PLAN DESIGN - PREVENTIVE 100%**

OPEN ACCESS AND IN-NETWORK	INDIVIDUAL	FAMILY	
DEDUCTIBLE	\$1,000	\$3,000	
COINSURANCE %	20%	20%	
COINSURANCE MAXIMUM	\$1,500	\$4,500	
TOTAL ACTUAL PAID IN-NETWORK			\$4,243,160.50
OUT OF NETWORK	<b>#</b> F 000	<b>0.15.000</b>	
DEDLICTIBLE	\$5,000	\$15,000	

DEDUCTIBLE \$5,000 \$15,000 COINSURANCE % 50% \$5,000 \$15,000 \$15,000

TOTAL ACTUAL PAID OON \$87,283.71

PHARMACY \$526,582.99

TOTAL PAID CURRENT PLAN DESIGN \$4,857,027.20

## PROPOSED PLAN DESIGN - PREVENTIVE 100%

OPEN ACCESS AND IN-NETWORK	INDIVIDUAL	FAMILY	
DEDUCTIBLE	\$1,500	\$4,500	
COINSURANCE %	20%	20%	
COINSURANCE MAXIMUM	\$2,000	\$6,000	
CONTINUE WITH CARRY-OVER DEDUCTIBLE?	X	X if YES, blank if	NO
CONTINUE WITH OFFICE VISIT COPAY?	X	X if YES, blank if	NO
OFFICE VISIT COPAY - GENERAL	\$30		
OFFICE VISIT COPAY - SPECIALIST	\$40		
MAXIMUM OUT OF POCKET	\$6,350	\$12,700	

PHARMACY BENEFITS - KEEP SAME BENEFITS

ESTIMATED PAID IN-NETWORK \$4,071,302.27

 OUT OF NETWORK
 \$5,000
 \$15,000

 COINSURANCE %
 50%
 50%

 TOTAL
 COINSURANCE MAXIMUM
 \$5,000
 \$15,000

ESTIMATED PAID OON \$88,660.93

PHARMACY \$526,582.99

TOTAL ESTIMATED PAID PROPOSED PLAN DESIGN \$4,686,546.18

DECREASED COST (\$170,481.02)

ESTIMATED PERCENT SAVINGS 3.5%