

This illustration is intended to show how a sample set of medical claims would be paid under a non-HSA and an HSA Plan. Please refer to the complete Summary Plan Description for a full disclosure of plan benefits.

	Member Out of Pocket (OOP)					
	Billed Amount	Co-Payment	Deductible	Co-Insurance	Plan Pays	Member Pays
<b>80% J \$30</b>						
Office visit - prevention*	\$150	n/a	n/a	n/a	\$150	\$0
Office visit - illness*	\$100	\$30	n/a	n/a	\$70	\$30
Lab work - illness*	\$300	n/a	\$300	\$0	\$0	\$300
Office visit - illness*	\$100	\$30	n/a	n/a	\$70	\$30
Diagnostic Imaging - illness	\$800	n/a	\$450	\$70	\$280	\$520
ER visit - no admission	\$3,000	\$100	met above	\$580	\$2,320	\$680
In-patient hospitalization	\$30,000	n/a	met above	\$1,440	\$28,560	\$1,440
Office visit - illness*	\$100	n/a	met above	met above	\$100	\$0
<b>Total</b>	<b>\$34,550</b>	<b>\$160</b>	<b>\$750</b>	<b>\$2,090</b>	<b>\$31,550</b>	<b>\$3,000</b>

<b>80% M \$40</b>						
Office visit - prevention*	\$150	n/a	n/a	n/a	\$150	\$0
Office visit - illness*	\$100	\$40	n/a	n/a	\$60	\$40
Lab work - illness*	\$300	n/a	\$300	\$0	\$0	\$300
Office visit - illness*	\$100	\$40	n/a	n/a	\$60	\$40
Diagnostic Imaging - illness	\$800	n/a	\$800	n/a	\$0	\$800
ER visit - no admission	\$3,000	\$100	\$1,900	\$200	\$800	\$2,200
In-patient hospitalization	\$30,000	n/a	met above	\$620	\$29,380	\$620
Office visit - illness*	\$100	n/a	met above	met above	\$100	\$0
<b>Total</b>	<b>\$34,550</b>	<b>\$180</b>	<b>\$3,000</b>	<b>\$820</b>	<b>\$30,550</b>	<b>\$4,000</b>

	Member Out of Pocket (OOP)					
	Billed Amount	Co-Payment	Deductible	Co-Insurance	Plan Pays	Member Pays
<b>HSA 5000</b>						
Office visit - prevention*	\$150	n/a	n/a	n/a	\$150	\$0
Office visit - illness^	\$100	n/a	\$100	\$0	\$0	\$100
Lab work - illness^	\$300	n/a	\$300	\$0	\$0	\$300
Office visit - illness^	\$100	n/a	\$100	\$0	\$0	\$100
Diagnostic Imaging - illness	\$800	n/a	\$800	\$0	\$0	\$800
ER visit - no admission	\$3,000	\$100	\$2,900	\$0	\$0	\$3,000
In-patient hospitalization	\$30,000	n/a	\$800	\$1,250	\$27,950	\$2,050
Office visit - illness^	\$100	n/a	met above	met above	\$100	\$0
<b>Total</b>	<b>\$34,550</b>	<b>\$100</b>	<b>\$5,000</b>	<b>\$1,250</b>	<b>\$28,200</b>	<b>\$6,350</b>

<b>MEC 9000</b>						
Office visit - prevention*	\$150	n/a	n/a	n/a	\$150	\$0
Office visit - illness^	\$100	n/a	\$100	\$0	\$0	\$100
Lab work - illness^	\$300	n/a	\$300	\$0	\$0	\$300
Office visit - illness^	\$100	n/a	\$100	\$0	\$0	\$100
Diagnostic Imaging - illness	\$800	n/a	\$800	\$0	\$0	\$800
ER visit - no admission	\$3,000	\$100	\$2,900	\$0	\$0	\$3,000
In-patient hospitalization	\$30,000	n/a	\$4,700	\$0	\$25,300	\$4,700
Office visit - illness^	\$100	n/a	met above	met above	\$100	\$0
<b>Total</b>	<b>\$34,550</b>	<b>\$100</b>	<b>\$8,900</b>	<b>\$0</b>	<b>\$25,550</b>	<b>\$9,000</b>

\*Service available at the Butte Schools Health and Wellness Center for \$0 copayment, deductible or coinsurance.

^Service available at the Butte Schools Health and Wellness Center for \$25 copayment, \$0 deductible, \$0 coinsurance.