



COMPARISON OF SELECTED TRITERM MEDICAL PLANS AVAILABLE IN FLORIDA SHOWING PREMIUMS FOR DIFFERENT AGES

BASED ON CRITERIA

NON-SMOKER, LOWEST AVAILABLE DEDUCTIBLE, LOWEST COINSURANCE, AND LOWEST COINSURANCE OUT-OF-POCKET MAXIMUM

PLANS SELECTED ARE

PLAN 100 MAX: Deductible \$5,000, Coinsurance 100/0, Coinsurance Out-of-Pocket \$0

COPAY SELECT MAX: Deductible \$2,500, Coinsurance 70/30, Coinsurance Out-of-Pocket Maximum \$4,500

PLAN 80 MAX: Deductible \$2,500, Coinsurance 80/20, Coinsurance Out-of-Pocket Maximum \$2,000

All plans have Prescription Drugs coverage to suit levels of expected use

This plan has best value if \$5,000 deductible is OK for \$0 coinsurance out-of-pocket cost. .

This plan makes best value due to low deductible of \$2,500, low coinsurance 20%, and \$2,000 out-of-pocket maximum.

This plans has \$2,500 deductible, 30% coinsurance, and \$4,500 coinsurance Out-of-Pocket maximum.

Age	Plan 100 Max (Golden Rule Insurance Company)	Copay Select Max (Golden Rule Insurance Company)	Plan 80 Max (Golden Rule Insurance Company)
AGE 19	Plan 100 Max Golden Rule Insurance Company \$236.96	Copay Select Max Golden Rule Insurance Company \$253.96	Plan 80 Max Golden Rule Insurance Company \$264.16
AGE 24	Plan 100 Max Golden Rule Insurance Company \$217.51	Copay Select Max Golden Rule Insurance Company \$233.12	Plan 80 Max Golden Rule Insurance Company \$242.48
AGE 29	Plan 100 Max Golden Rule Insurance Company \$217.68	Copay Select Max Golden Rule Insurance Company \$233.30	Plan 80 Max Golden Rule Insurance Company \$242.67
AGE 34	Plan 100 Max Golden Rule Insurance Company \$237.47	Copay Select Max Golden Rule Insurance Company \$254.50	Plan 80 Max Golden Rule Insurance Company \$264.72

AGE 39

Plan 100 Max
Golden Rule Insurance Company
\$276.86

Copay Select Max
Golden Rule Insurance Company
\$296.72

Plan 80 Max
Golden Rule Insurance Company
\$308.64

AGE 44

Plan 100 Max
Golden Rule Insurance Company
\$335.89

Copay Select Max
Golden Rule Insurance Company
\$359.99

Plan 80 Max
Golden Rule Insurance Company
\$374.44

AGE 49

Plan 100 Max
Golden Rule Insurance Company
\$414.55

Copay Select Max
Golden Rule Insurance Company
\$444.29

Plan 80 Max
Golden Rule Insurance Company
\$462.13

AGE 54

Plan 100 Max
Golden Rule Insurance Company
\$512.83

Copay Select Max
Golden Rule Insurance Company
\$549.61

Plan 80 Max
Golden Rule Insurance Company
\$571.68

AGE 59

Plan 100 Max
Golden Rule Insurance Company
\$630.72

Copay Select Max
Golden Rule Insurance Company
\$675.96

Plan 80 Max
Golden Rule Insurance Company
\$703.10

AGE 63

Plan 100 Max
Golden Rule Insurance Company
\$739.16

Copay Select Max
Golden Rule Insurance Company
\$792.18

Plan 80 Max
Golden Rule Insurance Company
\$823.99

PLAN BENEFITS

After \$5,000 of deductible, there is 0% coinsurance, and \$0 Out-of-Pocket. Insurance picks up 100%.

	Plan 100 Max Golden Rule Insurance Company	Copay Select Max Golden Rule Insurance Company	Plan 80 Max Golden Rule Insurance Company
Deductible	\$5,000	\$2,500	\$2,500
Coinsurance	100/0	70/30	80/20
Coinsurance Out-of-Pocket Maximum	\$0	\$4,500	\$2,000
Benefits, Reductions, Exclusions, and Limitations	_Brochure: Plan Benefits, Exclusions, and Limitations	_Brochure: Plan Benefits, Exclusions, and Limitations	_Brochure: Plan Benefits, Exclusions, and Limitations

After \$2,500 deductible + \$15,000 of cleared bills, insurance picks up 100%.

After \$2,500 deductible + \$10,000 of cleared bills, insurance picks up 100%

Deductible is maximum of twice for the family

Note the max limit of coverage of \$2.0M per person over 3 years.

Standard Benefits			
Deductible	Per person, per term, maximum of 2 per family	Per person, per term, maximum of 2 per family	Per person, per term, maximum of 2 per family
Plan Coverage	3 terms equal to 1 day less than 3 years	3 terms equal to 1 day less than 3 years	3 terms equal to 1 day less than 3 years
Underwriter	Golden Rule Insurance Company	Golden Rule Insurance Company	Golden Rule Insurance Company
Lifetime Maximum	\$2 million per covered person, over 3 terms	\$2 million per covered person, over 3 terms	\$2 million per covered person, over 3 terms

Standard Benefits			
Deductible	Per person, per term, maximum of 2 per family	Per person, per term, maximum of 2 per family	Per person, per term, maximum of 2 per family
Plan Coverage	3 terms equal to 1 day less than 3 years	3 terms equal to 1 day less than 3 years	3 terms equal to 1 day less than 3 years
Underwriter	Golden Rule Insurance Company	Golden Rule Insurance Company	Golden Rule Insurance Company
Lifetime Maximum	\$2 million per covered person, over 3 terms	\$2 million per covered person, over 3 terms	\$2 million per covered person, over 3 terms

Physician Care Benefits (Illness & Injury)			
Doctor Office Visit, History and Exam only (no primary care physician/specialist referral required)	You pay: 0% after deductible	You pay: \$50 copay for first 4 visits per person, per term (Subsequent visits subject to deductible and 30% coinsurance; copays are for injury and illness and cannot be used for preventive services.)	You pay: 20% after deductible
Preventive Care Benefits	You pay: 0% after deductible (\$200 max per person, per term, after 6-month waiting period for term 1 only)	You pay: \$50 copay (\$200 max per person, per term, after 6-month waiting period for term 1 only)	You pay: 20% after deductible (\$200 max per person, per term, after 6-month waiting period for term 1 only)

Prescription Drug Benefits			
Prescription Drugs	You pay: 0% after deductible Plus, using our Preferred Price Card you pay for prescriptions at the point of sale, at the lowest price available, (\$5,000 outpatient Rx covered expense per term max, per person)	Tier 1 - \$25 copay Tier 2, 3, 4 - combined \$500 deductible per person, per term, then: Tier 2 - \$55 copay Tier 3 - \$75 copay Tier 4 - 50% coinsurance (\$5,000 max benefit per person, per term)	You pay: 20% after deductible Plus, using our Preferred Price Card you pay for prescriptions at the point of sale, at the lowest price available, (\$5,000 outpatient Rx covered expense per term max, per person)
Outpatient Expense Benefits			
Urgent Care Copay	You pay: 0% after deductible	\$75 copay - no deductible	You pay: 20% after deductible
Emergency Room Fees - Illness	You pay: 0% after deductible (additional \$500 deductible if not admitted)	You pay: 30% after deductible (additional \$500 deductible if not admitted)	You pay: 20% after deductible (additional \$500 deductible if not admitted)
Emergency Room Fees - Injury	You pay: 0% after deductible	You pay: 30% after deductible	You pay: 20% after deductible
Inpatient Expense Benefits			
Room and Board, Intensive Care Unit, Operating Room, Recovery Room, Prescription Drugs, Physician Visit, & Professional Fees of Doctors, Surgeons, Nurses	You pay: 0% after deductible	You pay: 30% after deductible	You pay: 20% after deductible
Additional Information			
Application Fee	\$40 (one-time, non-refundable)	\$40 (one-time, non-refundable)	\$40 (one-time, non-refundable)
Additional Benefits			
Supplemental Accident Benefit	None (\$0.00)	None (\$0.00)	None (\$0.00)

This plan has dual payment structure for prescription drugs

This plan has copay structure for prescription drugs.

This plan has dual payment structure for prescription drugs

Information Taken from UnitedHealthOne site: <https://www.uhone.com> for TriTerm Medical plans in Florida