

How to reduce my risk of financial responsibility?

Low deductible, low coinsurance percentage, and low coinsurance Out-of-Pocket Maximum reduces the financial responsibility costs. TriTerm plans have as low as \$2,500 deductible, and as low as 0.00% for coinsurance percentage, and thus \$0.00 for coinsurance Out-of-Pocket Maximum costs corresponding with \$5,000 deductible.

Typically, deductibles for ACA plans, silver level, have deductible in range of \$5,500 to \$6,700 and coinsurance percentage of 20% to 30% with premiums cost about double to triple the TriTerm cost. The highest risks on medical bills are through hospitalization, maybe injury or sickness.

The tacit test of knowing financial responsibility of the member for an insurance plans is the cost on pocket book. This is best measured by knowing what will go out of pocket, as the effective 'Out-of-Pocket Cost' for a scenario of hospitalization before insurance picks up 100%. Five elements to know for Cost vs. Risk Coverage Benefit for comparison are:

- a) Premium cost
- b) Deductible cost
- c) Coinsurance cost for Out-of-Pocket Maximum.
- d) Maximum benefit of risk coverage.
- e) Continuity of guaranteed insurance.

Effective Out-of-Pocket Cost is sum of deductible cost *plus* coinsurance cost up to its 'out-of-pocket maximum'. This is the threshold cost on pocket book before insurance picks up 100%. A low deductible, low coinsurance percentage, low coinsurance 'out-of-pocket maximum' reduces this threshold for low financial responsibility, but carries comparably higher premium.

Supplemental Medical Plans are designed to protect or reduce financial responsibility by offsetting upfront deductibles, and coinsurance 'out-of-pocket' expenses. These plans are discussed below:

Supplemental medical plans to add to TriTerm Medical

Fixed hospitalization indemnities are designed to reduce or offset the hospitalization costs. These are:

Hospital SafeGuard

This indemnity pays a fixed amount per day for hospital confinements to the calendar year maximums, and has no link with the medical insurance. Proof of hospital confinement must be furnished in the Claim Form. Money is for you to reduce or offset your effective 'Out-of-Pocket' costs and meet overhead expenses. Coverage is available for individual or entire family. It is renewable to age 65. Note the exclusions and limitations of this indemnity. Some variations apply on State and Zip Code basis

For a very nominal premium cost, two indemnity plans are available to choose from:

- Plan A: \$1,000 per day for 31 days, with \$1,000 per day for 10 days in ICU.
- Plan B: \$2,000 per day for 7 days with \$2,000 per day for 7 days in ICU.

[View brochure of these plans here.](#) [A download copy is also available here.](#)

[Open here for quote of these two indemnities and sign up.](#)

Hospital & Doctor Insurance (Health ProtectorGuard plans)

This indemnity plan pays fixed benefits on per day basis to cover hospitalization, ICU, surgical, and ambulance (ground and air). Plans are available from \$1,000 to \$5,000 per day of hospitalization and additional benefits of ICU admission \$2,000 to \$6,000 per day. In addition, benefits of day-to-day medical services like doctor visits, wellness /preventive, pharmacy service, and outpatient services are available.

[View brochure of these plans here.](#) [A download copy is also available here.](#) [Familiarize yourself with the benefits of five choices.](#)

Open here for quotes: Enter basic information and select tab **Hospital & Doctor** to find available choices of indemnities of the product Health ProtectorGuard. Click on button Details to see summary of benefits. Select one and sign up.