

Medical Benefit Claims Examples



PANTZER

Everyone's benefit needs are unique. Inside, you'll meet fictional Pantzer employees and see how they chose the medical plan that best fits their needs.

Example 1: Meet Kennedy!



Kennedy, age 29, is a single employee with an active lifestyle who exercises regularly, enjoys weekend hiking, and generally only needs routine medical care during the year. In this low-utilization example, Kennedy completes one annual preventive care visit, which is fully covered in-network, then later visits a primary care provider for a seasonal cold and follows up with a specialist for a minor recurring skin concern. During the year, Kennedy also fills three preferred brand prescriptions to help manage those short-term health needs. **This example reflects a generally healthy person who uses care occasionally, rather than someone with ongoing high medical expenses.**

Example 1: Low Healthcare Utilization – Single

(Assumes All Services are In-Network)

PLAN	OAP CHOICE			OAPIN NETWORK ONLY		HDHP OAP CONSUMER CHOICE	
Sample Health Care Services and Expenses	Billed Medical Cost	Your Cost	Comments	Your Cost	Comments	Your Cost	Comments
A. Preventive Care Visit	\$150	\$0	Covered at 100%	\$0	Covered at 100%	\$0	Covered at 100%
B. Sick Visit to Primary Care Provider (1)	\$150	\$25	\$25 copay (1x)	\$25	\$25 copay (1x)	\$150	You will be responsible for the full cost of the service (\$150) until your deductible of \$2,000 is met
C. Visit to Specialist (1)	\$200	\$50	\$50 copay (1x)	\$50	\$50 copay (1x)	\$200	You will be responsible for the full cost of the service (\$200) until your deductible of \$2,000 is met
D. Preferred Brand Prescriptions (3 scripts)	\$200/script	\$220	\$100 Rx deductible + \$40 copay (3x)	\$220	\$100 Rx deductible + \$40 copay (3x)	\$600	\$200 per script (3x)
E. Out-of-Pocket Costs (A+B+C+D)		\$295		\$295		\$950	
F. Annual Payroll Deductions		\$3,215.68		\$2,539.94		\$2,137.46	
G. Pantzer HSA Contribution			N/A		N/A	-\$500	Pantzer contributes \$500 to your HSA, which can be used to pay for qualifying medical expenses
Total Annual Cost to Employee		\$3,510.68		\$2,834.94		\$2,587.46	

Note: Contributions are based off wellness being completed

Example 2: Meet Michael!



Michael, age 42, is a single employee with a busy lifestyle who normally tries to stay active by going to the gym and coaching his child's weekend sports team, but this year he experienced several unexpected medical issues. In this example, Michael still completes his annual preventive care visit, but he also has three primary care sick visits for ongoing flu-like symptoms and breathing concerns, three emergency room visits related to worsening chest pain and dehydration, and a hospitalization with testing after his doctors determine he needs more extensive evaluation and treatment. He also has three urgent care visits for after-hours flare-ups and fills three non-preferred brand prescriptions prescribed during his recovery. **This scenario reflects a year in which a generally active person faces a sudden stretch of higher healthcare needs and unplanned medical expenses.**

Example 2: High Healthcare Utilization – Single

(Assumes All Services are In-Network)

PLAN	OAP CHOICE			OAPIN NETWORK ONLY		HDHP OAP CONSUMER CHOICE	
Sample Health Care Services and Expenses	Billed Medical Cost	Your Cost	Comments	Your Cost	Comments	Your Cost	Comments
A. Preventive Care Visit	\$150	\$0	Covered at 100%	\$0	Covered at 100%	\$0	Covered at 100%
B. Sick Visit to Primary Care Provider (3)	\$150/visit	\$75	\$25 copay (3x)	\$75	\$25 copay (3x)	\$450	Paid in full before hitting deductible
C. Emergency Room Visits (3)	\$1,500/visit	\$1,650	\$250 copay + 20% coinsurance (3x)	\$1,650	\$250 copay + 20% coinsurance (3x)	\$2,050	1st visit: paid in full before reaching deductible (\$1,500); 2nd visit: paid remainder of deductible (\$50) plus \$250 copay; 3rd visit: \$250 copay
D. Hospitalization and Testing	\$50,000	\$1,525	Pay up to deductible (\$750), then pay 20% coinsurance up to out-of-pocket maximum (\$3,250)	\$1,525	Pay up to deductible (\$1,000), then pay 20% coinsurance up to out-of-pocket maximum (\$3,250)	\$1,500	You pay 20% up to Out-of-Pocket maximum
E. Urgent Care Visits (3)	\$150/visit	\$0	No cost*	\$0	No cost*	\$0	No cost*
F. Non-Preferred Brand Prescriptions (3)	\$300/script	\$0	No cost*	\$0	No cost*	\$0	No cost*
G. Out-of-Pocket Costs (A+B+C+D+E+F)		\$3,250		\$3,250		\$4,000	
F. Annual Payroll Deductions		\$3,215.68		\$2,539.94		\$2,137.46	
G. Pantzer HSA Contribution		N/A		N/A		-\$500	Pantzer contributes \$500 to your HSA, which can be used to pay for qualifying medical expenses
Total Annual Cost to Employee		\$6,465.68		\$5,789.94		\$5,637.46	

Note: Contributions are based off wellness being completed

* Since you reached your Out-of-Pocket maximum, you would incur no costs for services

Example 3: Meet Sarah!



Sarah, age 38, is enrolled in the family plan and has a generally healthy, active household. She and her family stay busy with school, work, and weekend activities like biking, soccer, and family walks, so most years their healthcare needs are fairly limited. In this example, the family completes an annual preventive care visit that is covered in-network, has one sick visit to the primary care provider for a seasonal cold, and one specialist visit for a minor recurring issue such as eczema or allergies. They also fill three preferred brand prescriptions during the year related to those routine health needs. **This scenario represents a family with low healthcare utilization and only occasional medical expenses.**

Example 3: Low Healthcare Utilization – Family

(Assumes All Services are In-Network)

PLAN	OAP CHOICE <i>Embedded deductible</i>			OAPIN NETWORK ONLY <i>Embedded deductible</i>		HDHP OAP CONSUMER CHOICE <i>Aggregate deductible</i>	
Sample Health Care Services and Expenses	Billed Medical Cost	Your Cost	Comments	Your Cost	Comments	Your Cost	Comments
A. Preventive Care Visit	\$150	\$0	Covered at 100%	\$0	Covered at 100%	\$0	Covered at 100%
B. Sick Visit to Primary Care Provider (1)	\$150	\$25	\$25 copay (1x)	\$25	\$25 copay (1x)	\$150	You will be responsible for the full cost of the service (\$150) until your deductible of \$4,000 is met
C. Visit to Specialist (1)	\$200	\$50	\$50 copay (1x)	\$50	\$50 copay (1x)	\$200	You will be responsible for the full cost of the service (\$200) until your deductible of \$4,000 is met
D. Preferred Brand Prescriptions (3 scripts)	\$200/script	\$420	\$300 deductible + \$40 copay (3x) *	\$420	\$300 deductible + \$40 copay (3x) *	\$600	\$200 per script (3x)
E. Out-of-Pocket Costs (A+B+C+D)		\$495		\$495		\$950	
F. Annual Payroll Deductions		\$24,516.96		\$14,268.48		\$9,901.06	
G. Pantzer HSA Contribution		N/A		N/A		-\$1,000	Pantzer contributes \$1,000 to your HSA, which can be used to pay for qualifying medical expenses
Total Annual Cost to Employee		\$25,011.96		\$14,763.48		9,851.06	

Note: Contributions are based off wellness being completed

* Scenario assumes different family members for each script, meaning they each must satisfy individual deductibles until reaching \$300 family deductible

Example 4: Meet David!



David, age 41, is enrolled in the family plan and has a household with a spouse and children who stay busy with work, school, and sports throughout the year. Although the family is generally health-conscious and spends weekends hiking, attending games, and staying involved in community activities, this year brought several unexpected medical events. In this example, the family completes a preventive care visit, has three primary care sick visits for issues such as seasonal viruses and ongoing symptoms, and experiences three emergency room visits after one family member develops severe abdominal pain and dehydration. That leads to a hospitalization and testing for further evaluation and treatment, along with three urgent care visits for after-hours concerns and three non-preferred brand prescription fills related to recovery. **This scenario reflects a year in which a generally active family faces a sudden stretch of higher healthcare needs and unplanned medical expenses.**

Example 4: High Healthcare Utilization – Family

(Assumes All Services are In-Network)

PLAN	OAP CHOICE <i>Embedded deductible</i>			OAPIN NETWORK ONLY <i>Embedded deductible</i>		HDHP OAP CONSUMER CHOICE <i>Aggregate deductible</i>	
Sample Health Care Services and Expenses	Billed Medical Cost	Your Cost	Comments	Your Cost	Comments	Your Cost	Comments
A. Preventive Care Visit	\$150	\$0	Covered at 100%	\$0	Covered at 100%	\$0	Covered at 100%
B. Sick Visit to Primary Care Provider (3)	\$150/visit	\$75	\$25 copay (3x)	\$75	\$25 copay (3x)	\$450	Paid in full before hitting deductible
C. Emergency Room Visits (3)	\$1,500/visit	\$1,650	\$250 copay + 20% coinsurance (3x)	\$1,650	\$250 copay + 20% coinsurance (3x)	\$3,800	1 st + 2 nd visits: paid in full before reaching deductible (\$1,500); 3 rd visit: paid remainder up to deductible (\$550) plus \$250 copay
D. Hospitalization and Testing	\$50,000	\$1,525	Pay up to deductible (\$750), then pay 20% coinsurance up to out-of-pocket maximum (\$3,250)	\$1,525	Pay up to deductible (\$1,000), then pay 20% coinsurance up to out-of-pocket maximum (\$3,250)	\$3,750	You pay 20% up to Out-of-Pocket maximum
E. Urgent Care Visits (3)	\$150/visit	\$150	\$50 copay (3x) *	\$150	\$50 copay (3x) *	\$0	No cost***
F. Non-Preferred Brand Prescriptions (3)	\$300/script	\$510	\$300 family deductible + \$70 copay (3x) **	\$510	\$300 family deductible + \$70 copay (3x) **	\$0	No cost***
G. Out-of-Pocket Costs (A+B+C+D+E+F)		\$3,910		\$3,910		\$8,000	
F. Annual Payroll Deductions		\$24,516.96		\$14,286.48		\$9,901.06	
G. Pantzer HSA Contribution		N/A		N/A		-\$1,000	Pantzer contributes \$1,000 to your HSA, which can be used to pay for qualifying medical expenses
Total Annual Cost to Employee		\$28,426.96		\$18,196.48		\$16,901.06	

Note: Contributions are based off wellness being completed

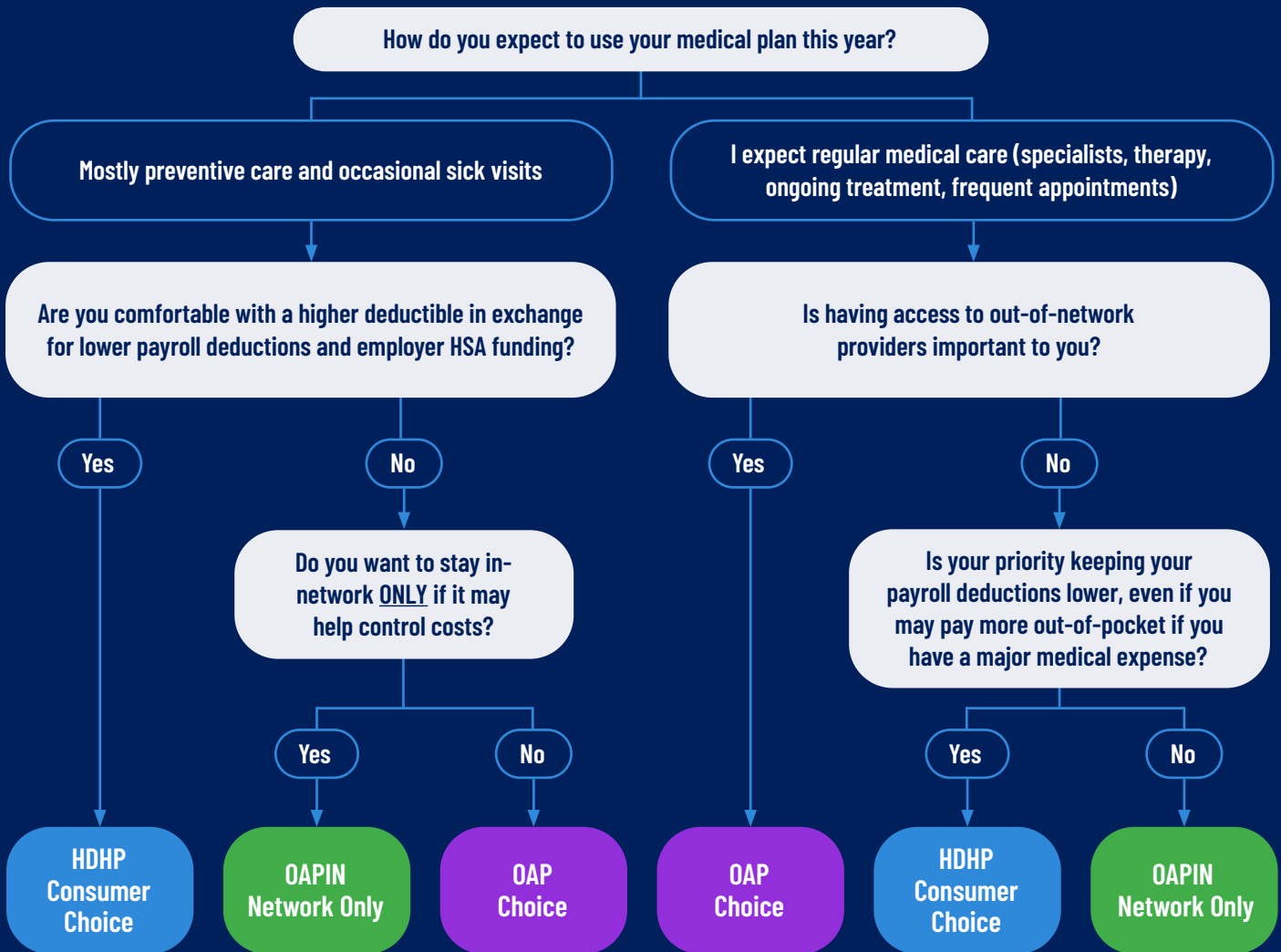
* Scenario assumes 1 family member met OOPM; assuming other family members are the ones who went to UC, they continue paying their own cost share until they reach their own OOPM or the family collectively reaches the family OOPM

** Scenario assumes family members who did not have the hospitalization have scripts & must satisfy individual deductibles until reaching \$300 family deductible

***Since you reached your Out-of-Pocket maximum, you would incur no costs for services

Which medical plan may be right for you?

Please review your medical plan options carefully before making your election. Each plan offers a different combination of payroll cost, deductible, out-of-pocket exposure, provider access, and plan design features, so it is important to consider your expected health care needs and financial preferences. Employees are encouraged to review all available enrollment resources, including the Benefits Guide and the medical plan flow chart below, to help make an informed decision.



HDHP Consumer Choice	OAPIN Network Only	OAP Choice
- Lowest payroll deductions - Employer HSA funding (\$500 individual / \$1,000 family) - Highest deductible and out-of-pocket exposure	- In-network providers only (no out-of-network coverage) - PCP copay: \$25 - Specialist copay: \$50 - Lower deductible than the HDHP	- In- and out-of-network coverage - PCP copay: \$25 - Specialist copay: \$50 - Greater provider flexibility than the OAPIN Network Only plan

Preventive care is covered at 100% for all three plan options