

Choosing the right plan for you and your family

When choosing a health plan, it is important to consider all factors related to seeking medical care, not just your monthly premium. This can include your out-of-pocket costs, whether your preferred doctor(s) is in-network, how much your prescription(s) costs and more.

Common health coverage terms

Co-pay / Co-insurance: Your share of \$ and/or % for covered healthcare services

Deductible: The amount you pay for covered healthcare services before your plan starts to pay

Maximum out-of-pocket: The limit on the amount of money you have to pay for covered medical services (including deductibles, co-pays and co-insurance)

Network: The providers and facilities (hospitals, urgent care centers, labs, etc.) your health insurer has contracted with to provide healthcare services

Plan: The health insurance coverage you buy, often referred to as a policy or product

Premium: Your monthly payment for your plan

Preventative services are 100% covered

Preventative services include:



Annual physical with your Primary Care Physician (PCP)



Some lab tests



Immunizations



Certain medical testing, ex: colonoscopy, mammogram, etc.



And more...

What to consider when picking a plan

Do you have a preferred doctor?

Check out our provider directories to see if your doctor(s) are included in your plan's network.

Do you have a chronic condition, or have a surgery planned?

Check to see if you have a co-pay or need to meet your deductible first. Check the amount of co-insurance you need to pay.

Do you regularly take medications?

Check the plans you are considering to see how much your prescriptions will cost.

Do you need to see a specialist?

Check each plan to see if you need a referral to see another doctor. See if the plan will pay for specialists that are "out-of-network" or in another state.

Visit HealthSourceRI.com/Calculator to compare plans and get a quick quote.



Review the two plan scenarios below

See why it's important to consider more than just the monthly premium when choosing a plan.

PLAN A

Has a lower monthly bill, but you have to pay for most of your health services (doctor visits, mental healthcare etc.) until you've reached the deductible.

Monthly/Annual Premium: \$200/ \$2,400*

Annual Deductible: \$6,500

PLAN B

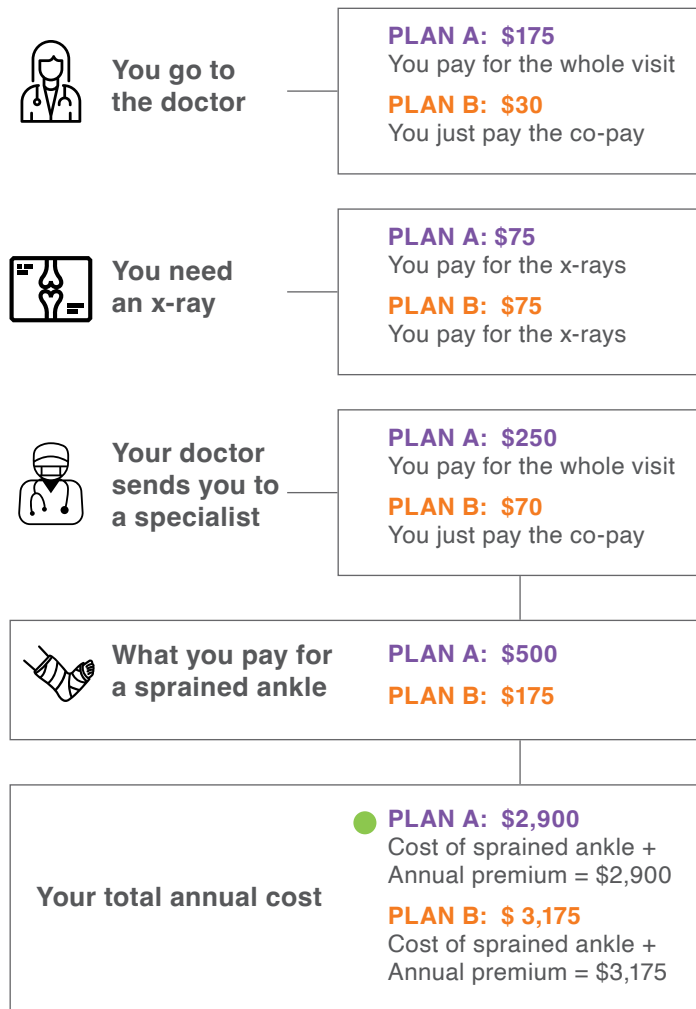
Has a higher monthly bill, but pays for most of your health services (doctor visits, mental healthcare etc.) even before you've reached your deductible.

Monthly/Annual Premium: \$250/ \$3,000

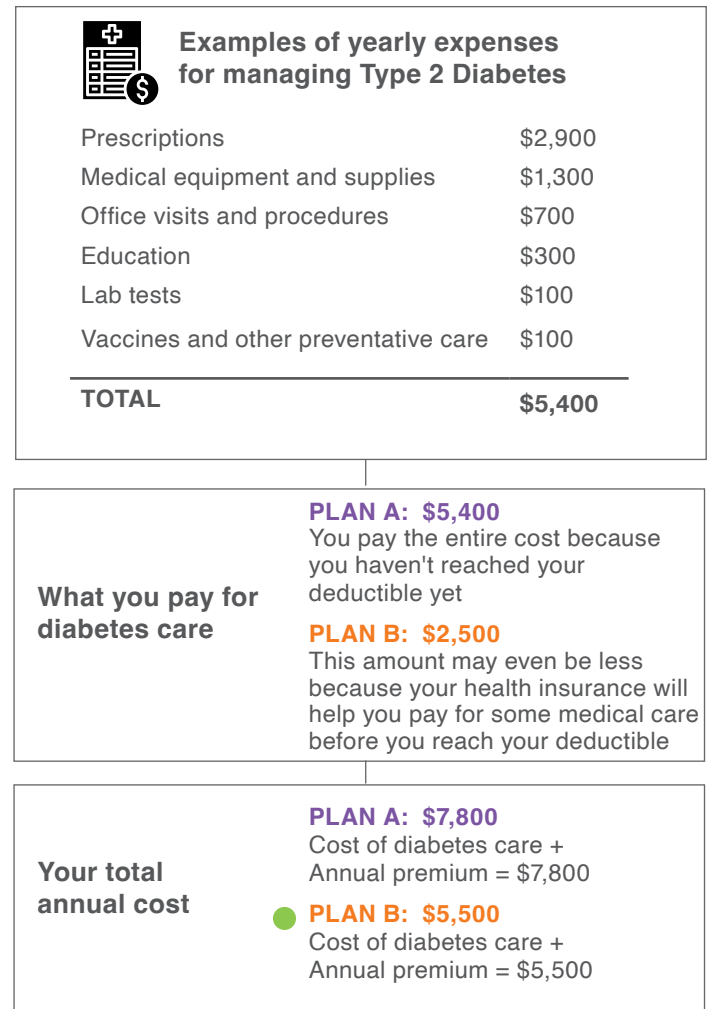
Annual Deductible: \$2,500

*Plan A is \$600/yr less than Plan B

You fall and twist your ankle



You have diabetes



● — Best Value

You can see from the two scenarios above that if you have no medical costs or only minor expenses, a plan with lower premiums like Plan A may be right for you, but if something more serious happens or you have a chronic condition, a plan with lower out-of-pocket costs like Plan B will save you more money in the end. These are all things to consider when choosing a health plan for you and your family.