



BENEFITS UNLOCKED

Health Plan Comparison

Health Plan Comparison Worksheet

Compare options side-by-side before you elect. Premium alone is not the whole story.

Estimated annual cost = Annual premium + Expected out-of-pocket (also check worst case: premium + OOP max).

	Plan A	Plan B	Plan C
Plan name			
Your annual premium (\$)			
Deductible - individual (\$)			
Deductible - family (\$)			
Out-of-pocket max (\$)			
Primary care copay			
Specialist copay			
Rx tier 1 / 2 / 3			
HSA employer contribution (\$)			
Must-have doctors in-network? (Y/N)			
Expected medical use (L/M/H)			
Est. total yearly cost (\$)			
Worst-case yearly cost (\$)			

Plan type quick reference

PPO - broader network, often no referrals. HMO - in-network + referrals often required. HDHP - high deductible; may pair with HSA (IRS eligibility rules). Verify HSA/FSA contribution limits annually via IRS Pub 969.

Official resources

- HealthCare.gov - Choose a plan
<https://www.healthcare.gov/choose-a-plan/>
- HealthCare.gov - SBC glossary
<https://www.healthcare.gov/sbc-glossary/>
- IRS Publication 969 - HSAs and FSAs
<https://www.irs.gov/publications/p969>